BTEC Tech Award Health and Social Care: Component 1 Knowledge Organiser

Learning Aim A — *Understand Human Growth and Development across life stages and the factors that affect it.*

A1: Growth and Development

Life Stages

Infancy (0-2yrs) — Develop fine and gross motor skills

Early Childhood (3-8yrs) — Learning to play

Adolescence (9-18yrs) — Peer group develop, emotional affected by hormones, build relationships and onset of puberty.

Early Adulthood (19-45yrs) — Achieve full growth and maturity. Begin work and start a family.

Middle Adulthood (46-65yrs) — Transitional age between young adult and elderly. Possible onset of midlife crisis, menopause etc.

Later Adulthood (65+yrs) - Importance of finding meaning and satisfaction in life. Potential onset of dementia.

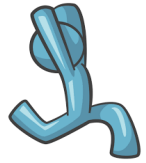
Physical - Physical growth, muscles, strength, balance, co-ordination, illness/health.

Intellectual - Development of thinking and language skills, brain development.

Emotional - Development of feelings, emotions, sense of self and understanding of others.

Social - Forming relationships, socialising and communicating with others.

A2: Factors affecting Growth and Development



Physical Factors can affect growth and development such as diet and exercise. This enables a person to be healthy and means they are strong enough to fight off illness.

Economic Factors can affect a person's growth and development. Having a substantial (enough) income can ensure a person has successful growth and development by providing good housing and having enough money for food, water and shelter.

Social and Cultural Factors include relationships, influence of role models, educational experiences , religion, gender etc. These experiences will help to shape an individual.

KEYWORDS & DEFINITION

Gross motor skills — Used to control large muscle groups in the body e.g. legs for walking.

Fine motor skills — Used to control small muscle groups e.g. hands and finger for writing.

Milestones — A significant stage or event in the development of an individual.

Puberty — Release of hormone sin the brain which cause sexual characteristics to develop e.g. hair growth.

Menopause — Physiological changes leading to the gradual end of menstruation and shrinkage of sexual organs.

Abstract thinking — Thinking about something that might not be there or exist.

Bonding — Forming an attachment with a parent or carer.

Attachment — The close emotional connection between people.

Self-esteem — How much a person likes/values/accepts themselves.

Contentment — Feeling satisfied and happy with what you have and what you have achieved.

Self-image — How an individual will think and feel about themselves and how they imagine others see them.

BTEC Tech Award Health and Social Care: Component 1 Knowledge Organiser

Learning Aim B — *Investigate how individuals deal with life events.*

B1: Different types of Life Event

Physical Events which may cause harm to the individual physically e.g. an accident, injury or illness.

Relationship Changes

Can take the form of many different types including entering into relationships, marriage, divorce, parenthood, bereavement.

Life Circumstances Can sometimes be expected or unexpected. Usually they are unexpected and have a negative impact e.g. being excluded from school, made redundant or being imprisoned.

B2: Coping with change caused by Life Events

When an individual experiences a life event, they may adapt easily or they may require support to help them. People who experience the same life event can have two different ways of coping.

Practical Help — Can take the form of financial help, child care and transport. This can be offered by a range of people including informal and formal support networks also community groups and voluntary and faith based organisations.

Informal Support — Friends, family and partners can volunteer time to support individuals. This can offer reassurance, advice and encouragement.

Formal Support — Professional carers and services e.g. GP. Help people to cope with different types of life events e.g., a mother having a baby will rely on a midwife. A person who has experienced an accident may need the support of a medical professional to treat the injury, and a counsellor to talk through their emotions.

LIFE EVENTS

EXPECTED	UNEXPECTED
-Starting/leaving school	-Exclusion/dropping out of education
-Employment	-Unemployment
-Moving house	-Promotion
-Living with a partner	-Imprisonment
-Marriage	-Illness
-Parenthood	- Accident/Injury
-Retirement	- Death

KEYWORDS & DEFINITION

Life circumstances — Factors that play a part in determining aspects of an individual's life.

Relationship changes — Altering the way two or more people connect with each other.

Expected life events — An expected major event that changes a person's status or circumstances e.g. giving birth, marriage, divorce , death of a spouse, loss of job.

Unexpected life events — Unplanned events that takes individuals by surprise as they do not know that they are going to happen e.g. an accident or an unexpected death.

BTEC Tech Award Health and Social Care: Component 2 Knowledge Organiser

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

A1: Health and Social Care Services

Health Care Services

Primary Care Services — Initial services an individual accesses first if they have a health issue for advice or treatment e.g. GP, dentist, optometry, community health care.

Secondary and Tertiary Care Services — Medical care provided by a specialist or facility or specialized consultative care . Patients referred by primary care services e.g. cardiologists (heart disease) and neurologists (nervous system problems).

Allied Health Professionals (AHP's) - Health care professionals who provide treatment and support for adults and children who are ill, have disabilities or additional needs. Work across a wide range of settings including the community, people's homes and hospitals e.g. dieticians, physiotherapists, occupational therapist and speech and language.

Social Care Services—includes informal support offered by friends and family

-Services for children and young people, e.g. foster care, residential care, youth work

-Services for adults or children with specific needs (learning disabilities, long-term health issues), e.g. residential care, respite care

-Services for older adults, e.g. residential care, home care services.

-Informal care e.g. relatives, friends and neighbours.

A2: Barriers to accessing Services

Some individuals cannot access services due to barriers which prevent (stop) them from doing so.

Physical barriers, e.g. issues getting into and around the facilities.

Sensory barriers, e.g. hearing and visual difficulties preventing access to services

Social, Cultural and Psychological barriers, e.g. lack of awareness, differing cultural beliefs

Language barriers, e.g. differing first language, language impairments

Geographical barriers, e.g. distance of service provider, poor transport links

Intellectual barriers, e.g. learning difficulties

Resource barriers for service provider, e.g. staff shortages, lack of local funding

Financial barriers, e.g. charging for services, cost of

KEYWORDS & DEFINITION

Barrier — An obstacle that prevents access.

Residential care — Long term care for a adults and children staying in a residential setting.

Respite care — Temporary care for sick, elderly or disabled people, also providing relief for usual carers.

Domiciliary care — Help with personal care and other practical household tasks.

Dieticians — An expert of diet and nutrition

Physiotherapy — Treatment of disease, injury or deformity using physical methods e.g., massage, heat treatment and exercise.

Occupational therapy — Use of particular activities to help recuperation for physical or mental illness.

Optometry — Measures eyesight, prescribes corrective lenses detects eye disease.

BTEC Tech Award Health and Social Care: Component 2 Knowledge Organiser

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

B1 Care Values

Care Values are a range of standards within Health and Social Care settings, that help to guide professionals in giving the most appropriate care to each individual.

1. **Empowering and promoting independence** by involving individuals, where possible, in making choices, e.g. about treatments they receive or how care is delivered.
2. **Respect** for the individual service users' needs, beliefs and identity.
3. **Maintaining confidentiality** when dealing with records, avoiding sharing information inappropriately, e.g. gossiping
4. **Preserving dignity** of individuals to help them maintain privacy and self-respect
5. **Effective communication** that displays empathy and warmth
6. **Safeguarding and duty of care**, e.g. maintaining a healthy and safe environment, keeping individuals safe from physical harm
7. **Promoting anti-discriminatory** practice by being aware of types of unfair discrimination and avoiding discriminatory behavior.

B2 Reviewing own application of care values

Using teacher feedback from your demonstration, you will be expected to: Identify your own strengths (what was good about your demonstration of the care values) and areas for improvement (what did not go so well) against the care values.

KEYWORDS & DEFINITION

Independence — Freedom to make own choices.

Respect — Understanding the feelings and wishes of others.

Confidentiality — Keeping information private and secure.

Dignity — Keeping respect and for a person.

Safeguarding — Promoting the welfare of children and protecting them from harm.

Communication — The sharing of information between two or more people, the act of speaking and listening.

Duty of care — The responsibility to always act in the best interests of an individuals.

Anti-Discriminatory — Prevents discrimination on gender, age, race, disability etc.