

Post-16 Transition Support

BTEC National Level 3 Childcare and BTEC National Level 3 Health and Social Care

Transition Project

In preparation for your course, you should consider completing the following tasks so that you become more familiar with using a range of current resources and developing your ability to work creatively and independently. These tasks will enable you to create connections between what you already know and specific topics studied in your National Level 3 in Health and Social Care or BTEC Care

Knowledge Topics – Human Lifespan and Development

Task 1:

This task asks you to explore the Nature vs Nurture debate and discuss the influences it has on human behaviour. Within this task you will investigate anti-discriminatory practice as well as learn about the 6 C's which are essential skills required when working in Health and Social Care.

The nature versus nurture debate involves the extent to which particular aspects of behaviour are a product of either inherited (*i.e. genetic*) or acquired (*i.e. learned*) influences.

1. Categorise the following characteristics. Are they nature, nurture or both? Explain your reasoning.

Eye colour Weight Wealth Height Shape of nose Ability to play a musical instrument
Hair colour Skin colour Sexuality Personality Depression

2. Research **Gesell's maturation theory**. Summarise his theory into 3 key points. Why are milestones important for professionals when observing and assessing the development of infants and children? Suggest reasons for how knowing a child's stage of development can improve developmental outcomes for children in the long term.

3. Albert Bandura's [social learning theory](#) is based on his observations of learning occurring through observing the behaviour of others.

Watch the following clip: <https://www.youtube.com/watch?v=Mhe6p3Xkzt0>

Can you use some clips from 'Big Daddy' to help you explain the social learning theory?

4. Read the following newspaper article: <https://www.independent.co.uk/news/uk/crime/born-bad-or-made-bad-the-debate-is-reignited-2034312.html>

Create an argument for whether you believe the actions of the child killer's of James Bulger were driven by nature or nurture forces? You may wish to read more around this tragic incident to build a strong case of 'evidence'.

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Knowledge Topics – Meeting Individual Care and Support Needs

It is vital within health and social care roles that individual care and support needs are met. One of the most important aspects within these roles is communication. The table below outlines the 6 C's which are essential skills for working within health and social care.

Value	Definition
Care	Looking after and providing for the needs of a person.
Compassion	The awareness of the needs of others and the desire to help them.
Competence	The ability to understand a person's needs, combined with the expertise and knowledge to deliver effective care to meet those needs.
Communication	The exchange of information between two or more people that helps to provide care and support.
Courage	The personal strength and vision to do the right thing for the people being cared for.
Commitment	The determination to improve care and meet the needs of people.

It is also vital that '**people skills**' are used to help us to get on with other people, and so develop relationships with them. Some of these skills are:

Empathy – the ability to share and understand the emotions of others, such as sadness, anxiety or happiness.

Patience – the capacity to accept or tolerate problems without becoming annoyed or anxious.

Engendering Trust – the ability to get people to trust you.

Flexibility – being able to fit in with others and change your own plans if necessary.

A Sense of Humour – being able to see the funny side of situations.

Negotiating – the process by which two parties with different interests or perspectives attempt to reach agreement, for example a doctor and a patient.

Honesty – being truthful and sincere.

Problem Solving – the ability to ask the right questions and find an answer to a problem.

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Case Study

Mary, is a 76-year-old lady who has recently become a widow after losing her husband of 48 years of marriage. She has a daughter who lives on the other side of the world, as you can imagine she feels very alone right now. She has recently been assessed and told she would have to move to a care home for 24-hour assistance.

As she arrived, a care assistant was there to greet her. The care assistant did not introduce herself and seemed to be in a rush. She sat Mary in the lounge area with other residents which she had also not been introduced to.

Carer: "I am just about to finish my shift, so the night staff will sort your room out etc. ok"

Mary: "What about my medication? I need to take it before 9pm"

Carer: "You will get it when night staff are ready, they have more than just you to look after".

- *The carer did not make any note of Mary needing medication at 9pm, she also did not tell night time staff that Mary was not settled in her bedroom yet and that a care plan had not been started.*

Mary sat in the lounge for over 50 minutes before a member of staff noticed her sitting there. The senior carer introduced herself and all of the other residents to Mary. She then asked if she would like to go and see her where she would be staying and also reassured Mary that she would bring her medication to her new room as soon as possible. She also apologised for being left in the lounge by the day staff member and told her that a carer would be coming to sit in her room with her to fill in an individual care plan. A care plan should always be filled in by a care assistant within the first 24 hours of arrival into the care home. This is filled with important information regarding the resident such as: medication, allergies, likes, dislikes, background and also hobbies and interests. The more information that is in the care plan the better, this will ensure all carers can meet individual care and support needs. A carer came along to Mary's room within minutes and went through her care plan ensuring she asked lots of questions and made her feel important. The carer was very empathetic and also discussed stories regarding her own grandparents who are in a similar situation to Mary. The carer also made Mary some supper and a cup of tea as she had missed the tea time meal. Mary felt settled and much more relaxed after spending time with the night time carer.

1. Looking at the list of people skills above, which skills did the night staff use when communicating with Mary? Explain your answers.
2. What could the day time carer have done differently to make Mary feel more settled and at home? Explain your answers.
3. What different feelings might Mary be experiencing from arrival right up until bedtime?



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4. Looking back at the table above, did any of the carers appear to show any of the 6 core values?
Explain your answers.

Additional aspects to consider:

1. What are the 4 areas of development and what key milestones occur during the life stages as part of each area of development?
2. What are the 6 C's and how are these applied by professionals in health and social care settings?
3. How do we try and ensure equality in health and social care and what is meant by anti-discriminatory practice?
4. What is multidisciplinary team working and what are the benefits of it?

Time spent considering these now would not be wasted. Try to condense your thoughts into an A3 mind map and keep them for your course.