LO1

Why it is important to maintain individuals’ rights

1. e – all of the above [1 mark]
2. b – law [1 mark]
3. All five required:
   - choice
   - confidentiality
   - consultation
   - protection from abuse and harm
   - equal and fair treatment [5 marks]
4. Four from:
   - so that people feel valued
   - to raise self-esteem
   - to empower individuals
   - to instil confidence
   - to instil trust
   - so that individuals feel safe
   - to give equality of access to services
   - to meet individual needs [4 marks]
5. Any three from:
   - Empowerment – is to give someone the authority or control to do something. This is how a health, social care or early years worker encourages an individual to make decisions and take control of their life and become independent.
   - Confidence – individuals will feel that they can rely on care workers and services to get high quality care that meets their needs.
   - Trust – individuals must be able to feel that care workers are trustworthy, that they will not harm them and that they have their best interests at heart.
   - Equality – individuals will be able to access the care they need. Adaptations will be made if necessary for them to access care.
   - Safety – care workers and care settings that support individuals’ rights to safety will follow health and safety laws and ensure staff are trained in safeguarding procedures.
   (Award 1 mark for identification of a benefit and 1 mark for the description.) [6 marks]

The rights of individuals

Choice

1. Definition: Having the opportunity to decide or pick between two or more options. [1 mark]
2. Answers could include descriptions of:
   - offering food options
   - offering choice of activities – TV programme, books/magazines to read, etc.
   - asking what they want to wear
   - asking when they want to have a bath or shower
   - checking how they want to receive help
   - accepting their refusal of medication. [8 marks]
3. (a) Any two from:
   - offered choice of activities/toys
   - choice of who to sit with
   - choice of who to play with
   - choice of meals/drinks. [2 marks]
3. (b) Any two from:
   - provide menu choices for meals, for example, vegetarian, halal, kosher, gluten free and so on
   - ask what they would like to drink – tea, coffee, water and so on
   - ask if they would like to get up and sit in a chair/go to patients’ lounge
   - ask whether or not they want to see visitors
   - discuss options for treatment
   - offer access to male or female nurse/doctor. [2 marks]

Confidentiality

1. Definition: Confidentiality limits access or places restrictions on sharing certain types of sensitive information, so that it is kept private to only those who need to be aware of it. [1 mark]
2. Example answers:
   - If the social worker regularly notices unexplained bruising on a baby whose family she visits, the family GP would need to be informed, so the GP could check on the baby. Social services safeguarding procedures would need to be followed.
   - If a vulnerable adult told the social worker that her son kept taking money from her purse without asking and she was worried about paying her bills, but didn’t want to make a ‘fuss about it’, the social worker would have to pass this information on to the care team, as the son is financially abusing his mother. [2 marks]
3 Any two from:
- when someone intends to harm themselves; for example, if they say they are going to commit suicide
- if an individual threatens to cause harm to someone else; for example, they state their intention to physically hit someone
- when someone has given information that suggests they are at risk of harm from others; for example, if a child discloses sexual abuse
- if an individual has confided that they are involved in dealing drugs. [2 marks]

4 Any three points from:
- care workers often receive very sensitive and private information from service users
- service users may be vulnerable and very trusting of those caring for them
- it is unprofessional to talk about confidential matters outside of the care environment
- it protects the interests of any individual
- it helps service users to trust their carers. [3 marks]

Protection from abuse and harm

1 Any four from:
- all staff are DBS checked (Disclosure and Barring Service)
- reporting procedures for abusive behaviour
- a designated (child) protection officer is appointed
- complaints procedures
- manual handling training for staff
- safeguarding training for staff
- first aid trained staff available
- fire procedures and fire drills
- emergency evacuation procedures
- lockdown procedure
- risk assessments of equipment and activities
- Health and Safety at Work Act implemented
- policies in place, such as confidentiality, 'no secrets', equal opportunities
- high standards of hygiene in the care setting
- security measures in place. [4 marks]

2 Any three from:
- an individual lacking mental capacity – they may not be able to tell someone what is happening and may depend on others for care and to make decisions for them
- an individual with dementia – they may not realise that abuse is happening, may have difficulty remembering and communicating
- an individual with a learning disability – they may not know what abuse is or understand their rights
- children in care – children may move in and out of different settings and so not have a trusted adult and they may not know their rights or they could be scared of complaining
- an individual who is visually/hearing impaired – they may be dependent on others for their care and so are less likely to report abuse. [6 marks]

Equal and fair treatment

1 Equal treatment means being given the same opportunities and choices as everyone else. Fair treatment means being able to have full access to those opportunities and choices. [2 marks]

2 Enables all individuals who use wheelchairs or other mobility aids – whether staff, visitors, nursery age children, their siblings or their parents – to access the nursery just like everyone else. [2 marks]

Consultation

1 Definition: The process of discussing something with someone in order to get their advice or opinion, so that a decision can be made that is acceptable to all involved. [1 mark]

2 Four from:
- ask for opinions and views
- ensure shared decision making
- ask for preferences and options
- discuss wants and needs
- clarify likes and dislikes. [4 marks]

3 Two from:
- ask for and listen to their views and opinions
- explain options
- provide information
- share decision making. [2 marks]

4 Explanation could include:
- asking what type of care they would like if it were possible
- give information about the options available for treatment of their condition
- explaining what different treatment options, such as surgery, medication, tests, will involve
- explaining the benefits and disadvantages of the different treatments, such as side effects and recovery time
- listening to the patient’s views, opinions and preferences for the types of treatment available
- making a shared decision based on opinions given by the individual. [5 marks]
How care workers can support individuals to maintain their rights

Using effective communication

1 Any two each from:
   Verbal:
   ● telephone call
   ● meeting
   ● conversation
   ● discussion
   ● questions/interview
   ● Skype.
   Non-verbal:
   ● gestures
   ● facial expressions
   ● eye contact
   ● sign language (BSL)
   ● Braille.

2 Descriptions could include:
   ● repetition
   ● being patient
   ● slow pace
   ● simple vocabulary, short sentences
   ● use of picture cards
   ● not being patronising
   ● use of positive body language
   ● attentive listening.

3 Explanations could include:
   ● aids understanding of procedures/treatment/what’s happening and so on.
   ● the individual feels valued
   ● instils confidence
   ● develops trust
   ● shows respect
   ● shows you are listening
   ● the individual feels they are being taken seriously
   ● enables informed decision making/choices
   ● provides equality of access
   ● empowers individuals
   ● raises self-esteem
   ● helps to meet the individual’s needs.

4 Possible ways could include:
   ● use simple vocabulary/no medical jargon
   ● use of facial expression
   ● use of body language/gestures
   ● using appropriate tone of voice
   ● slowing the pace/talking slowly
   ● speaking clearly
   ● being patient and calm, repeating as necessary
   ● active listening
   ● using pictures
   ● providing leaflets/printed information in Polish
   ● providing access to an interpreter/translator
   ● finding another member of staff or relative/friend who can speak Polish
   ● using ‘Language Line’ or other translation and interpretation services.

Providing up-to-date information

1 Any three from:
   ● the times that sessions 1 and 2 start
   ● the times that sessions 1 and 2 end
   ● contact details – phone number, e-mail
   ● who to contact
   ● services provided.

2 Any four from:
   ● nursery opening times
   ● cost of sessions and any extras
   ● names of staff working with their child/children
   ● date and time of any open days or information evenings
   ● how parents can contact staff
   ● child’s progress with skills
   ● any social/emotional problems/issues the child is having
   ● whether the child is making friends
   ● daily diary of child’s activities
   ● information about complaints procedures.

3 Explanations could include:
   ● parents have a right to be informed
   ● enables parents to be involved with and aware of their child’s progress
   ● helps to solve/prevent problems
   ● parents feel valued/that their child is valued
   ● parents know their child is in safe hands
   ● parents are informed about how the nursery is run
   ● parents know the staff who are caring for their child.

4 Information could include:
   ● whether they will have to attend out-patient appointments
   ● the date and time of any necessary check-up appointments
   ● when to take medication/pain relief, if needed
   ● how long recovery will take
   ● results of any tests
   ● who they need to contact if there are any problems.

Challenging discriminatory behaviour

1 Two from:
   ● explain to the colleague how they are being discriminatory, to raise their awareness of what they are doing
   ● explain to the colleague how their comments are inappropriate and make them reflect on what they have said
   ● refer the colleague to the setting’s policies, such as equal opportunities policy.

2 Discussion could include:
   ● A more senior member of staff could supervise the person, so that their work with the ethnic minority group service users can be monitored.
● Refer the person to the setting’s equal opportunities policy, so they are aware of how to behave and what constitutes discriminatory behaviour.

● The manager could instigate disciplinary action against the member of staff; this would make them aware of the seriousness of what has happened and provide a basis for changing their attitudes.

● The manager could send the member of staff on an equality and diversity course, to raise the individual’s awareness of correct ways of working.

allows settings to show they are striving to promote good practice by responding promptly to complaints

● encourages trust and confidence to be established, as service users know that their views and opinions are taken seriously. [5 marks]

Advocacy

1 One appropriate example, such as:

● If the child is being removed from their family due to a child protection issue, an advocate could ensure the child’s preference over who they stay with is heard.

● At a meeting to discuss a bullying issue, an advocate could provide support. [1 mark]

2 Three appropriate examples, such as:

● go with an individual to meetings or attend for them

● help an individual to find and access information

● write letters on the individual’s behalf

● represent an individual’s views at a case conference. [3 marks]

3 • Supports right to consultation – individuals have their needs, views and preferences taken into account.

• Supports right to choice/consultation – as individuals have their voice heard.

• Supports right to equal and fair treatment/protection from abuse and harm – as defends and promotes the rights of individuals with learning, physical and mental disabilities. [3 marks]

Providing information about complaints procedures

1 Definition: To seek redress means to obtain justice after receiving inadequate care. This may take the form of compensation awarded by the courts or having your rights restored in an appropriate way. [1 mark]

2 Examples may include:

● a bullying incident at a primary school

● incorrect medication given by a hospital nurse

● a care assistant never letting a resident choose what to wear

● racist comments made by a member of staff

● a breach of confidentiality. [3 marks]

3 Any three from:

● they don’t know the procedure to make a complaint

● they don’t know who to complain to

● they fear they would not be taken seriously or believed

● they are worried it might be stressful and time consuming

● they are worried about being victimised afterwards because they depend on the staff they are complaining about for daily care

● it may be difficult to prove, due to lack of evidence. [3 marks]

4 Explanations may include:

● individuals can openly raise concerns and complaints

● enables care settings to review complaints received to monitor the quality of the care they provide

● care settings can highlight action they need to take to improve the quality of care they provide for individuals

The values of care in health and social care and where the values of care are applied

1 Values of care are core principles that underpin the work of those providing health, social or early years care that aim to eliminate discrimination and reduce inequalities. They provide guidelines and ways of working for care settings and their staff. [2 marks]

2 Answers could include:

● so that service users are treated fairly and with respect

● so their rights are maintained

● so they are kept safe and protected from harm

● so their needs are met. [6 marks]

3 Any three from:

Health settings

● Clinic

● Dental practice

● Drop-in centre
● GP surgery
● Health centre
● Hospital
● Medical centre
● Nursing home
● Optician
● Pharmacy

Social care settings
● Community centre
● Day centre
● Lunch club
● Residential home
● Retirement home
● Social services department
● Support group
● Breakfast club

Early years settings
● Childminder
● Children’s centre
● Children’s home
● Crèche
● Kindergarten
● Nursery
● Nursery school
● Parent and toddler group
● Playgroup
● Pre-school
● Primary school

How the values of care are applied in health and social care settings

1. Promoting equality and diversity
   - Maintaining confidentiality
   - Promoting individuals’ rights and beliefs.  

   [3 marks]

2. Definition could include:
   - Diversity involves recognising that everyone is uniquely different and will have different needs
   - Understanding and respecting individual differences such as, for example, faith, diet, ethnicity and customs.

   [1 mark]

3. Equality means to enable individuals to have the same rights, access and opportunities as everyone else, regardless of gender, race, ability, age, sexual orientation or religious belief.

   [1 mark]

4. Example answers:
   - Providing a menu for choice and to meet individual dietary needs for health and cultural/religious reasons, such as vegetarian, diabetic, halal, kosher, etc.
   - Information provided in different formats to meet individual communication needs, e.g. Braille, large print, different languages.
   - Celebrating a range of festivals with the residents, not just Christmas, depending on the needs of residents, for example, Diwali, Chinese New Year, and so on.

5. Example answers:
   - She should challenge discriminatory behaviour or language, whether from staff, residents or visitors.
   - She could ensure that all facilities in the residential home are accessible for all residents; for example, the setting has ramps, wide doorways, adjustable height tables, hearing loops.
   - She could ensure that all residents are given the same opportunities to take part in activities, visits and so on, so that no one is left out.
   - When arranging visits or trips out, she could ensure the venue is accessible for all, for example, that hearing loops, wheelchair access, ramps are available.  

   [2 marks]

6. Example answers:
   - Keep patient records secure – use a locked filing cabinet with restricted access for paper records; keep electronic records password protected.
   - Only share information about patients on a need-to-know basis.
   - Draw curtains round a patient’s bed before discussing their care with them, or go to a private room to discuss personal matters and treatment.
   - Staff must not discuss patients where they can be overheard.  

   [2 marks]

7. Explanations could include:
   - Giving choice, for example, over meals, clothes to wear.
   - Giving choice regarding activities during the day.
   - Maintaining privacy; for example, knock on door before entering a resident’s room.
   - Provide access to an advocate for young adults with learning disabilities so their best interests can be represented.
   - Care workers should always explain any care plans to be carried out – the young adults have the right to disagree or ask for changes once they have heard all of the necessary information.  

   [4 marks]

How the early years values of care are applied in settings

1. Examples could include:
   - Working in partnership with parents/guardians and families:
     - Open days, inviting parents in to see children working
     - Parents invited in to discuss progress and/or problem behaviour and so on.
     - Reward certificates sent home
     - Obtain parents’ permission for visits and trips
     - Phone calls home to discuss any issues
     - Daily diary provided by the nursery
Now test yourself answers

- inform parents about accidents, incidents
- informal chat with staff on arrival in the morning, for example
- provide information sessions and training for parents on relevant topics such as potty training, dealing with tantrums, how to help your child learn to read, all about the nursery curriculum and so on.

**Ensuring confidentiality:**
- information shared with other practitioners on a need-to-know basis only
- children’s personal information kept secure – in a locked filing cabinet or password protected if electronic
- not gossiping about the child’s family circumstances
- not to have discussions about children in public places
- hold private meetings with parents behind closed doors.

**Ensuring the welfare of the child is paramount:**
- the needs of the child should always come first
- use a child-centred approach
- children must never be humiliated
- children must never be abused or smacked
- follow safeguarding procedures; for example, all staff must be DBS checked; appoint a designated child protection officer
- positive expectations should be encouraged; for example, primary school staff must have a view that all children can succeed and give appropriate support for their level of ability.

**Examples**
- 
- school nurse – problems such as head lice; obesity
- social worker – suspected abuse; neglect – for example, if a child is regularly wearing dirty clothes or complains of being hungry
- GP – concerns about health issues such as frequent chest infections, bruising and injuries.

**Explanations**
- If a learning disability:
  - help from a teaching assistant
  - differentiated worksheets/tasks matched to ability
  - help and learning support to ensure access to all activities.
- If a physical disability:
  - provide for physical access; for example, ramps, adjustable height tables for wheelchairs
  - staff who can use sign language
  - provide a hearing loop.
- General:
  - using non-discriminatory language
  - being a good role model, demonstrate inclusive behaviour
  - not stereotyping.

**The importance of applying the values of care**

**1** Explanations could include:
- **To ensure the standardisation of care:** All service users should receive appropriate care, attention and treatment whatever their individual needs. Staff should work to the same high standards.
- **To improve the quality of care:** All individuals, such as hospital patients, feeling safe; the service users’ individual needs are met through, for example, adaptations to the environment, care provided, resources made available if needed.
- **To provide clear guidelines to inform and improve practice:** So that staff know how to provide effective care; advises staff on legal requirements and good practice.
- **To maintain or improve quality of life:** For example, helping a child reach his or her full potential; providing access to those with mobility problems or communication barriers; appropriate end-of-life care in a hospice.

(Award 1 mark for identification of a reason and 1 mark for the explanation.)

**2** Empowerment is the process that enables individuals to take control of their lives and make their own decisions. It means having confidence in your own abilities.

(Award 1 mark for an explanation.)

**3** Answers could include:
- gives them choice
- supports their rights
- promotes independence
- improves self-esteem and self-confidence
- they receive care appropriate to their needs
- they are kept safe
- they are treated fairly
- can improve their quality of life
- makes them feel valued.

**Reflective practice**

**1** Reflective practice is when someone regularly looks back at the work they do, and how they do it, to consider how their practice can improve.

(Award 1 mark for an explanation.)

**2** Four key aspects are:
- exploring training and development needs
- evaluating specific incidents or activities
identifying what went well
identifying what might be done better next time to improve.  [4 marks]

3 Answers might include:

**Exploring training and development needs:**
- Do I need advice from a more experienced member of staff who is used to doing this type of activity?

**Evaluating specific incidents or activities:**
- Was the activity age appropriate?
- Did I use the correct equipment?
- Did I supervise all the children carefully enough?

**Identifying what went well:**
- The children enjoyed the activity.
- They all made a mother’s day card for their mum.
- They asked if they could make cards again.
- They had the opportunity to practise their hand–eye co-ordination skills.

**Identifying what might be done better next time to improve:**
- Get advice about how to run the activity from an experienced member of staff.
- Check all the equipment is appropriate, for example, the scissors should be child safety scissors without pointed ends.
- Have someone else working with me to improve the level of supervision.  [5 marks]

The effects on people who use services if the values of care are not applied

1. **Physical** – relates to an individual’s body.
2. **Intellectual** – relates to an individual’s thought processes, such as thinking skills, understanding, learning, reasoning, comprehension and knowledge.
3. **Emotional** – relates to an individual’s feelings.
4. **Social** – relates to an individual’s relationship with others.  [4 marks]

2 Possible effects could include:
- physical effects: dehydration, illness gets worse, delays recovery, panic attack
- emotional effects: distress, feel unimportant, not valued, anxiety, feel demoralised.  [4 marks]

3 Possible answers:
- anger, annoyance that her request is not taken seriously
- frustration because she does not know why she cannot have a home birth
- upset she cannot have the home birth
- devalued because she has not been offered an explanation.  [4 marks]

4 Possible effects could include:
- physically, the bully might injure Jayson, for example, bruises, broken bones and so on
- socially, Jayson may not want to join in with others, may want to just stay at home; he might develop behaviour problems and aggression towards others
- emotionally, he may become withdrawn and not want to attend school; he might feel unsafe at school and become very unhappy and scared
- intellectually, he might lack concentration, this could slow his progress and lead to him underachieving; time off school would also limit his progress and development of skills. [6 marks]

**LO3**

The key aspects of legislation and the groups to which they are relevant

1 Ageism, as the man is basing his opinion on the social worker’s age.  [2 marks]

2 (a) Any four from:
- men and women
- children and young people
- older adults
- people with disabilities
- vulnerable people.  [4 marks]

(b) (Award 1 mark for a reason for each of the four groups.) Possible answers include:

1. **Men and women:**
- may be discriminated against because of their gender or sexuality
- may not be given equal opportunities.

2. **Children and young people:**
- may not be aware of their rights
- may be taken advantage of.

3. **Older adults:**
- someone with dementia may forget about how they have been treated so it is never reported
- may be victims of age discrimination.

4. **People with disabilities:**
- certain disabilities or conditions may affect an individual’s ability to stand up for themselves
- lack of access due to failure to provide adaptations such as ramps.

5. **Vulnerable people:**
- may have learning difficulties and so do not realise their rights have been denied
- may become socially excluded from society, for example, become homeless.  [4 marks]

3 Example impacts include:

(a) **Service users** – people can exercise their rights and obtain redress.

(b) **Service providers** – will need training about the requirements of the legislation.

(c) **Care practitioners** – will need to produce organisational policies and procedures to fulfil the requirements of relevant legislation.  [3 marks]
An overview of the key aspects of legislation

**Equality Act 2010**

1. This refers to nine characteristics of individuals identified by the Equality Act. It is unlawful to discriminate on the basis of a protected characteristic. [1 mark]

2. Any four from:
   - Identifies nine protected characteristics.
   - Aims to prevent discrimination based on the nine protected characteristics.
   - Prohibits discrimination in education, employment, access to goods and services, and housing.
   - Women have the right to breastfeed in public places.
   - Pay secrecy clauses have been made illegal.
   - Protects them against harassment on the basis of their sex.
   - Has made pay secrecy clauses illegal. [4 marks]

3. Any two ways from:
   - Prohibits direct and indirect discrimination on the basis of marriage, civil partnership, pregnancy and maternity, and sex.
   - Provides protection for people discriminated against because they are associated with someone who has a protected characteristic (this means there is now also protection for carers of an individual who has a protected characteristic). [4 marks]

4. Explanations could include that a care setting could:
   - Adapt premises – for example, by providing ramps, lifts, automatic doors, wider doorways and so on, for wheelchair access.
   - Have leaflets/information available in a variety of formats, such as Braille, large print.
   - Provide clear signage so visually impaired individuals are not disadvantaged.
   - Install hearing loops/have staff who know BSL.
   - Produce easy to understand information for those with learning disabilities.
   - Provide parking spaces near to the building for those with disabilities.
   - Have a lowered section of reception desk for wheelchair users to speak to receptionists easily.
   - Have an equal opportunities policy. [8 marks]

**Children Act 2004**

1. (a) Any four from:
   - Aims to protect children at risk of harm.
   - Paramountcy principle.
   - Children have the right to be consulted.
   - Children have the right to have an advocate.
   - Every Child Matters (ECM).
   - Encourages partnership working.
   - Established requirement for Children’s Safeguarding Boards. [4 marks]

   (b) One from:
   - May involve practitioners in taking a child away from family – using care orders or emergency protection orders.
   - Duty of practitioners to work with children to follow safeguarding procedures.
   - Practitioners may need to provide an advocate, as children have a right to an advocate to represent them.
   - Practitioners should consult with children, as their wishes must be taken into consideration.
   - Practitioners have to ensure children stay within the wider family circle where possible, rather than put them in care.
   - Duty for care practitioners who work with children to follow safeguarding procedures. [4 marks]

2. (a) Every Child Matters. [1 mark]

   (b) Staying safe
   - Being healthy
   - Enjoying and achieving
   - Economic well-being
   - Making a positive contribution. [5 marks]

3. Explanations could include:
   - Gives them the right to speak out/have a voice/to be heard.
   - Children have a right to an advocate to represent them.
   - Practitioners have to ensure children stay within the wider family circle where possible, rather than put them in care.
   - Children’s Commissioner gives children a voice and represents their interests.
   - Puts a duty on local authorities to promote cooperation between agencies/practitioners, in order to improve the well-being of children and young people relating to the five outcomes of ECM. [6 marks]

**Data Protection Act 1998**

1. Any four from:
   - Data and information should be processed fairly and lawfully.
• used only for the purposes for which it was intended
• adequate and relevant but not excessive
• accurate and kept up-to-date
• kept for no longer than is necessary
• processed in line with the rights of the individual
• secured
• kept in the UK and not transferred to other countries outside the European economic area (the EU).

2 Any two ways. Example ways include:
• Personal information should only be used on a need-to-know basis; non-authorised staff/people should not be allowed to access the information.
• Only hold service users’ information for a clear purpose and only use it for that purpose, so they should only collect and use information that is needed.
• Staff have a responsibility to ensure information is correct. Systems should be in place for checking accuracy, for instance, checking with patients/residents/parents.
• Information should be deleted or destroyed when it is no longer needed, for example, by securely deleting or shredding sensitive or personal data.
• Information should not be transferred outside the EU unless the service user has given consent. This is because other countries may not have the same data protection legislation and so data may not be secure.

3 One mark for each correct answer:
• Maintaining confidentiality: B, C, D
• Data Protection Act principles: A, E.

4 Answers should include reference to the following:
• That they co-operate with their employer by following health and safety regulations in the workplace.
• They must report any hazards to the employer.
• They must not misuse or tamper with equipment provided that meets health and safety regulations, such as fire extinguishers.
• They must take care of themselves and others in the workplace.
• They must wear any protective clothing that is provided.

Mental Health Act 2007
1 Explanation could include: The Mental Health Act states that an individual can be taken to hospital and treated against their wishes. This is known as being ‘sectioned’. Sectioning can only happen if you have a mental disorder that puts you or others at risk of harm.

2 Answers should refer to two key aspects from the following:
• Aims to protect those at risk to themselves or others.
• Provides the authority to take the person to a ‘place of safety’ for assessment.
• Sets out the processes that must be followed to detain a person with a mental disorder.
• ‘Appropriate medical treatment test’ required for longer detention.

Explanation of impact should include two from the following:
• Need to be able to make difficult decisions, for example, taking the person to a place of safety without their consent – ‘sectioning’.
• Practitioners must be appropriately qualified – ‘approved social worker’ and ‘responsible medical officer’ are needed to make the decision to ‘section’.
• Duty of care – practitioners must follow procedures that safeguard those with a mental disorder/ensure information is shared.
• Personal skills and qualities – must be able to communicate well with those who have a mental disorder and their families.

Health and Safety at Work Act 1974
1 Personal Protective Equipment – clothing and protective equipment used to ensure personal safety in the workplace.

2 Any two examples from:
• hard hat
• steel toe cap shoes
• hygiene hat
• theatre scrubs/gowns
• overall
• high-vis jacket
• goggles
• face masks
• disposable gloves. [2 marks]

3 Any three from:
• PAT testing
• regular servicing and maintenance
• replacement programme for old, worn out equipment
• reporting system for damaged or faulty equipment
• check safety standards of equipment when purchasing – safety labelling, such as BSI. [3 marks]
Practitioners have the duty to provide the person with an independent mental health advocate. [4 marks]

3 Two ways from:
- protects people who lose the ability to make decisions for themselves
- prevents an individual from harming themselves or others by allowing a compulsory section order
- clearly defines what constitutes a mental disorder
- the individual has a right to have an advocate
- very careful procedures have to be followed when admitting the person against their will, to make sure their rights are safeguarded
- systems are in place to ensure accountability of those making the decision to 'section' the individual, such as Review Tribunals and Managers’ Hearings. [4 marks]

**How key legislation impacts on people who use services, care practitioners and service providers**

1 Two impacts from:
- they will know the rights to which they are entitled
- they can exercise their rights when using care and support services, e.g. choice, consultation, protection from abuse and harm
- provides a system of redress through the courts
- provides protection, for example, the Equality Act and the Children Act. [3 marks]

2 Two impacts from:
- they will need to attend training on the requirements of legislation
- sets the standards of practice and conduct that are required from them
- provides guidance, for example, on data protection, health and safety, equality and diversity
- they will be aware of their responsibilities to service users and service providers. [4 marks]

3 Discussion of impacts from:
- they will know what is required from the care setting to operate within the law
- gives them a framework to maintain and improve the quality of service
- they have to produce organisational policies and procedures to comply with legislation
- they will have to provide training for staff and PPE for them to carry out their duties safely
- the setting must be accessible, so reasonable adjustments have to be made. [5 marks]

**LO4**

### Personal hygiene measures

1 Practices to keep yourself clean, in order to prevent illness and the spread of disease. [1 mark]

2 Answers should include reference to the following:
- jewellery can trap bacteria; not wearing it removes places for bacteria to be trapped
- jewellery can scratch, for example, when lifting and handling patients
- jewellery can get caught on things, e.g. a long chain, and possibly cause injury
- nail polish can chip or flake off, for example, into food or a patient’s wound
- not wearing nail polish prevents contamination. [6 marks]

3 Explanations could include:
- they are not exposed to bacteria from other service users the practitioner has been caring for
- reduces levels of cross-contamination
- less risk of suffering from food poisoning
- infections will not spread as easily. [3 marks]

4 Explanations could include:
- reduces the spread of infection
- will not pass on bacteria to their service users
- prevents illness
- clean hair and teeth carry less bacteria. [3 marks]

5 Four from:
- hair tied back or covered
- regular showering
- regular hair washing
- regular brushing of teeth
- correct hand washing routines
- open wounds covered
- no jewellery
- no nail polish. [4 marks]

### Hand washing routines

1 Any four from:
- before putting on and after removing disposable gloves
- before and after treating wounds or caring for a sick or injured person
- before and after providing personal care for an individual such as feeding them or helping them get dressed
- before and after changing a nappy or incontinence pad
- before and after preparing or handling any food
- after handling clinical waste
- after clearing up rubbish and putting it in the bin
- after clearing up toys or equipment.
2 Descriptions should cover the main five or six points from the hand washing routine illustrated in Figure 4.2 using simple language and short descriptions. Aspects to include:
- wet hands, soap
- palms and back of hands
- fingers
- tips of fingers
- wrists
- rinsing and drying. [4 marks]

3 Explanations should include:
- the most common way of spreading bacteria is by the hands
- germs accumulate on the hands
- an individual touches, surfaces, objects and people throughout the day
- frequent hand washing limits the transfer of bacteria and viruses
- hand washing reduces the chance of spreading infection. [5 marks]

Protective clothing
1 Three from:
- disposable aprons
- disposable gloves
- rubber gloves
- face masks
- hair-nets or hygiene hats
- overalls
- overshoes
- surgical garments. [3 marks]

2 Three from:
- changing nappies
- changing soiled bed linen
- dressing wounds
- clearing up spillages, e.g. vomit, blood
- food preparation and serving. [3 marks]

3 Possible reasons:
- particularly important when preparing or serving food
- if hair is not tied back or covered it is more likely to fall into food
- if hair is not covered staff are more likely to touch their hair, which can spread bacteria to food. [3 marks]

4 They are effective barriers for retaining droplets that can be released when talking, sneezing or coughing.
- Along with surgical garments and overshoes, they reduce the likelihood of contamination during procedures such as surgery or dental work. [2 marks]

5 Protective clothing:
- hygiene hats
- overalls
- aprons. [2 marks]

Good practice because:
- hair is covered
- clean overall carries less bacteria than own clothes
- aprons provide a second hygienic layer. [6 marks]

Safety procedures
1 (One mark for each explanation.)
- A procedure is a process, not a specific action. Safety procedures are guidelines about how to deal with emergency situations such as fire. A procedure informs care workers and service users about what they have to do and how it should be done to ensure everyone’s safety.
- A safety measure is a specific action in order to provide people with safety information or a warning, such as putting up a fire safety notice or using a ‘wet floor’ sign after mopping the floor. [2 marks]

2 (Two marks for a way explained, four required.)
- Staff are DBS checked, to ensure they are suitable and safe to work with children.
- Staff trained to deal with safeguarding procedures, so they know what to do if they suspect abuse, for example.
- Have trained first aiders to provide emergency treatment for the children.
- All activities, trips, equipment are risk assessed, so that dangers and hazards are minimised and everyone is kept safe.
- Appropriate levels of supervision, depending on the age of the children and the activity taking place.
- Fire drills practised regularly, so that staff are aware of what to do to evacuate the children quickly and efficiently and so the children know where to go in the event of a fire. [8 marks]

3 (One mark for each point.)
- criminal record checks
- carried out by the Disclosure and Barring Service (DBS)
- they help prevent unsuitable people working with vulnerable adults or children. [3 marks]

4 Three from:
- ensures staff know their responsibilities in an emergency
- enables staff to take quick and efficient action
- service users will know what to do in an emergency
- everyone will learn where the assembly points are
- everyone will recognise what the fire alarm sounds like
- ensures everyone evacuates the building and is kept safe. [3 marks]
5 Two from:
- alerts staff to potential dangers
- enables staff to do their job safely
- staff know their specific roles in emergencies
- staff will know how to carry out risk assessments of activities, equipment, and so on
- reduces risks and ensures a safer environment. [2 marks]

**Emergency procedures**

1 Four from:
- how to raise the alarm
- who calls 999
- staff roles in the evacuation
- the special arrangements for certain individuals, e.g. those who are hearing impaired or have mobility difficulties, dementia patients
- checks that need to be carried out – empty rooms, windows closed, switch off lights
- where to assemble
- carry out head count, check register. [4 marks]

2 Discussion points (answers should have an equal amount of discussion for both service providers and service users):

For service providers:
- ensures that they can keep everyone as safe as possible and away from danger
- ensures the care setting complies with health and safety legislation
- provides guidance for staff so they know exactly what to do in an emergency
- enables staff to take quick and efficient action to remove service users and themselves from danger.

For service users:
- provides guidance for service users so they know what to do in an emergency
- Individuals using services will be reassured by knowing these procedures exist to help them in an emergency
- awareness that staff are trained to deal with emergency situations reduces anxiety for service users
- instils trust that the service provider is professional and cares for service users. [8 marks]

3 Four from:
- fire safety notices throughout the care setting
- signs indicating fire exits
- signs indicating assembly points
- a fire extinguisher by each exit
- a fire blanket in kitchen areas. [4 marks]

4 Four points outlined from:
- correct equipment is provided for the task; staff are trained and so know how to use the equipment correctly – this prevents injuries to themselves or to the service users
- specialist equipment is available when needed, e.g. hoists, fire evacuation chairs etc. – so that service users are handled safely
- electrical equipment is safe – so the risk of injury is reduced
- ensures the care setting is complying with health and safety legislation – so the risk of injury is reduced. [4 marks]

**Equipment considerations**

1 Two from the following.
- The toys should be checked for small or loose components that could be choking hazards.
- Ensure that the toys are age appropriate; for example, look for the Age Advice Symbol.
- Check that the toys have appropriate safety labels, such as the BSI or Lion Mark. [2 marks]

2 Possible answers:
- faults are spotted early as staff know it is their responsibility to report problems
- repairs are carried out as soon as they are needed
- equipment is not out of use for long, as it will be known there is a problem
- items will be disposed of and replaced or repaired as appropriate
- equipment is well maintained and kept in good condition, so less chance of it causing injuries or breaking down when in use
- equipment is serviced regularly and so kept in good working order. [6 marks]

3 Portable Appliance Testing is the term used to describe the checking of electrical appliances and equipment to ensure they are safe to use. [2 marks]

4 Four points outlined from:
- use correct equipment for the task; staff are trained and so know how to use the equipment correctly – this prevents injuries to themselves or to the service users
- specialist equipment is available when needed, e.g. hoists, fire evacuation chairs etc. – so that service users are handled safely
- electrical equipment is safe – so the risk of injury is reduced
- ensures the care setting is complying with health and safety legislation – so the risk of injury is reduced. [4 marks]

**Moving and handling techniques**

1 Four from:
- transferring a patient from a hospital bed to a chair
- assisting an elderly person with their mobility, for example, helping them to get out of a chair or into a bath or shower
- arranging tables and chairs in a nursery
- carrying boxes of toys
- pushing trolleys, drip stands, wheelchairs, etc.
- moving a commode into an elderly person’s bedroom
- a home care assistant carrying shopping bags. [4 marks]

2 Possible reasons include:
- so that they can give you permission to carry out the move
so that the person knows what you are going to do
• makes them feel valued
• helps them to be more relaxed and less anxious about being moved
• makes the move smoother and easier to carry out if the individual knows what to expect
• builds a trusting relationship between practitioner and service user. [5 marks]

3 Procedure:
• preferably use appropriate equipment – trolley, box on wheels – rather than lift
• only lift as much as can be easily carried – do not lift as much as you can, as this can cause injury much more easily
• check that there are no dangers in the environment such as an uneven or slippery floor and that there is enough space to carry out the move
• bend the knees; avoid twisting the back or moving sideways
• keep feet wide apart for stability
• hold the item being lifted close to the body
• move smoothly not jerkily; this reduces the risk of injury. [6 marks]

4 Three from:
• always check whether the move or lift is really necessary; do not carry out a move unless it is unavoidable
• identify any risks involved in carrying out the move and take steps to avoid or minimise the risks identified
• use a lifting aid if appropriate, rather than carry out the lift yourself
• if the move has been assessed to require two people, do not attempt the move on your own
• only carry out manual handing if you have been trained to do so. [3 marks]

5 Three from:
• manual handling training provides staff with guidance on good practice so they will know how to lift and move individuals safely; this gives them more confidence
• risks to service users and staff will be assessed and minimised
• staff will know whether a second person is needed for the manual handling task
• staff will do their job correctly; this ensures a safer environment
• service users will have more confidence in staff who have been trained in manual handling; this will help them relax when being moved because they trust the staff
• prevents injuries to both service users and care workers
• being trained protects staff from accusations of abuse, as correct techniques will be used so service users will feel comfortable and will be treated with dignity and respect. [3 marks]

Security measures
1 Explanation points:
• lanyards quickly identify staff
• easy to spot unauthorised people without a lanyard/badge, who can then be challenged
• easy to identify visitors
• visitors who know who is a member of staff
• improves safety – prevents strangers/intruders entering the setting. [6 marks]

2 Four from:
• have a member of staff on duty at the reception desk
• locks on external doors
• monitoring of keys
• security pads with pin codes
• electronic swipe card entry system
• CCTV monitoring exits and entrances
• alarms on external doors that are not in regular use
• window locks and window restraints. [4 marks]

3 Four from:
• a member of staff on duty at the reception desk
• signing in and out book for visitors
• escorting visitors while they are on the premises
• issuing visitor badges
• staff wearing ID lanyards
• staff uniform
• window locks and window restraints
• CCTV monitoring exits and entrances
• alarms on external doors that are not in regular use. [4 marks]

4 A limited number of people will have keys so access is controlled.
• Having a list of ‘key holders’ ensures the whereabouts of all sets of keys is known at all times.
• Prevents intruders from entering the building. [3 marks]

How individuals are protected
Methods for reducing spread of infection:
General cleanliness
1 Three from:
• spillages such as vomit, urine, blood cleared straightaway and the area cleaned and disinfected
• equipment sterilised
• hazardous waste disposed of following correct procedures; for example, dispose of used sharps (needles) in a hard yellow sharps box
• provide specialist disposal methods such as yellow bags for used dressings, disposable gloves and other clinical waste
• clean and disinfect bathrooms and toilets frequently. [3 marks]

2 Any two from:
• wearing a disposable apron; this is a barrier method that protects from cross-contamination
bottles of cleaning materials and anti-bacterial spray; this provides evidence of thorough cleaning
disposable gloves; these protect against the spread of infection and also protects hands from the effects of detergents on the skin.

(For each, award 1 mark for identification and 1 mark for the explanation.)

3 Descriptions could include:
- use of anti-bacterial sprays or wipes on work surfaces, door handles, computer keyboards
- toys and play equipment cleaned regularly
- toilets cleaned and disinfected frequently
- floors mopped and carpets vacuumed everyday
- bins emptied and cleaned frequently. [4 marks]

4 (Award two marks for a reason; two reasons required.)
Example reasons:
- Bacteria accumulate on people’s hands throughout the day as they touch surfaces, equipment, etc., so infection can easily spread through using a computer that is used by multiple people.
- If residents, nurses or admin staff do not wash their hands frequently enough, bacteria will transfer onto everything the person touches.

Methods for reducing spread of infection:
Food hygiene in care settings

1 Any four from the following.
- Ensure all work surfaces and equipment are clean before preparing food.
- Wipe clean surfaces with a clean cloth soaked in hot water and anti-bacterial washing-up liquid.
- After wiping down surfaces, use an anti-bacterial spray – these do not remove grease and dirt, so should be used after cleaning.
- Wash fruit and vegetables before use.
- Use different coloured chopping boards when preparing meals to keep raw and cooked food separate and avoid cross-contamination, which could lead to food poisoning.
- Clear away used equipment and spilt food as you work.
- Use correct food storage methods; for example, put fresh meat and fish on the bottom shelf in the fridge; ensure cooked food is cool before freezing.
- Check and follow ‘use by’ and ‘eat by’ dates.
- Cook food thoroughly to kill bacteria – a food temperature probe or meat thermometer should be used to check that food has reached 75°C or above.
- Keep food covered, for example, with cling film, foil or in a lidded container, to prevent contamination.
- Serve food as soon as it is cooked, so that bacteria do not have time to multiply. [4 marks]

2 Any four from:
- wash and dry hands thoroughly before and after touching food
- avoid coughing and sneezing near to food; use a tissue if you need to cough or sneeze and dispose of it straightaway;
- wash hands immediately after using a tissue and before touching any food or utensils
- food should not be prepared by anyone who is unwell with diarrhoea, a cough or cold, as bacteria will spread on to the food easily
- wear a hygiene hat or hairnet
- make sure you have a clean overall or disposable apron
- wear disposable gloves when serving food
- no jewellery or nail polish
- cuts and scratches should be covered with a coloured, waterproof plaster. [4 marks]

3 babies and young children
- pregnant women
- elderly people
- people with reduced immunity. [4 marks]

4 Using the correct different coloured chopping boards when preparing meals keeps raw and cooked food separate.
- It avoids cross-contamination, which could lead to food poisoning. [3 marks]

5 75°C or above. [1 mark]

Methods for reducing risk/danger: Risk assessment

1 A hazard is anything that could cause harm. Risk is the likelihood that someone or something could be harmed. [2 marks]

2 An action that can be taken to reduce the risks posed by a hazard or to remove the hazard altogether. [1 mark]

3 Step 1: Look for hazards associated with the activity.
- Step 2: Identify who might be harmed and how.
- Step 3: Consider the level of risk – decide on the precautions or control measures needed to reduce the risk.
- Step 4: Make a written record of the findings.
- Step 5: Review the risk assessment regularly and improve precautions or control measures if necessary. [8 marks]
Three from:
- toys on the floor
- broken toys
- wet floor
- trailing cables
- blocked fire exit
- intruders
- cleaning materials not stored securely
- food poisoning
- electrical equipment not PAT tested. [3 marks]

Procedures to prevent accidents and promote good practice

1 Two from:
- manual handling
- fire evacuation
- risk assessment
- accident reporting
- safeguarding. [2 marks]

2 Two from:
- good practice
- creates a safe and secure environment
- everyone is working within the law
- everyone is kept safe
- minimises risks and dangers. [2 marks]

3 Description may include:
- develop the skills and knowledge to avoid injuries to themselves and service users
- gain awareness of security measures used to keep individuals safe
- understand how to apply the values of care
- develop knowledge of effective communication
- carry out first aid
- understand safeguarding procedures
- have knowledge of health and safety policies and procedures
- carry out risk assessments
- carry out moving and handling techniques safely. [6 marks]

4 Example policies include:
- accident reporting
- bullying
- confidentiality
- equal opportunities
- fire evacuation
- health and safety
- manual handling
- risk assessment
- safeguarding. [3 marks]