

# BTEC Level 1/2 Tech Award in Health and Social Care

First teaching September 2017



## Sample Marked Learner Work

**Subject: - Health and Social Care**

**Component 2 – Health and Social Care Services and Values**

**Learning Aim A – Understand the different types of Health and Social Care services and the barriers to accessing them**

**Learning Aim B – Demonstrate care values and review own practice**

**Level 1/ Level 2**

**Pass/Distinction Level**

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You will need to refer to the appropriate specification alongside these sample materials.

Component 2 from the Level 1/Level 2 BTEC Tech Awards in Health and Social Care can be found by typing the following into your web browser (Google Chrome).

<https://qualifications.pearson.com/en/qualifications/btec-tech-awards/health-and-social-care.html>

### Note:

- The Authorised Assignment Briefs (AABs) used for generating this learner work is the same as the one provided by Pearson, but the scenarios for Assignment B have been substituted by the assessor. Centres are expected to get the AAB fully internally verified prior to being issued to the learners. The case study used for Learning aim A is taken from the exemplar case studies available on the website.
- The learner work generated is an exemplar of standard for Learning Aims A and B. We expect centres to use this resource to exemplify how to structure a response to a task. We also encourage centres to use this work to standardise their Assessment teams and demonstrate to learners the level of work expected to achieve the different targeted grades outcome.

**In preparation for the first teaching from September 2017 and as a part of the on-going support that we offer to our centres, we have been developing support materials to help you better understand the application of BTEC Tech Awards Level 1 Level 2 qualification.**

**The following learner work has been prepared to demonstrate indicative standards at Pass and Distinction level across a component.**

**Did you know?...**

We've worked closely with over 5,000 employers, universities, teaching professionals and trainers to develop the new BTEC Tech Awards... That means teacher and tutors can be confident their new BTEC courses contain the knowledge and employability skills students need to succeed at higher level study and in their chosen career.

BTEC Tech Awards provide work-related learning across a range of sectors. Delivering the knowledge, skills and under need to prepare for their chosen career, BTEC Tech Awards offer progression to higher education, employment or further study.

BTEC Tech Awards use a combination of assessment styles to give your students confidence they can apply their knowledge to succeed in the workplace – and have the study skills to continue learning on higher education courses and throughout their career. This range of vocational assessments, both practical and written, mean students can showcase their learning and achievements to best effect when they take their next step, whether that's supporting applications to higher education courses or potential employers.

On successful completion of a BTEC Tech Award qualification, learners can progress to or within employment or continue their learning within the same or related areas of study programmes.

They provide a more practical, real-world way of learning and their value is widely recognised by teaching professionals, employers, and learners and can be studied full- or part-time.

Each programme of study covers a number of components, for which students must present evidence based on their work and studies to demonstrate the knowledge and skills they've developed on the course.

## BTEC Assignment Brief

<b>Qualification</b>	Pearson BTEC Level 1/Level 2 Tech Award in Health and Social Care
<b>Component number and title</b>	<b>2: Health and Social Care Services and Values</b>
<b>Learning aim</b>	A: Understand the different types of Health and Social Care services and the barriers to accessing them
<b>Assignment title</b>	Health and Social Care Values
<b>Assessor</b>	Ms B. Alexander
<b>Issue date</b>	07/05/18
<b>Hand in deadline</b>	25/05/18

<b>Vocational Scenario or Context</b>	<p>This Assignment Brief is about the different types of Health and Social Care services and the barriers individuals sometimes face when they are trying to access the services.</p> <p>Please choose one of the case studies attached to this Assignment Brief to base your work on.</p>
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<b>Task 1</b>	<p>For this task, you must produce a review of the health and social care services in your area, and how they would meet the needs of the individuals in the case study you have chosen to use.</p> <p>Your review will be divided into three sections</p> <p><b><u>Section 1</u></b></p> <p>For this section, you must explain how the health and social care services in your area will meet the needs of each of the individuals in your chosen case study.</p> <p>In your work, you must refer to the health and the social care needs of your chosen individuals and link these to the service that will meet that need.</p>
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	<p><b><u>Section 2</u></b></p> <p>In this section, you must choose <b>one</b> of the health or social care services you have written about in section one.</p> <p>You should explain how barriers could have an effect on whether one of your chosen individuals could use the service.</p> <p>You should also include examples of any difficulties each individual may have in accessing the service.</p> <p><b><u>Section 3</u></b></p> <p>In this section, you must assess how suitable the health and social care services are in meeting the needs of your chosen individuals.</p> <p>You should then choose one of the health and social care services, and make realistic suggestions for overcoming the barriers you have explained in section two. Please justify, (give reasons) for your suggestions.</p> <p>Then you should also analyse how well the health and social care services actually meet the needs of your chosen individuals, explaining how barriers for one service can be overcome.</p>
<b>Checklist of evidence required</b>	Review
<b>Criteria covered by this task:</b>	
Component /Criteria reference	To achieve the criteria you must show that you are able to:
<b>A2.D1</b>	Assess the suitability of health and social care services for individuals in a given scenario, making justified and realistic suggestions for how barriers for one service can be overcome.
<b>A2.M1</b>	Analyse the extent to which health and social care services meet the needs of individuals in a given scenario, explaining how barriers for one service can be overcome.
<b>A.2P2</b>	Explain how barriers could affect the use of one health or social care service for an individual in a given scenario.
<b>A.2P1</b>	Explain how health and social care services meet the needs of individuals in a given scenario.
<b>A.1M2</b>	Outline barriers that would affect the use of one health or social care service for an individual in a given scenario.

A.1M1	Outline ways in which health and social care services meet the needs of individuals in a given scenario.
A.1P2	Identify barriers that might prevent individuals accessing a health or social care service.
A.1P1	Identify health and social care services that meet some of the needs of individuals in a given scenario.
<b>Sources of information to support you with this Assignment</b>	<b>Books</b> Hetherington A, Rasheed E., <i>BTEC First Level 2, (3<sup>rd</sup> Edition)</i> , (Hodder, 2013), ISBN: 9781444186567
<b>Other assessment materials attached to this Assignment Brief</b>	Case studies 1, 2 and 3.

## BTEC Assignment Brief

<b>Qualification</b>	Pearson BTEC Level 1/Level 2 Tech Award in Health and Social Care
<b>Component number --- -----and title</b>	<b>2: Health and Social Care Services and Values</b>
<b>Learning aim</b>	B: Demonstrate care values and review own practice
<b>Assignment title</b>	Health and Social Care Values in Practice
<b>Assessor</b>	Ms B. Alexander
<b>Issue date</b>	05/06/18
<b>Hand in deadline</b>	22/06/18

<b>Vocational Scenario or Context</b>	<p>As part of your studies, you will have learnt about the care values and how important they are in supporting people who use health and social care services.</p> <p>You must now take part in two health and social care 'role play' situations to demonstrate your understanding of the care values.</p> <ol style="list-style-type: none"> <li>1. You are on work experience at a residential home for older adults, you are shadowing a carer for the shift and you are helping to look after the residents at lunch time, helping them to sit down, order their food and eat it. Some residents have dementia, others have conditions such as arthritis. Demonstrate how you would apply care values.</li> <li>2. You are volunteering at a hospital, shadowing a play therapist who works on the children's ward. An eight year old child has been admitted for tests, but it is suspected that there is a safeguarding issue, as there is unexplained bruising on her body. Demonstrate how you would apply care values.</li> </ol>
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<b>Task 1</b>	<p>This task is divided into three parts</p> <p><b><u>Part 1</u></b></p> <p>You must demonstrate all of the following care values, in each role play:</p> <ul style="list-style-type: none"> <li>• Empowering and promoting independence.</li> <li>• Respect for the individual.</li> <li>• Maintaining confidentiality.</li> <li>• Preserving the dignity of individuals.</li> <li>• Effective communication that displays empathy and warmth.</li> <li>• Safeguarding and a duty of care.</li> <li>• Promoting anti-discriminatory practice.</li> </ul> <p>Your teacher will complete an Observation Record of your role play demonstrations.</p> <p><b><u>Part 2</u></b></p> <p>Following completion of your role play demonstrations, you must produce a review describing what went well and what did not go so well in your demonstrations.</p> <p>You will get some feedback from your teacher and you must comment on this in your review.</p> <p><b><u>Part 3</u></b></p> <p>You must now add a further section to your review which recommends improvements in the way you applied the care values, justifying (giving reasons for) your suggestions.</p> <p>Your recommendations must take into account, and refer to, the feedback received from your teacher.</p>
<b>Checklist of evidence required</b>	<ul style="list-style-type: none"> <li>• Teacher Observation Record of the demonstrations</li> <li>• Review.</li> </ul>
<b>Criteria covered by this task:</b>	
Component /Criteria reference	To achieve the criteria you must show that you are able to:
<b>B.2D2</b>	Demonstrate the care values independently in a health or social care context, making justified and appropriate recommendations for improvements of own application of the care values that incorporate feedback.



<b>B.2M2</b>	Demonstrate the care values independently in a health or social care context, making suggestions for improvements of own application of the care values that incorporate feedback.
<b>B.2P4</b>	Describe positive and negative aspects of own demonstration of the care values and comments on aspects of feedback.
<b>B.2P3</b>	Demonstrate the care values independently in a health or social care context.
<b>B.1M4</b>	Outline positive aspects of own demonstration of care values and respond to feedback.
<b>B.1M3</b>	Demonstrate the care values in a health or social care context, making use of notes as support.
<b>B1.P4</b>	Summarise briefly, some key points from feedback.
<b>B.1P3</b>	Demonstrate some care values in a health or social care context, making use of notes as support.
<b>Sources of information to support you with this Assignment</b>	<p><b>Books</b></p> <p>Garnham P, Howarth H, Higgins H, Lavers S, <i>BTEC First in Health and Social Care</i>, Pearson Education Ltd., (2012) ISBN: 9781446901359</p> <p>Baker B, Burgess C, Haworth E, <i>BTEC Tech Award in Health and Social care</i>, Pearson Educational Ltd., (2017) ISBN: 978 292, 20092 7</p> <p><b>Journals</b></p> <p><i>Community Care.</i></p> <p><i>Nursing Times.</i></p> <p><b>Websites</b></p> <p><a href="https://www.learningdisabilitytoday.co.uk">https://www.learningdisabilitytoday.co.uk</a></p>
<b>Other assessment materials attached to this Assignment Brief</b>	N/A

<b>Scenario</b>	<p>Two role play situations have been provided to support learners demonstrate the care values in health and social care settings.</p> <p>Teachers can substitute alternative situations for these, so long as they allow learners to demonstrate all seven care values health or social care contexts.</p>
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<b>Task 1</b>	<p><b>Part one</b> of the task requires learners to demonstrate the 7 care values in each setting. For the higher grading criteria, (B2M2 and B2D2), learners will need to demonstrate the care values independently without support or the use of notes.</p> <p>The evidence for the demonstrations should be an individual Observation Record for each learner, signed and dated by the teacher.</p> <p><b>Part two</b> will comprise a review by the learner which builds on feedback from the observing teacher and recommends improvements where needed.</p>
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### Introduction to Learner work

The learner work that follows has been assessed accurately to national standards. This is one example of **Pass** grade achievement for **Learning Aim A** and Distinction grade for **Learning Aim B** on an internally assessed component.

The learner is in Year 11 and is completing the Pearson BTEC level 1/ Level 2 Tech Award in **Health and Social Care** alongside other qualifications.

The learner has submitted assignment work for Learning Aim A and it has been assessed as pass standard and Learning Aim B, which has been assessed as distinction standard.

**The overall grade for the unit is a Level 2 Merit because the learner evidence satisfies all Level 2 Pass criteria and B.2D2.**

### Commentary

The learner has submitted Assignment evidence to cover:

**Learning Aim A:** Understand the different types of Health and Social Care services and the barriers to accessing them.

The learner has achieved assessment criteria A.2P1, A.2P2.

It is important when assessing to look holistically at the evidence using the assessment criteria and 'Essential information for assessment decisions' section of the unit specification.

The learner has chosen to base the work on Case Study 1, from the exemplar case studies available on the website. The Learner has considered the needs of each of the individuals in the scenario and has explained how local health services are meeting their needs. Barriers to accessing these services is explained for one individual.

However, the learner has not fully analysed the extent to which health and social care services meet the needs of the individuals in the scenario, so A.2M1 has not been awarded. There is some consideration of how barriers for one service user can be overcome. There is insufficient assessment of the suitability of health and social care services for the individuals in the scenario for the achievement of A.D1, but there are some justified and realistic suggestions for ways barriers for one service can be overcome.

The learner has met the Level 2 Pass criteria by explaining how health and social care services meet the needs of two individuals in a case study and by explaining how barriers could affect the use of one health or social service for one individual in the given scenario.

### **Learning Aim B: Demonstrate care values and review own practice**

The learner has achieved assessment criteria B.2P3, B.2P4, B.2M2, B.2D2. It is important when assessing to look holistically at the evidence using the assessment criteria and 'Essential information for assessment decisions' section of the unit specification.

The essential evidence for Learning Aim B is the Assessor Observation Record of the role play activities. The learner has provided detailed additional evidence to support the demonstration of care values. The written evaluation includes reference to feedback from the assessor. The pass criteria have been fully achieved.

The learner has met the Level 2 distinction criteria by demonstrating the care values independently in a health or social care context and has made justified and appropriate recommendations for improvements of own application of the care values that incorporate feedback from the Assessor, for the achievement of B.2D2.

### **Assignment A: Health and Social Care Services**

#### **Case Study 1: Verna and Sam Williams**

**Verna Williams** is 48 years old and lives with her husband Sam, and their two cats. They live on the second floor of a block of flats. The lift is often broken. This means that access to the street is down two flights of stairs. The block of flats is on a new estate half a mile from the nearest bus stop.

Verna has a medical condition which affects her mobility. Verna uses a walking stick to get around most of the time, but some days she needs to use a wheelchair.

Verna also has asthma which has recently got much worse. She has type two diabetes. She takes medication and has a diet plan to cope with the diabetes.

**Sam Williams** is fifty-two years old. He has recently left his job at a local supermarket because he had an argument with the manager. Sam and Verna are now living off a reduced income.

Sam has a hearing impairment for which he uses a hearing aid. Sam also has a learning disability and a speech impairment. This means that he has difficulty communicating with people and he becomes frustrated when asked to repeat what he has said.

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## Learner work

### Section 1

Verna has mobility problems and needs to use walking aids to help her, such as a walking stick and a wheelchair. She was referred by her GP (doctor) for these mobility aids. A doctor is an example of a health care worker working in 'primary care'. The doctor will work in a surgery or a group practice with several doctors in a Health Centre. Health centres provide local primary care. Verna will need to have appointments with the GP for general health problems.

Verna has diabetes and has to attend a diabetic clinic, where a specialist nurse will check on how well she is coping with the medication and with controlling her diet. Her local Health Centre runs a diabetic clinic with a specialist nurse, so she does not have to go all the way to the local hospital. She has her blood checked and has to keep a record of her blood sugar levels in a diary and the nurse organises the prescriptions for the medication she takes. For advice on diet she can see the diabetic nurse or she may be referred to a dietician or a dietetic assistant, who advises on food choices. A dietician is an example of an 'allied health professional'.

Verna also has asthma. The GP or asthma nurse gives her prescriptions for two inhalers – a preventer and reliever. The practice nurse in the local Health Centre checks her lung capacity occasionally to make sure the medication is working and to give advice if she is having problems. She was given a peak flow meter and a chart to keep a record of her breathing every day.

Diabetes and asthma are long term (or chronic) health conditions. Medication is required to treat these conditions and the prescriptions are usually free. Some people get free prescriptions if they are over 60 years of age or on a low income. Verna and Sam are on a reduced income and will get free prescriptions.

Prescriptions are given out by the local Pharmacy. Pharmacy services are also an example of primary health care. Repeat prescriptions can be ordered from the GP surgery on request in person, by a phone call or you can register online. To use the services online you have to have access to the internet using a computer or Smart phone/iPad. Verna and Sam do not use the internet. If a person is unable to get to the pharmacy because of mobility problems, or other chronic health problems, some pharmacists can organise a home delivery service.

Sam has a hearing problem and wears a hearing aid. An audiologist tests his hearing and arranges for Sam to be given a hearing aid by a hearing aid dispenser, from the Hearing Services department of the local community hospital. Hearing aids are provided free on the NHS. This is a secondary health care facility. Sam has to go to this secondary care for new batteries for his hearing aids and for servicing or repairs to the aid. The community hospital is closer to his home than the main hospital and is only one bus ride away. Some local health centres in the area also supply minor repairs and new batteries. This service is run by volunteers. Sam has been given a list of the days and times when this service is available. He can visit his local health centre for this volunteer service on Tuesday afternoons. A hearing aid dispenser is an example of a Clinical Support worker. If he has other problems with his ears he has to arrange for an appointment with an ENT

(Ear, Nose and Throat) specialist consultant at the main hospital in the town. This hospital is two bus rides from where he lives.

There are services for adults (and children) with special needs. Sam has special needs because he has a learning disability and there is a range of services to support him and his family. Verna is an informal carer for her husband. She supports him with his day to day activities such as personal care, household tasks and managing their money. They manage to support each other, so no services are needed in the home. Sam does go to a Day Centre twice a week for adults with learning difficulties to take part in social activities with some of his friends. **A.2P1**

Verna and Sam make use of the help of informal carers. They have two grown up children who no longer live at home. Their son lives 10 miles away and their daughter lives 40 miles away, but they visit them regularly, or they ring them up to make sure they are alright. They will help out when they can, but they both work full-time. They also have some good friends and neighbours who offer help, when needed. If the lift in the flat is broken, so Verna can't get out, they will go to the pharmacy to collect prescriptions or go shopping for them. One of them went to the Hearing Services department to collect some new batteries for Sam's hearing aids when he ran out during the bad weather in the winter. Informal carers provide valuable support by giving up their time to support others.

## Section 2

The first problem for Verna is access out of their flat when the lift is broken. The council need to be informed of the problems they are having to see if they can be moved to a downstairs flat, or to ask for the lift to be kept in good working order. The pavement Verna and Sam have to walk on to the bus stop is very uneven. The council also need to be informed of the problem this is causing to people with mobility problems and to wheelchair users, to see if something can be done. Wheelie bins and cars parked half on the pavement cause problems when walking on the pavements. If the weather is really bad, one of the neighbours will take them to the hospital or there is a volunteer driver service for people with mobility problems. They have to ring up the hospital to organise this. They could use a taxi, but this is expensive.

Adaptations can be made to the home to help Verna's mobility problems. In addition to her walking aid she could have a raised toilet seat and a raised armchair because of her leg problem. An assessment needs to be made by an Occupational Therapist from the hospital, who may visit the home and organise for these aids to be fitted. The GP would need to make a referral to organise this.

Verna and Sam both have to attend appointments at the local hospital. They both have problems in accessing this service because they have to catch two buses to get there. They can apply for travel costs, if they meet the criteria, through the NHS Low Income Scheme.

It is easier for them if appointments are made during the day, avoiding the rush hours when people are travelling to work and children are going to school. The bus stop is half a mile from their block of flats, which is a long way to walk with a walking stick. Some days she needs to use a wheelchair and it is difficult for Sam to push the wheelchair and then get her and the chair onto the bus. The bus goes into the hospital grounds, which

will be helpful, but then there is a long walk to the department they need to go to. There is a lift in the hospital for the departments which are not on the ground floor. They can ask for a hospital porter to push the wheelchair or provide a wheelchair on the days when she just uses her walking stick. Luckily the hospital in the town where they live has volunteers who provide assistance when the porters are too busy. The hospital has disabled toilets which Verna can get her wheelchair into.

Sam has problems communicating and gets very nervous when he has to talk to people he does not know, especially health care workers. He doesn't always understand what they are saying, because they use words he doesn't know and he becomes frustrated and embarrassed when he is asked to repeat what he has said. Verna tries to go with him to help him to communicate and understand what is being said. If she can't go, then one of their friends goes with him. Their children can't go with them because they live too far away and both work full-time. Health care staff who know Sam usually speak clearly, use language he can understand and give him time to speak. But staff are sometimes too busy to take the time to listen or speak slowly to him.

#### **A.2P2**

*Well done Edyta - a range of barriers to services have been explained with ways these can be overcome.*

## Learner work

### Assignment B: Care Values

#### My Role Play

I took part in a role play with Sophie who played the part of an older person who needed care and support.

#### RECORD OF ACTIVITY

<b>Observation Record</b>	
<b>Learner name:</b>	Edyta Polanski
<b>Qualification:</b>	BTEC Tech Award Level 1/Level 2
<b>Component number &amp; title:</b>	2: Health and Social Care Services and Values
<b>Name of *Observer</b>  <b>*please delete as applicable</b>	Ms B. Alexander (Assessor)
<b>Date of Activity:</b>	08/05/18
<b>Assessment criteria targeted :</b>	
<p>B.2D2: Demonstrate the care values independently in a health or social care context, making justified and appropriate recommendations for improvements of own application of the care values that incorporate feedback.</p> <p>B.2M2: Demonstrate the care values independently in a health or social care context, making suggestions for improvements of own application of the care values that incorporate feedback.</p> <p>B.2P3: Demonstrate the care values independently in a health or social care context.</p>	
<b>Description of activity undertaken (what the learner did) and the evidence provided/questions asked and answers given:</b>	
<p>Edyta took part in two role play activities, playing the role of a carer in two different scenarios and in two settings. She has also included some supporting written notes on the care values she demonstrated during the role plays as part of the review of positive aspects of her demonstrations.</p> <p>She demonstrated her knowledge of care values across the two role plays independently without any prompting or use of notes, showing confidence in the interactions. The learners had the opportunity to practise prior to the observation.</p> <p>Edyta is an articulate pupil, she introduced herself and addressed the individuals in a way which was suitable to the situation. Good communication skills were demonstrated to the people in her care, she chatted politely and asked and answered questions. Appropriate language was used with both service users – she talked at a level appropriate to the age of the child and the elderly adult. There were a few gaps in the conversation with the elderly person which may have made the service user feel uncomfortable or embarrassed.</p>	

Both role plays came to an abrupt end, without a natural conclusion, which may have affected how the service users felt. She could have thought about how to end the interactions appropriately. Edyta remained seated during the role play, but it may have been more realistic to have stood up to demonstrate positive non-verbal communication.

Respect was demonstrated when talking to the service users and Edyta was aware that she needed to preserve their dignity whilst carrying out personal care, such as feeding and changing the clothes of your service user and patient.

The service users were offered choices to empower them and she did not take over tasks which they could perform themselves.

Anti-discriminatory practice and safeguarding are difficult to demonstrate in these scenarios, but there was some evidence and she has provided further explanation in the write up of the activities. She asked questions about the patient's religion, to show interest. The write up mentions the need for checking name badges and a signing in and out book, but this was not mentioned or demonstrated in the role play.

It may have been better if the individuals had had scripts, this would have enabled Edyta to respond more to the service users and to demonstrate the care values more easily. Some props could have been used to make the role plays more realistic, eg for the meal, or games for the play activity.

In the two role plays Edyta demonstrated the care values appropriately and independently in a health and social care context to meet the requirements of B.2P3.

**I confirm this is an accurate record of the activity undertaken**

**Learner signature:**

*Edyta Polanski*

**Date:**

*08/06/18*

**\*Assessor signature:**

**\*please delete as applicable**

*M&B Alexander*



## Practical Evidence

Name of student: Edyta Polanski

Date: 08/06/18

### Learner account of tasks completed

When communicating with a service user, a carer should: use the service users preferred name, make eye contact to show respect, use a calm tone of voice, not use slang or swear words, give them personal space, use positive facial expressions and not be patronising or condescending. I performed good communication by using my service users preferred name. I told the service user who I was and my name, even though I had met her earlier, in case she had forgotten. I asked her what name I should use. She said call me Mrs Jackson, which I used to show respect, even though I had heard other carers using her first name. She asked my name.

Good communication means you adapt your communication style to suit the situation to suit the situation and to make the service user feel respected. In my role play, I said hello and smiled, which shows positive facial expression which is non-verbal communication. I didn't use slang and talked in a positive tone. I also refrained from using a patronising or condescending tone as this might belittle or disrespect them. I asked questions and listened to her answers. I talked to the child using vocabulary she would understand and asked her about school and what hobbies she had.

Confidentiality is about keeping information and records safe and secure, this means not sharing information with others unless necessary. This can also be called 'need to know', when information is shared with people who need it, for example another carer. Written records should also be stored securely in a locked cabinet/office or on a computer with a password. We can sometimes breach confidentiality if a person is at risk, could harm themselves or others or if they are going to commit a crime. To maintain confidentiality I would not repeat any of the service users stories, because they may not want other people to know about it or about personal information. I could ask if they wanted me to talk about it and then respect their response. In my role play, I kept my service users dietary needs (vegetarian) in her care plan and only told other carers if I needed to. I also didn't tell any of the other service users because this information is confidential and shouldn't be breached.

Mrs Jackson said that she was glad it was me helping today because she didn't like the other volunteer who helped her yesterday. I did not tell anyone about what she had said because I didn't want to offend the other person or be seen to be gossiping. In my other role play, I was asked to play games with the girl in hospital and she chose what she wanted to play with. I didn't mention the bruises on her body, which I could see. I didn't gossip with anyone about the girl or that I knew abuse was suspected, to maintain confidentiality. If necessary I would explain to the child exactly why I would have to breach confidentiality, only if she told me anything about her injuries. Also, I would reassure her that she had done the right thing and that she would not be in any trouble. I should not have a conversation about anything she told me. I would need to report anything she said straightaway

Dignity is self-respect, pride, self-worth, valuing a person, allowing independence and contributing to meeting emotional needs. It is also about protecting people's privacy and treating them with respect, for example, getting dressed in private. Maintaining dignity also involves helping them be independent and allowing them to do things for themselves. We should also help and encourage people who use services, but not insist or do things for them to save time or because it's easier for us. As a carer, we should try to avoid making the service users feeling embarrassed and we should help them maintain modesty. I showed dignity by changing my service user's top when she spilled some soup down it. I also changed it quickly and did not stare at her. In my second other role play, I maintained dignity by making sure the child patient didn't feel embarrassed about her suspected abuse. I didn't talk about it or let her know I had seen the bruises. Also, when she was getting changed for bed I closed the curtains around her, turned my back to her and made sure no one else entered the room. This was to make sure she felt modest and less exposed.

Respect is not offending, judging or belittling another individual for any reason, such as religion or race. If I disagreed with them on a topic I would politely inform them of my opinion but I wouldn't be rude or aggressive. I would show compassion, empathy and warmth as much as possible. I would also avoid conflict and arguments at all costs, as this is very unprofessional and everyone is entitled to an opinion. I maintained respect by carefully listening to the child I was caring for. I also had patience when she did not answer straight away. I also respected how much information my patient wanted to tell me and didn't force or intimidate them. In my other role play, I maintained respect by introducing myself to my service user and by listening when they told me what she wanted to eat. I tried to be polite and friendly. I used the service users preferred method of address.

Empowerment is giving someone the skills to be independent and do things by themselves. There are many resources carers can suggest for older adults to use to maintain empowerment. As carers we can empower service users by: having patience, listening to them, not making them feel uncomfortable, being kind, respecting them, treating them with equality, not patronising them, letting them be independent but still offering help, being polite and addressing them appropriately. In my first role play I maintained empowerment by allowing my service user to choose to eat for herself when she wanted to. I gave her options by allowing her to choose to feed herself with an aid to help her to maintain some independence. This empowered her. I offered her a bendy spoon as she has arthritis. She found the using the aid easier and didn't need much assistance. With the child I asked her to choose what she wanted to do.

To maintain empowerment carers should perform person centred care. This is a way of delivering health and social care which places the individual at the centre of their care. They are involved in discussions with professionals about their care and they plan their own care. The person centred approach considers the person as a whole rather than looking at just one or two of their needs. Mrs Jackson had a care plan for all carers to read and be guided by.

Safeguarding is ensuring the physical and emotional safety of all individuals in our care. Safeguarding includes security. Duty of Care is adhering to codes of practice and legislation, taking responsibility (as

an employee/staff member) for service users in your care and the completion of all tasks to the highest standards. In my role play, I showed safeguarding. I would have maintained duty of care by informing my designated safeguarding manager if the child had told me anything. I was aware of the COSHH regulations which means medication is kept in a locked cabinet and only given out by trained staff. I also performed duty of care by making sure all visitors were signed in and had name badges on a lanyard for identification purposes. In my other role play, I made sure all of the doors were shut and locked by the keypad, which only staff members knew the code. I also made sure that visitors were signed in and had identification badges, which were visible.

Anti-discriminatory care is when a carer cares for someone by not discriminating them for any reason, such as race, gender or religion etc. For example, carers should allow service users of any religion to take part in festivals/celebrations where possible. Carers should also show interest in new religions and should understand and help cater to all service users' needs. We should treat people equally and fairly, but not the same. In my role play I maintained anti-discriminatory care by accepting that my service user was vegetarian. I also gave her suitable food which catered for her needs. I showed that I understood Mrs Jackson's dietary needs. Also, in my other role play, my child patient was a Buddhist, but I treated her the same as my other patients. I also listened, understood and enjoyed learning about her religion, when she chose to speak about some of her favourite religious festivals.

**B.2P3, B.2P4**

### Role Play review

It is important to give both constructive and positive feedback. This allows people to see what they've done well and how they can improve for the future.

### How I could have improved my role plays

I could have used props so that it was obvious what I was trying to act out. I could have used cutlery and a plate to make the role play more realistic. This would have helped my partner in the role play too.

My observer thought I empowered both service users by providing choices and by encouraging them to do things for themselves. I could have offered more choices when asking the service user what she wanted for lunch, for example, I could have offered her a cold and a hot option. Giving choices empowers service users.

I wrote about safeguarding, but I was not wearing any identification, which means safeguarding was not satisfactory. This is because staff and patients would not be able to identify me. I would have to sign in and out of a residential home but this was not in the role play. To maintain safeguarding I should have made sure I wore an identity badge, so that I

could be identified by staff and patients. I should have told my partner to ask what the name was on my badge to draw attention to it.

My communication skills were good but to improve I could have made more small talk when changing my service user's clothes. When changing Mrs Jackson's top after a spill I didn't communicate much with her, so she may have felt embarrassed and uncomfortable. If I had carried on chatting this may have helped her dignity. I could have chatted more by asking my patient more questions about her religion. This would show more respect and provide anti-discriminatory care. I could have shown more interest in the conversations by asking questions and showing interest in their stories and, memories and opinions. When looking after the child I could have made more conversation and showed more patience when waiting for her to answer a question. I could have used more facial expression and used a positive tone to make her feel valued and comfortable speaking to me. This would allow me to get to know my service user/patients better.

I could have shown more empathy, warmth and compassion throughout the role play. This may have made my service user feel more comfortable in a safe and caring environment. I was thinking more about how I felt performing rather than what the service user was feeling.

I should have stood up in the role play, when I was assisting the lady during meal time, to better demonstrate positive non-verbal communication. By being aware of my posture I could have shown how I was assisting the service user.

My observer thought the interactions ended abruptly without a natural conclusion. I could have explained to the service user/patient why I had to leave and I should have said goodbye, or I will see you later. I could have explained that I had got to go and help someone else or I had to clear away the dining tables for the craft session in the afternoon. In role play two I could have said good bye to the child and explained that it was time for me to go but I had enjoyed playing board games with her This would have shown more respect and empathy for how the service users felt.

I could have prepared for the role plays better by talking through with my partner more about what I wanted her to say. A script, which we practised may have helped.

Overall to improve both the role plays I would communicate all 7 care values to ensure the best quality care to the best of my ability to make my service users feel happy, safe and cared for.

**B.2M2, B.2D2**

*Edyta this is a good review of the role play activities and the recommendations for improvements are well considered.*

#### Information sources

Baker B, Burgess C, Haworth E, *BTEC Tech Award in Health and Social care*, Pearson Educational Ltd., (2017) ISBN: 978 292, 20092 7.

## Learner Assessment Submission and Declaration

**This sheet must be completed by the learner and provided for work submitted for assessment.**

<b>Learner name:</b> Edyta Polanski		<b>Assessor name:</b> Ms B. Alexander	
<b>Date issued:</b> 04/06/18	<b>Completion date:</b> 22/06/18	<b>Submitted on:</b> 22/06/18	
<b>Qualification:</b> BTEC Level 1/Level 2 Tech Award			
<b>Assessment reference and title:</b> Component 2: Health and Social Care Services and Values			

Please list the evidence submitted for each task. Indicate the page numbers where the evidence can be found or describe the nature of the evidence (e.g. video, illustration).

Task ref.	Evidence submitted	Page numbers or description
LA A Task 1	Review of HSC Services in local area	11-13
LA B Task 1	Learner written report Tutor Observation Record of role plays Report evaluating the demonstration	14-23
Comments for note by the Assessor:		

### Learner declaration

I certify that the work submitted for this assignment is my own. I have clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice.

**Learner signature:** *Edyta Polanski*

**Date:** 07/07/18

ASSESSMENT RECORD SHEET				
<b>Programme</b>		BTEC Tech Award	<b>Learner name</b>	Edyta Polanski
<b>Assignment title</b>		Health and Social Care Services	<b>Assessor name</b>	Ms B. Alexander
<b>Component no. &amp; title</b>		2 Health and Social Care Services and Values	<b>Targeted assessment criteria</b>	LA A
<b>Issue date</b>		04/06/18	<b>Submission deadline</b>	22/06/18
<b>First submission / resubmission?*</b>		First submission	<b>Date submitted</b>	22/06/18
<b>Resubmission authorisation</b> by Lead Internal Verifier*		Mrs S. Sherwood	<b>Date</b>	29/06/18
<b>Targeted criteria</b>	<b>Criteria achieved?</b> (Yes / No)	<b>Assessment comments</b>		
<b>A.2D1</b>	No	<i>Not fully achieved because there is insufficient evidence of an assessment of the suitability of the HSC services. You have included some evidence of making justified and realistic suggestions for overcoming barriers to access.</i>		
<b>A.2M1</b>	No	<i>You have explained how barriers to accessing services for Verna could be overcome, but there is insufficient analysis of how well the services meet the needs of Verna and Sam.</i>		
<b>A.2P1</b>	Yes	<i>You have fully explained how local health and social care services in the town meet the needs of Verna and Sam.</i>		
<b>A.2P2</b>	Yes	<i>A range of barriers affecting Verna's ability to access the services at the hospital are explained. You have added some barriers for Sam as well, which is additional information.</i>		
<b>General comments</b>				

*Edyta, I am disappointed that you have opted not to resubmit any additional work to improve the grade for this assignment. The work for this learning aim has been graded as a Level 2 Pass. A resubmission opportunity was authorised. In future you need to read the assessment criteria carefully and be guided by information given in class.*

<b>Assessor declaration</b>	<i>Ms B Alexander</i>		
<b>Assessor signature</b>	<i>Ms B Alexander</i>	<b>Date</b>	<i>28/06/18</i>
<b>Learner comments</b>	<i>I should have done more work to improve my grade. I will work harder next time.</i>		
<b>Learner signature</b>	<i>Edyta Polanski</i>	<b>Date</b>	<i>03/07/18</i>

ASSESSMENT RECORD SHEET				
<b>Programme</b>		BTEC Tech Award	<b>Learner name</b>	Edyta Polanski
<b>Assignment title</b>		Care Values	<b>Assessor name</b>	Ms B. Alexander
<b>Component no. &amp; title</b>		2 Health and Social Care services and Values	<b>Targeted assessment criteria</b>	LA B
<b>Issue date</b>		04/06/18	<b>Submission deadline</b>	22/06/18
<b>First submission / resubmission?*</b>		First submission	<b>Date submitted</b>	22/06/18
<b>Resubmission authorisation</b> by Lead Internal Verifier*		N/A	<b>Date</b>	
<b>Targeted criteria</b>	<b>Criteria achieved?</b> (Yes / No)	<b>Assessment comments</b>		
<b>B.2D2</b>	Yes	<i>You have demonstrated the care values independently through the two role play activities. In a review you used self-evaluation and observer feedback to make justified recommendations for improvements. You have provided supporting evidence in the form of a very detailed report.</i>		
<b>B.2M2</b>	Yes	<i>An independent demonstration of care skills in the role plays was seen. The evaluation highlights improvements that could be made in consideration of tutor feedback.</i>		
<b>B.2P4</b>	Yes	<i>In the write up of the role plays you have highlighted and described positive aspects of the demonstration of care skills. Negative aspects of the demonstration were described in the review</i>		
<b>B.2P3</b>	Yes	<i>Care values have been ably demonstrated in two role play activities with supporting written evidence.</i>		
<b>General comments</b>				



*Very well done Edyta. You have demonstrated care values ably and confidently in the role play activities. The written supporting evidence is detailed and you have reviewed the activities appropriately. It is good practice to reference all of the information sources used - think about doing this in future assignments. You have achieved a distinction for this learning aim. The overall grade for this component is a Level 2 Merit.*

<b>Assessor declaration</b>	<i>Ms B Alexander</i>		
<b>Assessor signature</b>	<i>Ms B Alexander</i>	<b>Date</b>	<i>28/06/18</i>
<b>Learner comments</b>	<i>I am really pleased with my grade for this assignment and the overall grade.</i>		
<b>Learner signature</b>	<i>Edyta Polanski</i>	<b>Date</b>	<i>03/07/18</i>