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In HSC you will be taking examinations and producing coursework. After each unit title you find a letter.

Kev

(I) = Internal coursework

Exam board: OCR

(E) = External examination

The purpose of these activities is to prepare you for level 3 studies. Some of it will give you background information that will help with your understanding of key concepts. Some of it you will be able to put straight into your course work. I am not expecting you to spend more than three hours a week on this work. If there is anything you do not want to do then miss it out.

Week 1: Building Positive relationships in HSC (I)

In this unit you will need to carry out some practical activities and some research. The activities for this week will give you some of the skills and knowledge you need to complete the Unit 1 coursework.

Learning Activities

1) Braille

Braille is writing system which enables blind and partially sighted people to read and write through touch. It was invented by Louis Braille (1809-1852), a French teacher of the blind. It consists of patterns of raised dots arranged in cells of up to six dots in a 3 x 2 configuration. Each cell represents a letter, numeral or punctuation mark. Some frequently used words and letter combinations also have their own single cell patterns. There are a number of different versions of Braille:

- 1. Grade 1, which consists of the 26 standard letters of the alphabet and punctuation. It is only used by people who are first starting to read Braille.
- 2. Grade 2, which consists of the 26 standard letters of the alphabet, punctuation, and contractions. The contractions are employed to save space because a Braille page cannot fit as much text as a standard printed page. Books, signs in public places, menus, and most other Braille materials are written in Grade 2 Braille.
- 3. Grade 3, which is used only in personal letters, diaries, and notes. It is a kind of shorthand, with entire words shortened to a few letters.

Braille has been adapted to write many different languages, including Chinese, and is also used for musical and mathematical notation.





Braille Basic letters .. *: :: :• :. .: f i b C d e h k L m а g : ። ë ÷ i. •• •• n q r W X Z **Accented letters** :: **:** •• î à â ä/æ è é ê ē ĭ ij • E ÷ ù ò ô o/ce ú Ü Words and abreviations .. •• *: .: : :• :: :. like but can do every from go. have Just knowledge more not a ፥ rather live it for people quite that very and 30 us: you 03 : ij ÷ of the with child/ch shall/sh this.th which/wh er out/ou OW bb gh •: dd cn gg; were ing Punctuation 22 2 " * ! Numerals •• 1 2 3 5 6 7 8 9 4 0 Special signs numerical letter capital numeral literal italic

index

sign

index

sign

sign

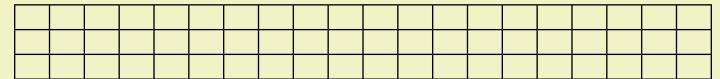
sign

sign

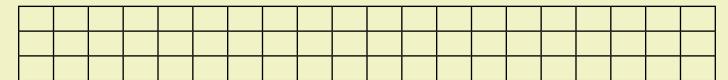


Transliteration: "Be kind to others"

Write your own name in Braille



Write your friend's name



2) Makaton

Talking does not just involve speaking. Watch someone talking, they will not just be saying words, but they will also be using hand movements or gestures, facial expression, eye contact and body language (posture and movement). All this is communication.

Makaton was developed in the 1970s to help people with learning disability to communicate. It is now widely used with a variety of children with communication difficulties. Makaton uses speech and gesture, facial expression, eye contact and body language. It is a language program which is based on a selected list of everyday words, such as Daddy, Door, Fall and In. Makaton uses speech together with a sign (gesture) and/ or a symbol (picture), for example:

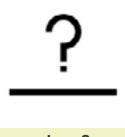


sleep





where?



where?

Signs and symbols give extra information which can be seen. Research has shown that signs/ gestures are easier to learn than spoken words. This makes sense. Babies use gestures before they can speak, to tell us what they want, for example pointing at the biscuit tin/ cookie jar or holding out arms to be lifted. Makaton can help if a child has difficulties with understanding and speaking. Through Makaton, a child can develop important communication skills.

If a child must rely on speech development alone, these vital skills may not develop properly: eye contact, turn taking, making choices, understanding, and sharing information. Children who have difficulty understanding and speaking often become frustrated or withdrawn. They may communicate this through behaviours such as screaming and kicking which are unpleasant for the child and for carers. By using Makaton, it is helping the child to communicate in a more acceptable way.

What is a symbol?

A symbol is a picture used to represent a word. The picture representation is simple and easy to remember, for example:



When are symbols used?

Symbols are used when a child has difficulty with hand movements making signing inaccurate or impossible. Symbols are used to develop reading and language skills. It is important that only a few signs/symbols are used at the beginning. These will be the most important ones for the child. They will be chosen by the people who know the child best. As the child learns, more words will need to be introduced.

Activity

Follow this link and answer the questions below: https://www.bbc.co.uk/cbeebies/joinin/ something-special-what-is-makaton

- 1. What are the key points the presenter, Kate Duggan, makes?
- 2. What is Kate Duggan's job?
- 3. Do some research of your own to briefly outline what that job is. You need to reference where you got this information from.
- 4. This means copying the URL of the website and stating the date you used the website (e.g. 23/04/20) or if handwriting your answers naming the website or book you got the information from and stating the date you used the website (e.g. 23/04/20)
- 5. Using the CBeebies something special website try some Makaton signs yourself. If you are feeling very brave, try to teach some of the signs to your friend or family.
- 6. This is a message from me. Can you work out what I am saying?



3) Different settings, service user groups and professions in HSC

Follow the links below, watch the video's and answer the question(s) set.

Older Adults Sunderland Social services: https://www.youtube.com/watch?v=7mTNwZiN4x8

- What is a Social Worker?
- What are the different activities that the social workers in this clip carry out during their day?
- Would you want to do this job? Explain your answer.

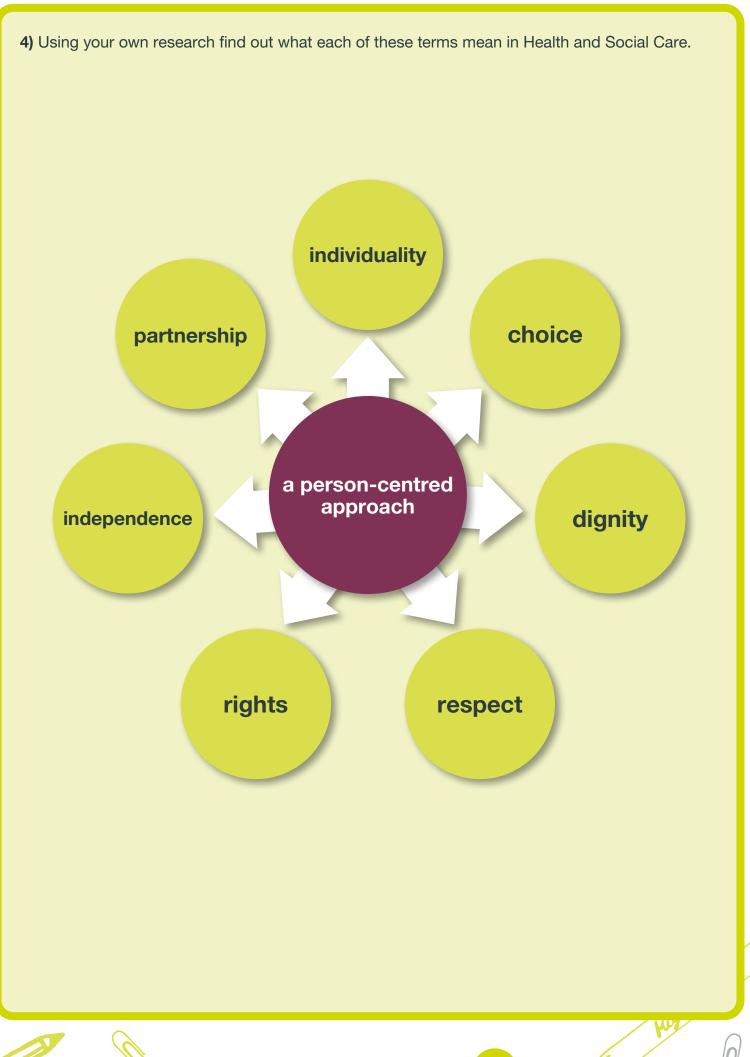
Supporting carers. Going in a person's home. https://www.youtube.com/watch?v=5mAo-KilD4w

- When this clip talks about carers what do they mean?
- What is Nicola's task in this clip?
- What does respite care mean?
- What is the example in this clip?
- What is autism? (Keep your answer brief)

Extension task - Time to reflect. This is challenging.

Child protection conference: https://www.youtube.com/watch?v=VcsFzoBrmb0

What are the positives of being a child protection social worker and what are the disadvantages of being a child protection social worker? Watch this clip and write two lists. Would you want this job? Explain your answer.





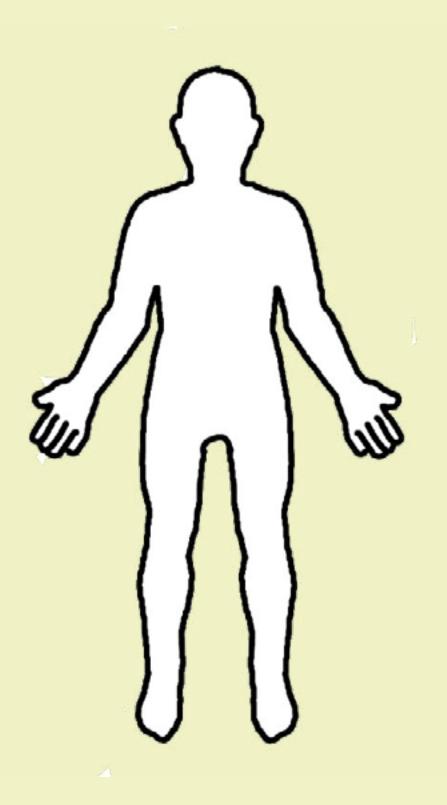


Week 2: Anatomy and Physiology for HSC (E)

In this unit you will need to carry out some practical activities and some research. The activities for this week will give you some of the skills and knowledge you need to complete the Unit 1 coursework.

Where are all the body parts?

Print this image (or get a similar image from the internet), or hand draw it. Add as many body parts onto the diagram as possible. Write the name of the body part and draw a line to the correct part of the body.



Week 2: Anatomy and Physiology for HSC (E)

Creating posters or written reports on a chosen diseases.

Where will this task lead you?

- To a knowledge of diseases that will support you in the Unit 4 examination preparation.
- To the development of research skills.
- To the development of report writing skills required for both university and employment.

What do you have to do?

- Research in detail the diseases you have chosen from the unit 4 syllabus.
- Create a bibliography of all the sources you investigated and used.
- Create a poster which reflects your research and has an illustration
- Write a detailed report on your chosen disease.
- Find a case study that reflects your findings. (Must be real)

You need to choose three diseases. They can all be written reports or all posters or a mixture.

Include all the following for your chosen diseases

- 1. The name of the disease.
- 2. The causes (all) of the disease.
- 3. How the disease can be diagnosed.
- 4. The symptoms and progress of the disease.
- 5. The effects on lifestyle of having the disease.
- 6. Give some concluding comments or points about your chosen disease.

Write a list of materials you used. This means copying the URL of the website and stating the date you used the website (e.g.23/04/20) or if handwriting your answers naming the website or book you got the information from and stating the date you used the website (e.g.23/04/20)

Use this information to create either an A4 poster or a written report.

Cardiovascular diseases

- hypertension
- angina
- heart attack

Respiratory malfunctions

- asthma
- emphysema
- cystic fibrosis

Digestive malfunctions

- Irritable Bowel Syndrome
- gallstones
- coeliac disease

Musculoskeletal malfunctions

- arthritis
- osteoporosis

Malfunctions of control and regulatory systems brain, i.e. stroke

- CNS, i.e. multiple sclerosis
- endocrine, i.e. diabetes
- kidney, i.e. nephrotic syndrome
- liver, i.e. cirrhosis

Malfunctions of eye and ear

- glaucoma
- AMD
- cataracts
- retinopathy
- deafness





Week 3: Nutrition for health

Describe the functions of nutrients.

Produce a set of detailed posters or notes for each of the following which demonstrates your understanding of the nutrient and their function.

Simply this means telling me all about the nutrients and what they do.

You can use pictures or diagrams in this work. (Use the syllabus's below to help. (Syllabus 2.1 and 2.2)) Write a list of materials you used. This means copying the URL of the website and stating the date you used the website (e.g.23/04/20) or if handwriting your answers naming the website or book you got the information from and stating the date you used the website (e.g.23/04/20)

- Carbohydrates
- Proteins
- Lipids
- Vitamins
- Minerals
- Energy

Nutrients

Macronutrients

Carbohydrates

- sugar
- starch
- non-starch polysaccharides
- sugar substitutes (e.g. artificial sweeteners, sorbitol)

Proteins

- polypeptides
- essential and non-essential amino acids
- proteins of high and low biological value
- novel sources (e.g. mycoprotein (Quorn))

Lipids

- saturates
- monounsaturates and polyunsaturates
- trans fats
- cholesterol
- essential fatty acids

Micronutrients

Vitamins

- fat-soluble (e.g. A, D, E and K)
- water-soluble (e.g. B group, C)

Minerals e.g.

- iron
- calcium
- magnesium
- sodium,
- potassium,
- selenium,
- zinc

Energy

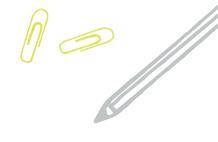
- dietary sources
- as kilocalories and kilojoules
- energy values for protein, fat, carbohydrate, and alcohol

Functions

- source of energy
- muscle repairing and synthesis
- supports cognitive function
- supports healthy immune system







Useful websites

The function of nutrients

Organisation: Unicef

Resource Title: Micronutrients and Macronutrients

Website Link: http://www.unicef.org/nutrition/training/2.1/5.html

Description: An interactive presentation giving information about macronutrients and

micronutrients and providing an online test to assess learning.

Nutrition advice panel

Organisation: NHS Choices

Resource Title: Health A-Z - Conditions and treatments Website Link: http://www.nhs.uk/Conditions/Pages/hub.aspx

Description: An index listing and describing conditions and their treatment.

A useful source of film clips for discussion is the Channel 4 series Supersize vs Superskinny.

NHS concerns today

Organisation: WHO

Resource Title: Diet, nutrition and the prevention of chronic diseases

Website Link: http://www.who.int/dietphysicalactivity/publications/trs916/summary/en/

Description: This resource considers evidence relating to the guidelines to reduce the burden of disease related to obesity, diabetes, and cardiovascular disease, several forms of cancer,

osteoporosis and dental disease.

Week 4: Equality, diversity and rights in health and social care

Learner Activity: Focusing on best practice

This work aims to develop your understanding of how to recognise best practice in health and social care environments.

For Activity 1, you should read a case study of practice which describes working with individuals with challenging behaviour. This case exemplifies many elements of best practice and is engaging to read.

Phillipa and Chris's story

https://www.skillsforcare.org.uk/Document-library/Skills/People-whose-behaviour-challenges/Case-studies/Brandon%20Trust.pdf

Activity 1

Read Phillipa and Chris's story and list the examples of best practice that are described against the following headings:

Being non-judgmental

Respecting the views, choices and decisions of an individual who requires care or support

Anti-discriminatory practice
Valuing diversity
Using effective communication
Following agreed ways of working
Provision of training and professional development
Mentoring, monitoring and performance management
Staff meetings to discuss issues/practice
Activity 2 Go to the following website: https://www.gmc-uk.org/ethical-guidance/ethical-hub/learning-disabilities
Go through all sections, they are called: 'Learning disabilities', Working with Carers', and 'Communication'.
Watch all the videos in each section. Answer the following questions:

Who is talking in the clip?What is the clip about?

• What is the main point being made in the clip?

Week 4 continued

Activity 3

Discrimination can occur based on gender, sexuality, ethnicity, religion, social class, age, and impairment/health status. For each of the cases in the table, decide whether it is an example of unfair discrimination and so, on what basis.

Case	Y/N	If yes, on what basis? If no, explain why.
A GP refers more female patients for bone density scans. (Additional info on next page)		
2. A health visitor normally spends about half-an-hour on each visit to a parent or parents. However, she only stays 10 minutes when she visits a lesbian couple and their baby.		
3. Joan owns a craft shop and welcomes people of all ages to come in and look around, even if they do not buy anything. One day she sees a carer with a group of children with learning disabilities approaching the shop. Joan quickly changes the OPEN sign on the shop door to CLOSED.		
4. A notice at the entrance to a mosque informs people that they should remove their shoes before entering. The notice is also printed in braille.		
5. A bhangrā band advertises for a new member to play the sampera. Tariq is a skilled player and he applies. The other members reject him because neither he nor his family have any links with the Punjab. (Additional info on next page)		
6. Bill asks his local health centre for a flu jab. He is told he cannot have one because he is young and fit, and the jabs are only available for older people and those with poor health.		







Week 4 continued

Additional information:

Bhangra is a form of south-Asian music and dance highly influenced by the culture and language of Puniab.

Sampera is commonly thought of as a snake dance: https://en.wikipedia.org/wiki/Snake dance

A bone density scan allows for the early detection of osteoporosis and bone loss. With this knowledge, numerous therapies (e.g. diet, dietary supplements, weight-bearing exercise, medication) may be implemented to slow or stop the progression of the disease. One in two women and one in eight men over the age of 50 will have an osteoporosis-related fracture in their lifetime.

Activity 3

Poor treatment includes:

- neglect
- rejection
- hostility
- punishment
- violence
- bullying
- unfair treatment based on:
 - gender
 - sexuality
 - ethnicity/religion
 - social class
 - age
 - impairment/disability

These sometimes overlap – for example, bullying often involves violence, and hostility often goes with rejection and neglect. Here are five types of poor treatment and five examples of people being treated badly. Match up the treatment with the example, writing your answers in the boxes.

neglect rejection punish	hment bullying violence
1. Holly was adopted when she was 3 years old. Now she is grown up, she has got in touch with her birth mother who makes it clear that she does not want to see Holly again.	
2. A care worker in a residential home tells an elderly resident, "You pressed that call button three times last night for no reason, so I'm going to take you to your room today. You can stay on your own."	
3. At coffee breaks with her workmates, Linda keeps making remarks to Olwen about her weight, such as "Is that a new dress you're wearing or are you tangled up in a parachute?"	
4. Paul and Susan go on holiday for two weeks, leaving their children, aged 10 and 7, alone at home.	
5. Mair, aged 9, is at school. She is resting her head on her desk. The teacher comes up behind her, grabs her hair and jerks her head up.	

Week 4 continued

Activity 4

Although carers are expected to treat clients well, this does not always happen. Difficulties are created by the barriers related to carers and by barriers presented by clients.

Barriers related to care workers might include the carer's lack of skill and the carer's attitude – including prejudices, stereotyping, a lack of motivation, conformity with workplace norms, a preoccupation with the carer's own needs, ethical dilemmas and stress and physical strain.

Here are five examples of different barriers relating to carers. Match up the barrier (a - e) with the example.

- (a) Prejudice
- (b) Lack of motivation
- (c) Conformity with inappropriate workplace norms
- (d) Stereotyping
- (e) Preoccupation with own needs or lack of skill

Maureen knows that she ought to make conversation with the clients, but she just cannot be bothered.

Asif works on the night shift in a nursing home. Whenever a resident presses the alarm call button, he goes to find out what is wrong. He notices that the other staff switch the alarm off without checking on the resident. They tell Asif that 'if it's urgent, they'll call again'. Within a few days, Asif begins to do the same.

A nurse on a children's ward dislikes one boy because she believes he is acting snobbishly by speaking in what she thinks is an upper-class accent.

A GP decides not to explain the side-effects of a drug to a patient because she is a woman. The GP believes that women tend to panic when given information of this sort.

Mandy knows she ought to be talking to patients about themselves but, instead, she keeps telling them about the trouble she has with her children.

Activity 5

Client barriers are factors about clients or their circumstances that make it harder for carers to treat them well. These include lack of status and power, a tendency for them to conceal their real needs and concerns, a tendency to exaggerate their needs in order to get the care they feel they need, and hostile behaviour, physical impairment, communication barriers and poor access to services and resources.

Here are four examples of different client barriers. You will see that, in each example, the client's behaviour increases the risk that they will not receive the treatment they need at the time, or perhaps in the future. Match up the client barrier with the example on the next page.

- (a) Lack of status
- (b) Concealing problems
- (c) Attention seeking
- (d) Hostile behaviour

Penny is very abusive to the community psychiatric nurse who visits her. Penny accuses the nurse of spying on her for the police.

George calls 999 in the middle of the night because he is worried about a feeling of tightness across his chest. He tells the switchboard operator that he is having a heart attack and needs a doctor.

Vikram does not bother to complain about how he is neglected in his residential home, because he thinks he will not be listened to or believed.

Monica complains to her GP about her back pain, hoping that the GP will encourage her to talk, and perhaps ask her about her relationship with her abusive partner.

Activity 6

Research the following statements to establish if they are **True** or **False**.

- 1. Statistically, men are more likely to suffer from mental illness than women.
- 2. Among children, there is no class difference in rates of mental disorders.
- 3. Children from social class I and II eat more fruit and fewer sweets than children from social class IV and V.
- 4. Ethnic minority groups from Caribbean backgrounds have particularly high levels of strokes.
- 5. Ethnic minority groups from the Indian subcontinent have the highest level of heart disease.
- 6. The New Right believe that the working classes have worse health than the middle classes because of their lifestyles.
- 7. Men in professional careers are more likely to suffer coronary heart disease than unskilled manual male workers.
- 8. Males in the lowest social classes are around three times more likely to suffer from schizophrenia than in the highest social classes.
- 9. Bangladeshi men have the highest rates of smoking of all social groups in the UK.
- 10. Young men between the ages of 15-24 have higher suicide rates than young women of the same age.
- 11. People in social class I are more likely to suffer strokes than people in the working classes.
- 12. The working classes are more prone to most types of cancer than the middle classes.
- 13. In all age groups, males are more likely to be obese or overweight than females.
- 14. Those in social class 1 have a life expectancy of about 7 years more than people in social class V.
- 15. Men in some areas of Glasgow have a life expectancy of 54.

(Answers can be found at the back of this workbook)

True or False? (T/F)					
1	4	7	10	13	
2	5	8	11	14	
3	6	9	12	15	

Activity 6

Additional Activity Lists

Independent living for young people at a young age - useful to view: https://www.youtube.com/watch?v=8QvztlRMJ1Y

Future Learn Activity

- You need to start by registering if you are not already registered: https://www.futurelearn.com/register
- This is the course you could do: https://www.futurelearn.com/courses/anatomy-know-your-abdomen

Future Learn will ask you to pay money to get a formal certificate - please do not do this. This course should be free for you to do.

It is also useful to watch TV programmes about Health and Social Care settings. It is better to watch programmes in real settings such as Ambulance or 24 Hours in A&E, etc. Watch carefully how the staff interact with service users. The language they use, how they position their bodies. Also look at how staff interact with other staff. The language they use, how they position their bodies. Is there a difference.

Answers for Activity 6 - True or False?

- 1. Statistically, men are more likely to suffer from mental illness than women. (True)
- 2. Among children, there is no class difference in rates of mental disorders. (False)
- 3. Children from social class I and II eat more fruit and fewer sweets than children from social class IV and V. (True)
- 4. Ethnic minority groups from Caribbean backgrounds have particularlyhigh levels of strokes. (True)
- 5. Ethnic minority groups from the Indian subcontinent have the highest level of heart disease. (True)
- 6. The New Right believe that the working classes have worse health than the middle classes because of their lifestyles. (True)
- 7. Men in professional careers are more likely to suffer coronary heart disease than unskilled manual male workers. (False)
- 8. Males in the lowest social classes are around three times more likely to suffer from schizophrenia than in the highest social classes. (True)
- 9. Bangladeshi men have the highest rates of smoking of all social groups in the UK. (True)
- 10. Young men between the ages of 15-24 have higher suicide rates than young women of the same age. (True)
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- 12. The working classes are more prone to most types of cancer than the middle classes. (True)
- 13. In all age groups, males are more likely to be obese or overweight than females. (True)
- 14. Those in social class I have a life expectancy of about 7 years more than someone in social class V. (True)
- 15. Men in some areas of Glasgow have a life expectancy of 54. (True)







