


Assessment record

First submission

Programme Title		BTEC Extended Cert/Diploma in HSC	Learner Registration Number	[REDACTED]
			Learner Name	
Assignment Title		Enabling individuals with additional needs to face daily challenges	Assessor Name	
Unit / Component Number and Title		Unit 12 Supporting individuals with additional needs		
Deadline		20/12/2024	Date Submitted	20/12/2024
Has an extension to the deadline been approved by the Assessor due to extenuating circumstances?				N
Targeted Criteria	Criteria achieved	Assessment comments		
B.P2	Y	Well done you have explained how disability can be viewed as a social construct.		
B.P3	Y	Well done you have described how health or social care workers can help one child (Rebecca) and one adult (Ben) with different additional needs overcome challenges to daily living.		
B.M2	N	You have not fully assessed the impact of challenges to daily living that may be experienced by one child (Rebecca) and one adult (Ben) with different additional needs and how effectively these challenges are overcome.		
C.P4	Y	Well done you have explained the benefits of adaptations and support provided to one child (Rebecca) and one adult (Ben) with different additional needs.		
C.M3	N	You have not fully analysed how the provision and support provided for one child (Rebecca) and one adult (Ben) with different additional needs have benefited them.		
C.P5	Y	Well done you have explained the impact of statutory provision on the support provided for one child (Rebecca) and one adult (Ben) with different additional needs.		
C.M4	N	You have not fully analysed how statutory provision has impacted on current practice in caring for one child (Rebecca) and one adult (Ben) with different additional needs.		
BC.D2	N	No work submitted towards this criteria.		
BC.D3	N	No work submitted towards this criteria.		
General comments				
Well done [REDACTED] you have achieved a pass grade for assignment 2 meaning you have secured a pass grade overall for Unit 12. You have tried hard on this assignment and have shown a good understanding on how Rebecca and Ben 's additional needs can be supported by HSC professionals to overcome them and ensure they are an active participant within society.				
Learner Declaration - I certify that the evidence submitted for this assignment is my own. I have clearly referenced any sources and any artificial intelligence (AI) tools used in the work. I understand that false declaration is a form of malpractice.			Learner signature	[REDACTED]
			Date	20/12/2024

PLEASE NOTE: When submitting evidence for assessment, each learner must sign a declaration confirming that the work is their own. You may use this form, a separate learner authenticity declaration, an electronic platform or incorporate a learner declaration into an Assignment Brief front sheet. Electronic signatures are acceptable if there is an audit trail to support its authenticity. This includes a scanned signature or the individual's centre-based email address. A font style is not accepted. Please see the Centre Guide to Internal Assessment for further details.

Assessor declaration - I certify that to the best of my knowledge the evidence submitted for this assignment is the learner's own. The learner has clearly referenced any sources and any AI tools used in the work. I understand that false declaration is a form of malpractice.	Assessor signature	
	Date	20/12/2024
Date of feedback to learner - this must be within a timely period of the assessment taking place and after internal verification has taken place.		
By signing the above declaration, you agree to your work and/or image (if featured in recorded and/or photographed files) to be used by Pearson or other Pearson group companies for: (delete if not consenting to some of the following) <ul style="list-style-type: none"> • professional development, online support, and training of Centre Assessors • support and training for Pearson Examiners/Moderators • published resources • marketing materials Your personal details will be kept in accordance with GDPR, if you have any concerns regarding this, please contact us via the Pearson Contact Portal .		
Resubmission authorisation by Lead Internal Verifier All resubmissions must be authorised by the Lead Internal Verifier . Only one resubmission is possible per assignment, providing: <ul style="list-style-type: none"> • The learner has met initial deadlines set in the assignment or has met an agreed deadline extension. • The tutor considers that the learner will be able to provide improved evidence without further guidance. • Evidence submitted for assessment has been authenticated and accompanied by a signed and dated declaration of authenticity by the learner. • Resubmission evidence must be submitted within 15 working days of learners receiving assessment feedback which must be within a timely period of the assessment taking place. 	LIV signature	
	Date	

Attached B-B2 C-P4
B-P3 C-P5

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Enabling Individuals with Additional Needs to face daily challenges

Disability as a social construct

Within society disability is seen as a **social construct**. There are four key words that would link to social construct (**class notes, 2024**):

- **Disability** - is something that happens to someone either when they are born or later in life, making it difficult for them to do certain activities and interact with the world around them.
- **Discrimination** - is the way a person is treated based on what disability someone has.
- **Impairment** – is something someone loses that they are either born with or they lose later in life that makes daily tasks difficult for them and need additional support such as guide dogs/ white cane to help them get around easier.
- **Disablement** – is when a person is in any condition that cannot perform daily tasks without assistance, which may arise from a **physical or mental impairment**.

The **medical model of disability** is what society believes that **disability** should be fixed by treatment, and it is seen as a problem even when it does not affect anyone, and it does not cause any pain to that individual. The medical model of disability creates a low expectation of what disabled people can achieve and leads to people losing their independence, choice, and control over their lives. Disabled people are **labelled** as the victim or the problem of society which is **stereotyping** them. The medical model of disability **disempowers** disabled people, and they are viewed as a group rather than just one person. The medical model of disability links to both Ben and Rebecca because of their disabilities, it would link to Bens down syndrome saying that his disability needs to be fixed with treatment rather than him going about his life with this condition. It also links to Rebecca's paraplegia as they also think that she would be the problem and needs treatment to fix her condition e.g. her paraplegia needs to be fixed by surgeries and treatments which would be **disempowering** her saying she's part of a group and that there is no suggestion that society needs to change at all. (**class notes, 2024**)

The **social model of disability** views **disability** as a society's fault and the way it is organised rather than it being the person's fault and their **impairments/differences**. It looks at ways of removing the **barriers** of society saying if they were removed then disabled people would be able to feel and live more independent and equal, the **barriers** to help

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people make their own choices and live a normal life where possible. Some examples would include a teenager with **learning difficulties** want to work towards living independently in their own home but is unsure how to pay rent the solution according to the social model would be for them to be supported when paying their rent but they will still be able to live in their own home and another example would be a child with a visual impairment wants to be able to read to be able to chat with his sighted friends about the book the solution for this one would be to ensure that he has the access to an audio-book when the book comes out and he is able to communicate how he feels about the book and is involved in other cultural activities in an equal basis with everyone else. **The social model of disability** would also link to Ben and because of Bens downs syndrome. This would link to Bens down syndrome because of where he is living as he is living in a residential home with a group of people who are just like him and have the same condition as him. This would be part of the social model of disability as it would blame society for his condition, and they do not believe that treatment would be able to help him (**class notes, 2024 and Aldworth, 2016**).

Social construct is an idea or concept that has been created and accepted by people within a society but does not exist inherently in the natural world. These constructs are shaped by cultural, historical and social contexts and their meaning or significance can vary across different societies or change over time. Examples of social constructs include things like laws. For example, with ben it would link **the equality act 2010** making people treat other people just as equal as they are treated. These concepts have meaning because society collectively agrees on their importance or function. While they can have real-world effects, they are ultimately the result of human agreement rather than an objective, natural reality. Susan Wendell's concept of the social construction of disability explores how societal structures and attitudes shape the experience of disability. Wendell argues that while some aspects of disability are rooted in biology, many of the limitations faced by people with disabilities are socially created. These include physical **barriers**, like inaccessible buildings, and social attitudes, such as neglect. Which exaggerates the challenges of living with a disability. Wendell emphasises that society's failure to accommodate diverse bodies and needs turns to impairments into disabilities, highlighting how cultural norms and expectations around productivity, independence and health **marginalise** those who do not conform to typical standards (**Class notes, 2024 and Aldworth, 2016**).

Overcoming challenges:

A challenge is the different problems and difficulties that Ben and Rebecca are faced with for their daily living, it also means that it needs great mental and physical effort in order to get a task done (**class notes, 2024**). Types of challenges for people depends on what condition they have and some people can have the same and also different ones. There are three types of challenges that Ben and Rebecca may have to deal with, the types of challenges are **environmental and social, physical and attitudes of others (Aldworth, 2016)**.

For Ben some of the challenges would be **social and environmental challenges** he would have to face **employment difficulties** of him having no job and being excluded in shopping centres and not being denied access to facilities in his local area. **Physical challenges** would be his **PIES** which would be him depending on other people and the physical section of his PIES as well which would be him doing activities such as him having days out with his residential care staff. **Attitudes of others** would be people **discriminating** him because of the way he looks and him not being allowed into events and people shouting abuse to him in the shopping centres, the other challenge for **attitudes of others would be him being labelled by society** as he has down syndrome with a mental age of an 8-year-old (**Pearson, 2010**).

Some of the challenges for **Rebecca** would include **environmental and social challenges**, which would be access to buildings with her wheelchair and her being able to join in with other activities her family and friends are doing. The **physical challenges** would be her Physical needs of her washing, dressing and other daily activities that she completes with some help and her intellectual needs of needing support with her school and being helped in and out of class. **Attitudes of others** she would have to deal with the **marginalisation** of there being a lack of wheelchair adaptations to buildings and also **discrimination** from others such as her neighbours (**Pearson, 2010**).

One challenge Rebecca may experience due to her paraplegia and physical needs is a **personal and social challenge** such as not being able to join in other peoples' activities. The **impact** of this challenge for Rebecca is that she wouldn't feel independent, and she is not able to join in when other people ask her if she wants to join in with what they are doing, making her feel isolated. This would also **impact** on her gross motor skills and her development as she may not be able to learn how to work as well with other children that are her age which may cause her to feel isolated and ignored. A **physiotherapist** could

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help support this challenge for Rebecca by providing her with modified equipment to help her to move around such as a wheelchair and make it easier to get around places. Furthermore, it would support her to build up her upper body strength during physical therapy sessions or exercises to carry out when she is out and about or when she is at home with her family. This type of support by the physiotherapist would be **long term** for Rebecca because of her paraplegia which is a **lifelong condition** which she will not be able to move her legs again. Physiotherapy is a **short-term** thing. It may help Rebecca start to gain more upper body muscle in her adolescence as she reaches puberty and then develops primary and secondary characteristics of Early adulthood. Some of the **benefits** that would help Rebecca would be that it can be performed on anyone with paraplegia. Every injury is personalised to the person so it would need a personalised plan to recovery that a **physical therapist** would create for them to help (Aldworth, 2016, Pearon, 2010 and class notes, 2024).

✓ CP4

Another challenge Rebecca may experience due to her paraplegia and physical needs is an **environmental and social challenge** such as she would need access to buildings (ramps) to help her access buildings as she wishes instead of her being lifted out of her wheelchair and then being put back into it (class notes, 2024). The **impact** of this challenge for Rebecca as she may feel **disempowered** as she tries to access buildings such as schools, overcrowded corridors and accessing doctors' appointments. This may **impact** on her self-confidence as she may not feel confident enough to leave her house and gain some friends to help her get around. It would not particularly be a **healthcare professional** it would be the buildings management that would help her under **the disability discrimination act 2005**. The disability discrimination act 2005 contains provisions for people that unlawfully to discriminate against disabled people in relation to employment, provision of goods and services and management to premises. The ways Rebecca overcomes the environmental and social challenge such as access to public buildings may effectively be overcome because it would limit any barriers that may stop her from achieving her goal, due to buildings becoming fully accessible for her to use her wheelchair. There are **many benefits for Rebecca and her family** to go through daily living such as it would be stress free for her to access school buildings. Some benefits would include ramps and lifts in and outside the building to give Rebecca freedom. Having ramps outside the buildings ensures safety for both the wheelchair user and for the people around them, having lifts in buildings reminds them to have independence and allows them to integrate into society as much as possible (Aldworth, 2016, Pearon, 2010 and class notes, 2024).

✓ B.P3

✓ B.P3
B.M2

✓ C.P4
C.M2

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A final challenge Rebecca may experience due to her paraplegia and physical needs would be **the attitudes of others** such as Rebecca being **marginalised** due to places not having enough wheelchair adaptations in their facilities. The **impact** of this challenge for Rebecca is that she may feel excluded if people do not have the right equipment for her to allow her to participate in other people's activities when they invite her to do things. This would also **impact** her self-confidence as she would no longer be invited to other people's activities as most places do not have the proper equipment such as a stairlift, toilet frames and hoists. Furthermore, she may feel excluded from social activities. The **impact** of this challenge for **Rebecca's family** may her parents missing out on taking her for days out as a family. This may cause stress for the family if they were to take Rebecca to join in with activities and it will cause them additional stress. An **occupational therapist** would help support Rebecca with finding an alternative way to help her carry out daily activities. **(Pearson, 2016)**. An **occupational therapist** would advise Rebecca to perform tasks which involve supportive/modified equipment to help her achieve the task. **The OT** may work in hospitals, in a person's home, in a GP practice, at a person's place of work or in an educational setting. Some of the **benefits** of using a hoist, stairlifts and toilet frames for Rebecca and her family would be for using a stairlift it creates more independence, enhance their mobility, safety and risk reduction of them as tackling stairs can be difficult for some with limited disability for someone like Rebecca. A toilet frame would create a stable and safe way while she is using the toilet. A hoist would help her parents to safely transport her to and from her bed in a safe way **(spinalcord.com, 2021, Aldworth, 2016, Pearson, 2010 and class notes, 2024)**.

B.MZ

B.B

CP4
GMB

One of the many challenges that Ben may have to deal with due to his down syndrome and diabetes is the **environmental and social challenge** of him not being able to get a job and him being unemployed because of his mental age and his down syndrome. People like Ben that have down syndrome can get a job, but they will be faced with barriers along the way making it difficult for them. It can be difficult as they may face discrimination against them and the employers might have a lack of understanding **(Stephen'splace.org, unknown)**. The **impact** of this challenge for Ben would be that he may feel frustration due to limited verbal expression, it might cause anxiety, depression and make quality of life critical. One **health care professional** that can help Ben find a job would be a **social worker** which would be a **trained advocate**. The social worker would help Ben by protecting him from people's abuse or people trying to harm him. They support elderly individuals, children and adults like Ben with physical and learning disabilities, young offenders and people with

B.B

B.B
B.MZ

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mental health problems. Bens social worker would find suitable job opportunities, they network with organisations that support people with down syndrome and promote employment opportunities and they advocate if Ben has any questions about the job and help him find transportation for him to get to his job. The **department of transport 2004** introduced a policy to help promote social inclusion by tackling accessibility problems for example Ben being able to travel on public transport and not get abuse shouted at him. The benefit of him being able to get public transport so he does not get verbally abused while he is doing daily tasks and wanting to go out for some shopping (**Aldworth, 2016, Pearson, 2010 and class notes, 2024**).

Another challenge Ben may have to deal with due to his down syndrome and diabetes is the **attitudes of others challenge** of Ben being **discriminated against**. Ben would be discriminated against because of the way he looks and due to his mental age of 8, and as he is a 52-year-old, people would think that he is strange because of the way he acts as an adult. This is evident when he goes to a funfair, and he is denied access because of the way he looks, he is denied because the manager thinks that it would offend other people and stop making them want to attend (**Pearson, 2010**). As Bens mental age is of an 8-year-old he would not be able to make more complex sentences as he also has learning disabilities. He would also start to think more about what has happened throughout the day that has happened to him, he would be able to recall information. On health care professionals that will help Ben being discriminated against would be a **therapist**. A therapist will help Ben by talking about if he has any self-esteem problems towards himself. Society has stereotyped views on mental health, which would give a person a higher reason to harm or at risk of being attacked rather than hurting other people (**mentalhealth.org.uk, 2021**). Another practitioner who is working to overcome Bens challenge is the **Support worker** that he has with him when he goes out of the accommodation. A support worker will be with Ben on a daily basis and this would be long term support for him. The support worker would help overcome the attitudes of others because when they are out in the local area supporting Ben and they hear or see him being treated differently by others they can address it head on and stand up for Bens rights under the **Equality Act, 2010**. This would help support Ben because he might not be able to do this for himself due to his downsyndrome. This would **benefit** Ben because he would not experience the discrimination as often or when he did it would be stopped or reported and he can have equal access to events and services like others because the support worker is trained to recognise and address the discrimination and must follow **anti-discriminatory practices** when working in their role. This would give Ben a better experience when he is out in society and will mean he might want to go out and socialise more in his local area because he will be treated with dignity and respect.

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The support worker would be treating him with compassion and he would feel safe going out with them (**Aldworth, 2016, Pearson, 2010 and class notes, 2024**).

The care and support given to both **Rebecca and Ben** would be done using a **personalised approach** by their **Health and Social care professionals** and the other individuals supporting them at the school for Rebecca and the Accommodation for Ben. This means that they would have support given to them that takes their needs in to account and what they want and wish. They would be involved and have a say or their family such as their mom's would be involved in their care because they are both mentally young people. This is so that the care can meet their requirements and care needs to help them meet their milestones and consider their own circumstances. This is important because they will have assessments and a care plan so they can use the information about them. The practitioners would be in a **Multi-disciplinary team** working together and sharing information to keep everyone updated on how the support is going and any changes in their circumstances. The care would look at **financial support** and what is available for them if they are in need of more support and cant afford to pay. They would be eligible for funding and **statutory provisions** (**Aldworth, 2016 class notes, 2024**).

CPL4
CPL3

Statutory provisions:

There are many statutory provisions that Rebecca and Ben could use. This is what they are entitled to because they live in **England**. They should have the right to access services because it is the law and so services and NHS should give them what support they need because of their profound conditions and needs. The provisions will be personalised to them and they only get what they need and are eligible for (**class notes, 2024**).

There are two different statutory provisions that Rebecca would have because of her Paraplegia and profound needs and being a child, and they are the **common Assessment Framework (CAF)** and the **Educational, Health and Care plan (EHCP)** (**Aldworth, 2016**).

The **common Assessment Framework** is a system which gathers information about Rebecca's needs and assesses how her needs can be met by the relevant support services (**Aldworth, 2016**). This statutory provision is given by the government who pay for it. A CAF is a process used to identify children's unmet needs and support them in a personalised way because they would have challenges and find it harder for their daily living. It is for early help and support. With CAF, an assessor works with Rebecca and her parents to understand what issue is at hand and then formulates an action plan to provide the best support possible. The CAF is what she needs because of her Physical need. The CAF would identify the support she needs and her family need and how to provide it best for her in a

CAF

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personalised way. Rebecca's teachers at her school could complete a pre-assessment checklist if they suspect a child would benefit from CAF. If it is needed, a common assessment will be offered her and her family would be involved and told. If her mom and dad are ok with this, the assessment will take place. The CAF will mean her professionals will work as a team to act early so she has less problems as she gets older. They would recommend support she needs at home, around in her local area and at school based on her age. CAF would **impact** Rebecca's life in a positive way due to her paraplegia because it would let her gain access to the support her and her family needs and facilitate a coordinated response to the support. The professional provided both **practical and emotional support** to families like Rebecca's and means they can get an advocate to help them express Rebecca's needs on their behalf so they are more confident in sharing information about her needs (**Gov.uk, unavailable**). By having a CAF agencies would work together and share information and resources so she has a more joined up approach to her support. She will then have better self esteem and feel valued as a person and not just restricted by her wheel chair. She would have better outcomes in her life changes more better. The CAF protects her and means she won't be forgotten about and struggle with her challenges all her life because they give her help early (**class notes, 2024**). If the CAF didn't happen or it was removed Rebecca could have problems later on in her life and have delayed development. She might get mental health issues or poor grades at school so she has less life chances than other people. She might get physical illhealth and social isolation because she has challenges still and no way of support. (**class notes, 2024**).

CMS
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CMS
094

The other Statutory provision is the **Educational, Health and Care Plan**. EHC plan is for children and young people up to the age of 25, with special educational needs and disabilities. Rebecca has a physical disability so is eligible. The EHCP identifies and plans the support Rebecca needs and sets out what must be in place to support her based on her individual needs. This is personalised to her and considers her holistic needs (**Aldworth, 2016**). A request for Rebecca to have an EHCP can be made by anyone who thinks an assessment may be needed, including doctors, health visitors, teachers, parents and family friends (**Gov.uk, unavailable**). Rebecca could get an EHCP if she applies directly to the LEA, or she can contact her school SENCO who can apply on her behalf. Once the request is submitted to the local authority where she lives, they will review the information and decide whether to proceed with it (**BBC.CO.UK, 2024**). Rebecca would have an EHCP to allow her to get funding she needs at school so they can best support her with a teaching assistant and someone to take her to the toilet and supervise her around

CMS

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the school building to do everyday tasks in her wheelchair. The EHCP would impact Rebecca positively because it would help Rebecca by letting her use her own voice and have a choice in what she needs. The impact of an EHCP is that it provides specific outlined support to meet Rebeccas educational needs and her and her parents can be involved in this and she would have a full assessment to identify what support she needs (**carersfirst.org.uk, 2024**). Rebecca having an EHCP she is eligible for special educational provisions within her current school, therapies such as physiotherapy and any other support that is essential for her educational experience (**IBBLaw.co.uk, unavailable**). Rebecca would have more choices that if she didn't have one and it means her needs are met because she has extra funding for services she needs. This doesn't help only physical needs it helps her emotional needs after her accident and becoming paraplegia. It covers her learning needs because she missed time off school being in hospital and she had to move school and will have missing learning and not be at her development targets. (**class notes, 2024**). If she didn't have the EHCP she would be behind other children her age and might miss school or struggle because she can not access it like other children that don't have needs. She might still be at her old school where she cant get around independently or at all with her wheelchair so be discriminated against and have less opportunities now and in her life.

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CPS
GML4

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CPS

There are many statutory provisions that Ben could use. There are two different statutory provisions, and they are the **Care and support statutory guidance under the care act 2014** and a **personal health budget (PHB)**.

A **personal health budget** is the amount of money the NHS gives someone to be allocated for Ben to support his health and wellbeing needs (**NHS, 2023**). The individual person such as Ben and the NHS on his behalf or with a partner organisation on behalf of the NHS. People who are eligible for a personal health budget include adults in receipt for NHS continuing healthcare, children and young people eligible for continuing care, people eligible for aftercare services under section 117 of the Mental Health Act and people eligible for an NHS wheelchair. Because of Bens mental age and Downsyndrom he would have someone who looks after his personal budget but they would advocate for him so he is still getting independence and choices about what he spends the money on. His mom might have done it before she died. On of the benefits that a PHB is that it enables Ben to have the choice and the control over what decisions about his care and the budget that is available to meet his needs (**England NHS, 2023**). A PHB will allow for Ben to have personalisation and approache he needs it is called bespoke care and support. The support could be resources or food and daily products he needs to survice and live,

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services or personal experiences which make a positive difference to Ben's to his daily living and life chances (**birminghamhospice.org.uk, unavailable**). Ben could pay for a personal assistant or equipment he needs and therapies that he doesn't get on the NHS and then needs to pay for it. Ben won't be able to drive so he can pay for transport to go shopping and do daily tasks or pay for his living and accommodation. (**Aldworth, 2016**). This can impact Ben positively and give him better quality of life and make him more independent than if he didn't have the budget and choice and control about paying. He can be more empowered (**class notes, 2024**).

The **Care Act 2014** is statutory guidance is the legal framework for Adult Social Care. It helps to improve the social care support for Ben because of his age and care needs. It is suited to him because he has Down syndrome. In the Care Act it helps Ben because his local council will have to support and promotes the wellbeing and independence of him because he is working age but is a disabled adult. It will help make him have some control of his care and support (**wandsworth.gov.uk, 2023**). Ben has complexed needs and PIES needs are more than other adults his age. He will need a lot of support that is personalised to him and different types from different practitioners. He needs practical, financial and emotional support to support him so he can manage his life and be more independent. Ben would have to provide evidence in the assessment that he is living with either a physical, mental, sensory, learning or cognitive disability than means he has the needs to meet eligible. (**Aldworth, 2016**). A care and support plan will be made to support him and have in it information about what's important to him, what he can do for himself, what equipment or care he will need, what his friends think, who to contact if they have any questions about his care and his personal budget and direct payments (**NHS, 2023**). The care Act impacts Ben positively because he will be protected against discrimination or abuse and neglect because he is at risk but the act protects that and gives Ben equal rights. He will be treated with dignity and respect and have all the information he needs to get care and support he needs to be independently living his life and having a better quality of life than if the care act didn't have it (**class notes, 2024**).

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Bibliography:

Class notes (2024) Unit 12 Lesson notes

Aldworth (2016) BTEC National Book 2 Health and Social Care

Pearson (2016) BTEC Unit 12 Case studies

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Stephen'splace.org (unknown) available at: [Stephen's Place](#)

Mentalhealth.org.uk (2021) available at: [Mental Health Foundation | Everyone deserves good mental health](#)

Crown copyright (unavailable) available at: [Home - UK Government Security - Beta](#)

Crown copyright (unavailable) available at: [Welcome to GOV.UK](#)

BBC (2024) available at: [BBC - Home](#)

Carers first (2024) available at: [Carers First: Help and support for unpaid carers](#)

IBBLaw.co.uk (unavailable) available at: [Solicitors in London, Uxbridge, Beaconsfield, Reading & Ascot - IBB Law](#)

NHS (2023) available at: [www.NHS.uk](#)

England NHS (2023) available at: [www.England.NHS.uk](#)

Birminghamhospice.org.uk (unavailable) available at: [Donate - Birmingham Hospice](#)

Wandsworth council (2023) available at: [Home - Wandsworth Borough Council](#)

