UNIT 1: HUMAN LIFESPAN DEVELOPMENT

LAA: Human growth and development through the life stages

Physical Development across the life stages:
• Principles of growth and development
• Infancy (0-2), including gross and fine motor skills
• Early childhood (3-8), including further development of gross and fine motor skills
• Adolescence (9-18), including changes made during puberty
• Early Adulthood (19-45), including reaching physical maturity
• Middle Adulthood (46-65), including menopause
• Later Adulthood (65+), including the effects of ageing.

Intellectual Development across the life stages:
• Rapid growth in intellectual and language skills
• Piaget's model of how children's logic and reasoning develops
• Chomsky's model in relation to how children acquire language
• Early Adulthood – thinking becomes realistic and pragmatic
• The effects of age on the function of memory, including memory loss.

Emotional Development across the life stages:
• Attachment to care-giver in infancy and early adulthood
• The development and importance of self-concept: definition and factors involved in the development of positive/negative self- esteem, definition and factors involved in the development of positive/negative self-image

Social Development across the life stages:
• The stages of play in infancy and early childhood: solo play, parallel play and co-operative play
• The importance of friendship and friendship groups (social benefits and effects of peer pressure)
• The development of relationships with others
• The development of independence through the life stages

LAB: Factors affecting human growth and development

The nature/nurture debate related to factors
• Development across the lifespan is a result of genetic or inherited factors – Gesell's maturation theory
• Development across the lifespan is a result of environmental factors – Bandura's social learning theory
• Both factors may play a part – stress-diathesis model

Genetic factors that affect development
• Genetic predispositions/disorders to particular conditions – cystic fibrosis, brittle bone disease, phenylketonuria PKU), Huntington's disease, Klinefelter's syndrome, Downs syndrome, colour blindness, Duchene muscular dystrophy, susceptibility to disease such as cancer, high blood cholesterol and diabetes.
• Biological factors that affect development – foetal alcohol syndrome, effects of maternal infections and lifestyle/diet during pregnancy, congenital defects.

Environmental factors that affect development:
• Exposure to pollution – respiratory disorders, cardiovascular problems and allergies
• Poor housing conditions – respiratory disorders, cardiovascular problems, hypothermia, anxiety and depression
• Access to health and social care services – availability of transport, opening hours of services, ability to understand the needs and requirements of particular services
Social factors that affect development:
• Family Dysfunction – parental divorce or separation, sibling rivalry, parenting style
• Bullying – effects of bullying on self-esteem, self-harm and suicide
• Effects of culture, religion and belief – beliefs that may prevent medical intervention, dietary restrictions

Economic factors that affect development:
• Income and expenditure
• Employment status
• Education
• Lifestyle

LAC: Effects of ageing

Major life events that affect development
• Predictable events/unpredictable events
• The effects of life events on health
• Holmes-Rahe social readjustment rating scale and the effects of life events on a person's stress levels and health

The physical changes of ageing
• Cardiovascular disease
• The degeneration of the nervous tissue
• Osteoarthritis
• Degeneration of the sense organs
• The reduced absorption of nutrients
• Dementia, to include Alzheimer's disease
• Effects of illness that are common in ageing

The psychological changes of ageing
• Effects of confidence and self-esteem
• Effects of social change, including role changes, loss of a partner, loss of friends, increase in leisure time
• Financial concerns
• Effects of culture, religion and beliefs
• Social disengagement theory
• Activity theory

Physical growth and development
Growth patterns
Puberty
Aging & Menopause
Mobility and movement
Lifestyle and fitness
muscle tone/strength
Skin elasticity

Gross = large (arms, legs)
Fine = small (hands & finger)

Emotional development
Feelings
Identity
Confidence
Self esteem and self image
Adapting to trauma
Bonding and attachment
Independence
Security
Contentment
Decisions and control

Intellectual development
Thinking
Memory
Learning
Language and communication
Creativity
Problem solving and logic
Expression

Social development
Relationships
Friends
Socialisation
Interaction
Communication

Unit 2: Working in Health and Social Care

LAA: The roles of people who work in health and social care settings

Understand the roles of people who work in health and social care settings.

The responsibilities of people who work in health and social care settings

Understand the day-to-day responsibilities of people who work in health and social care settings, to include:
• following policies and procedures in place in the health and social care setting in which they work
• healing and supporting recovery for people who are ill
• enabling rehabilitation
• providing equipment and adaptations to support people to be more independent
• providing personal care,
• supporting routines of service users
• assessment and care and support planning

Specific responsibilities of people who work in health and social care settings
Applying care values and principles:
• Promoting anti-discriminatory practice
• Empowering individuals
• Ensuring safety
• Information management and communication
• Being accountable to professional bodies.

Multidisciplinary working in the health and social care sector
Partnership working, to include: the need for joined-up working with other service providers; ways service users, carers and advocates are involved in planning, decision-making and support with other service providers; holistic approaches.

Monitoring the work of people in health and social care settings
How the work of people in health and social care settings is monitored: line management; external inspection by relevant agencies; whistleblowing; service user feedback; criminal investigations.

LAB: The roles of organisations in the health and social care sector

Ways services are provided by: public sector; private sector and voluntary sector.

Settings where health and social care services are provided to meet different needs.

Issues that affect access to services:

Referral; Assessment; Eligibility criteria; Barriers to access, to include specific needs, individual preferences, financial, geographical, social, cultural.

Ways organisations represent interests of service users
Charities/patient groups; advocacy, complaints policies, whistleblowing policies.

LAC: Effects of ageing

The roles of organisations that regulate and inspect health and social care services

 - In England: Care Quality Commission (CQC) & Ofsted.In Wales: Care and Social Services Inspectorate Wales (CSSIW), Healthcare Inspectorate Wales (HIW), Her Majesty's Inspectorate for Education and Training in Wales (Estyn).

 - In Northern Ireland: Regulation and Quality Improvement Authority (RQIA) Public Health Agency (PHA) Education and Training Inspectorate (ETI).

The roles of organisations which regulate or inspect health and social care services:

how regulation and inspections are carried out, how organisations and individuals respond to regulation and inspection, changes in working practices required by regulation and inspection, how services are improved by regulation and inspection.

Responsibilities of organisations towards people who work in health and social care settings: understand how to implement the organisation's codes of practice, meet National Occupational Standards (NOS), undertake continuing professional development (CPD), are safeguarded.

Working with people with specific needs in the health and social care sector: Ill health, both physical and mental, Learning disabilities, Physical and sensory disabilities, Age categories.

Working practices: Relevant skills required to work in these areas.

How policies and procedures affect people working in these areas. How regulation affects people working in these areas. How working practices affect people who use services in these areas. Recent examples of how poor working practices have been identified and addressed.