

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	[REDACTED]
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	Y	Well done you have 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	Y	Well done you have 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	Y	Well done you have 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	Y	Well done you have justified the support and adaptations provided for two individuals with different additional needs to help them overcome challenges to daily living, with reference to statutory provision.	
BC.D3	Y	Well done you have evaluated the impact of providing support for two individuals diagnosed with different needs in improving their wellbeing and life chances.	
General comments			
Well done [REDACTED] you have achieved a distinction grade for assignment 2 meaning you have secured a distinction grade overall for Unit 12. I was pleased to see how you have attempted more academic referencing and cross connections between areas of criteria for P/M/D. You have worked hard on this assignment and I have seen an improvement in confidence and writing ability. This grade is well earned.			
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

Author: VQAM
Approver: VQAM Lead

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Public

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<p>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.</p>	Assessor signature	
	Date	20/12/2024
<p>Date of feedback to learner – this must be within a timely period of the assessment taking place and after internal verification has taken place.</p>		10/1/25
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	Date	

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B.P3 BM2
B.P2
C.P4 CM3
CP5
BCD2
BCD3

Enabling Individuals with Additional Needs to face daily challenges

Disability as a social construct

Disability can be viewed as a social construct. A social construct is an idea or notion of any given society that may not represent reality but appears to be natural and obvious to the people who accept it. Society should not view individuals as disabled but that there should be mechanisms in place for people with specific needs to feel equal to everyone else in society. Therefore because of social construct the Equality act 2010 had been revised and updated in 2015 to protect the rights of people with disabilities (Aldworth, 2016 and Class notes, 2024).

To fully understand disability as a social construct there are several key terminologies to outline:

- **Discrimination** is when an individual is treated less fairly than others because of the way they look, their nationality or ethnicity, their gender, age or any other reasons.
- **Disability** is of any physical or mental condition that limits the movement or restricts the activities of an individual.
- An **Impairment** is when somebody loses a function of any part of their body, whether it is a physical or mental impairment.
- **Disablement** is any condition that makes an individual unable to perform daily activities without assistance, which may arise from a physical or mental impairment.
- **Marginalisation** is when a person or a group of people are made to feel excluded, isolated or unimportant.
- A **Stereotype** is making assumptions about someone or a group of people and making assumptions about them without knowing them.
- **Labelling** is applying a description about an individual or group usually based on their external appearance.
- **Disempowerment** is when a person or a group of people feel they have no power and are not included in the decisions that affect them.

(Aldworth, 2016 and Class notes, 2024).

One of the models of disability is the **medical model**. This model states that disability and the problems that come with it, belongs to the disabled individual. Their aim is that is needs to be fixed. The medical model defines and categorises disabled people by their impairment and gives them a label. This model links to Rebecca as they believe that the person is the problem. Therefore, because she is in a wheelchair as she has no movement in her spine, this is her fault, and she must get on with the problem's that come with it her disability. This is an example of disempowerment as it creates low expectations and leads to people losing independence, choice, and control of their own lives because of their impairment. This explains ways in which disabled people are stereotyped or judged when a person is placed at the centre as the "problem". It also has no suggestion that social construct is due to society and how it is structured. People who are disabled reject this model as it does not explain

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AP2

their personal experience of disability or help to develop more inclusive ways of living. Which resulted in segregation (**class notes 2024, Aldworth, 2016 and mdpag.org.uk**)

Another model is the **social model** which believes that disability is a natural form of diversity. It accommodates the disability with optimal outcomes for the individual. The social model believes disability is caused by the way society is organised. When barriers are removed, people with disabilities can live independently. By creating barriers in buildings and structures by not providing information in different formats such as Braille or easily read for people with impairments/ health conditions. This model acknowledges their rights apart of the equal rights act 2010. They believe that if modern life was set up in a way that was accessible for disabled people, then people would not be excluded or restricted because of their disablement. The social model of disability helps us recognise barriers that make life harder for disabled people. These barriers are identified as being the physical environment, people's attitudes, the way people communicate, how institutions and organisations are run and how society discriminates against those who are perceived as "different". Removing these barriers creates equality and offers disabled people more independence, choice and control. This model takes into consideration the many societal factors that impact someone with a physical impairment and the effect on their day-to-day life. These include the poor job prospects, small print formats, no disabled parking spaces or very few of them, poverty/low income due to struggles managing in work or because of health reasons and their academic and physical achievement (Aldworth, 2016 and Class notes, 2024 and disabilityrightsuk.org)

There has been much research done on **whether disability is a social construct**. Researchers like **Susan Wendell's** suggests that none-disabled people do not actively think about disabled people. Society does not adapt to today's norms but look at the overall medical diagnosis of the person and ignore all the factors that affect people with a disability. This is **marginalising** disabled people as it makes them feel excluded. Society is viewed as a social construct because it is a system of organised institutions that are created and maintained by able people. This perspective suggests that aspects of society, such as norms, values, roles, and institutions are not fixed but are shaped by human interactions and collective agreements over time, which makes it more difficult to change and adapt these for people with disabilities. What is considered normal in one society may not be in another, society is seen as disabling towards people who do not 'fit' into it. However, over recent years this is changing because of the **Equality act 2010**. This act had been revised and updated in 2015 to protect the rights of people with a disability. Old buildings that don't have wide corridors, hand railings and lifts etc are disabling people as they can't access these things, but newer buildings which have these accessed, Society will help individuals like Rebecca not feel **disempowered** as the barriers are removed so they'd be able to live in a society where they will feel in control as they have the rights and are able to make their own decisions. If all buildings can be modified to make society easy for people with a disability, then there would not be **discrimination**. Economic resources can also affect how disability is managed and supported. Societies with more resources may provide better services and accommodations, while those with fewer resources might struggle to support people like Ben and Rebecca (Aldworth, 2016 and Class notes, 2024).

BPZ

BPZ

Challenges to daily living and how to overcome them

This report will now focus on a range of **challenges that individuals with disabilities and impairments may face** due to their complex needs and how health and social practitioners can help to support. These challenges are barriers that affect their daily living and quality of life, if support isn't given it may cause issues to their physical and mental health. Healthcare professionals make decisions on how to overcome these challenges through tests, assessments, questionnaires and observations of the patients. Rebecca and Ben will need long term support and adaptations due to their conditions, so it is important that health and social care practitioners work together with them to see what can be put into place. There are three main challenges of daily living that I will be looking at, these include personal challenges, environmental/social challenges and attitudes of others.

One challenge Rebecca may experience due to her paraplegia and physical needs is **personal challenges**. Like daily activities, such as **washing and dressing**. The **impact of this challenge for Rebecca** is that she will be behind in her independence because of her condition, throughout early childhood (3-8 years) children begin to become more independent, but they are still dependent on their caregivers for most of their needs as she does not have the mobility and ability to do a range of daily living tasks on her own due to her paraplegia limiting her motor skills and movement. Furthermore, due to Rebecca's delay in her physical development due to her paraplegia, she is behind in her independence as other children at her age can ride a bike, climb a playground ladder, and hop on one foot but due to her being in a wheelchair she can't do these things which then means she doesn't have the independence and experience of playing on her own. At 8 years old children should be able to dress themselves and wash without any help from their caregivers. This then will also be an ongoing challenge for Rebecca when she gets into adolescence (9-18 years). This causes a delay in her fine and gross motor skills as she isn't able to be as independent as other children start becoming during this age, this can affect her self-concept as it may make her feel worthless compared to other children as she may compare herself to others and have low self-esteem or worry others see her as weaker or marginalize her due to her disability giving her negative self-image causing her to have negative thoughts about how she is and overtime this could impact her mental health. In adolescence is the stage where Rebecca's body will change into an adult, and where puberty will happen. This will impact Rebecca because of her body changing she may want to be able to dress herself and go to the toilet herself and protect her dignity, but because she does not have the independence due to her being in a wheelchair and having to be cared for, she will struggle being able to wash and dress herself during this period. Her personal challenges regarding daily tasks also impact her at school and so she may be more reluctant to attend and impact her intellectual development as she has already had time off school from the accident and moved school due to her needs. She may not be able to solve complex problems or think abstractly like many others her age due to her indirect developmental delay. Rebecca might be late for school as she takes longer to get ready in a morning. This challenge could also **impact Rebecca's family** as they may feel guilty and feel as if they

B.P + B.M2.
BC D3

have taken her independence away and that this will lead her to feel uncomfortable around them while going through puberty if they must carry on helping her wash and change. They may also feel impacted as they could feel stressed about her being behind at her age and how that will impact her future as she becomes an adult. This could also cause stress upon her family if she is left alone to change or wash, if she ends up falling over and causing further harm which would then cause other issues for Rebecca. Her family would also have been impacted as their family has had to reduce its income as mum cares for Rebecca to meet her daily personal challenges whilst dad is working low paid jobs and not spending as much time at home as he should. Also, her brother might not have as much attention or support from his parents because they are supporting Rebecca. (Pearson, 2010, GCP, 2024 and Class notes, 2024).

An **Occupational therapist** is an example of a health care worker that would work with Rebecca. An occupational therapist is an allied health professional and Rebecca's specialist at the hospital would have professionally referred her to get support from the occupational therapist. They would go and assess Rebecca at her home and school to listen to their needs and observe to assess her needs in her living environment and then suggest how they would adapt it so it's more functionable for Rebecca. **To overcome these personal challenges** Rebecca faces due to her paraplegia the occupational therapist would come out to Rebecca and her family's home and do an assessment and change things. This includes a handrailing so she can get in and out the bath, she also need a walk-in shower with a seat so she doesn't have any troubles while showering, which would be a **long-term adaptation** as it needs to be done for her personal hygiene. They would also include wheelchair modifications in the doorways/hallways of her home as it would be difficult for her to move around comfortably while in her wheelchair, this would be a **long-term adaptation**, so she doesn't feel disempowered or isolated in certain parts of her home. However, these adaptations would be re assessed following her care plan cycle as she gets older her needs and requirements would change (NHS, 2023).

Rebecca's mom can get **careers allowance** as she looks after her more than 35 hours a week from the **welfare state benefit**. Careers allowance will help with the house, like paying bills and food as her mom is unable to work. The occupational therapist would inform the council of any adjustments, and the family has rights to housing benefits and disability rights. However, modifications would need to be put in place because the occupational therapist would decide that it isn't suitable for Rebecca to be living not on the ground floor. (Aldworth, 2016) These adaptations and support provided by the occupational therapist positively impacts and help **Rebecca overcome her personal challenges** as it will help Rebecca regain/gain her confidence back and improve her quality of life, they will also impact Rebecca as they will provide the emotional support and help her cope with the challenges she faces with her condition. These adaptations made by the occupational therapist will be very effective in the support/overcoming this challenge for Rebecca as they can provide modified solutions to fit Rebecca and her specific needs as they can install any necessary equipment to help her move around

B.B-BM2

B.B
B.M3
C.P4

effectively and comfortably. They are also very effective for Rebecca as they will also enhance that mobility for Rebecca while also enhancing safety for her to minimize risks that may occur, but she can also gain more independence. These adaptations will also overcome this challenge as it will promote her dressing independence, by finding ways to encourage her to try and wash and dress herself when adaptations like handrails are put into place. An occupational therapist's support in **overcoming the personal challenges will also impact Rebecca's family** in a positive way as they will help them get adjustments into place with help from the council which they wouldn't have been able to without the help, they would also positively impact her family as now Rebecca has this support they can spend more time with each other and her brother Micheal which will help their family. **Academic research** into home modifications and adaptations put into place by occupational therapists prove that these are the right ways to support Rebecca's additional needs and overcome her personal challenge. Research of the effectiveness of home modification on quality of life for a wheelchair user paraplegic population concluded that the home modification is effective in the enhancement of quality of life. This shows how if these adaptations are put into place for Rebecca, she will overcome these challenges while she is young as it will gradually affect how she feels about herself as she will be able to move around without any struggles when she is at home. (RMJ, unavailable).

CMB
BC D2

One challenge that Rebecca may experience due to her paraplegia is **Environmental/social challenges**. This could include going to the swimming baths for swimming lessons at school as it is part of the school curriculum at her age. The impact of this challenge for Rebecca is that she will feel excluded from her friends at school because she is not able to get changed by herself back into her school uniform after swimming or get into her swimming costume as she lacks this Independence as her family has helped her ever since her accident. This would impact Rebecca's family as they may worry about her coping in changing herself and have anxiety about how she is going to get into the swimming pool due to her paraplegia. This may lead them to wanting to take Rebecca swimming themselves rather than with her peers because they are that anxious. An **Occupational therapist** could support to overcome this challenge for Rebecca by making sure that the organization that runs the swimming baths have suitable equipment for Rebecca so she can take part easily and effectively. An Occupational therapist would provide equipment like a **hoist** and floating devices like a floating collar. This support would be long term for Rebecca as she will need this every time she goes swimming. This would overcome this challenge for Rebecca as it would ensure she is safe and supported appropriately so there is no risk of injury. This would also ensure that there are no obstacles in the way and Rebecca can enjoy herself swimming. A hoist and other swimming equipment would overcome this challenge, as a hoist makes it so that everyone has the option to enjoy using the facilities. Rebecca having access to this means that she is in an inclusive environment. By this being provided for Rebecca, it is a positive benefit for her as it promotes her independence in being able to swim by herself rather than someone by her constantly like she does in her day-to-day life. This can also positively impact on her as it can lead her to have

B:P3
BM2

BCD2

improved self-esteem and overall well-being, which would improve her quality of life as she will feel confident within her disability. This would benefit Rebecca's family as they will feel comfortable sending her to swimming lessons with the school and they will feel like she is safe when there not in her presence. This will also take the stress of Rebecca's mom who fully cares for her, because she won't worry about taking her swimming on top of her other care needs. (Inova care concepts, unavailable, Care spaces, unavailable, Dolphin mobility, unavailable and Class notes 2025).

✓ CM3+CP4

Another challenge that Rebecca may face due to her paraplegia is the **attitudes of others**. For example, discrimination and marginalization from the people in her neighborhood who are making unpleasant comments as they walk past Rebecca. This negatively impacts her daily living as it may induce negative emotions and lower her self esteem, which could then impact her mental health at her young age. This could also negatively impact Rebecca as she may feel frustration and anger because of these comments being made around her. This could impact her family as they may feel guilty exposing Rebecca to these unnecessary comments, this could lead to them feeling like they must hide her away from others to prevent this from carrying on happening. This may also lead them to feel emotional distress and can create a hostile environment within the family. **Discrimination** towards Rebecca can also limit opportunities for the family as they may not want to go places in case this discrimination leads to worse. If a health and social worker were present at the time of this discrimination, they could challenge what has been said and report it under the equal rights act 2010. It is important that if discrimination is also shown towards Rebecca at school that there is a trained teacher that knows how to deal with discrimination and if there is that sort of behavior in school that there are posters around the school. Rebecca should be provided with a teacher who can assist her. The special Educational Needs and Disability code of practice provides guidance for health services, local authorities, educational settings, and youth teams. This code of practice ensures that all services can support Rebecca with her needs. A health and social worker can overcome this discrimination towards Rebecca by promoting awareness, providing education, and advocating for equality and inclusion. They can offer support to Rebecca's and her family and empower them to voice their concerns and work towards creating a more accepting environment for Rebecca to be in. This would effectively overcome this challenge for Rebecca as people would be aware of disability and paraplegia, this would also make Rebecca's neighbors understand that it is not Rebecca's fault that she is in a wheelchair, but it is due to her accident. This support by the health and social care worker will benefit Rebecca and her family because it can lead to Rebecca being included and stop the comments being made to her. It will benefit her family because it can also encourage them to advocate for paraplegia and how it has affected not only Rebecca but also her whole family, this can also mean as a family they could give advice to people in similar circumstances. (Age UK, unavailable, Royal college of occupation therapists, unavailable, Pearson 2016 and Class notes 2024).

B-P3
B-M2 CP4
CM3
BC02

One challenge that Ben may experience due to his down syndrome and type 2 diabetes is an **Environmental and Social challenge**. This includes **employment**, for example working in a shop. This challenge would impact Bens daily living as employment provides not just financial independence but also a sense of purpose and belonging. This may also affect his daily life as he will struggle to be able to develop his social skills and build relationships with other people who are not his mom. This is because he is so used to his life just being him and his mom, employment can encourage him to form different relationships with a range of people including colleagues and customers. One health and social worker that could work with Ben to overcome this challenge is a support worker. **A support worker** would help Ben by exploring employment opportunities and navigating the challenges of finding a job due to his disabilities. They would also be able to consider what can be put into place because of his mental age being 8 years old. They can overcome this challenge by assisting Ben with travel training, teaching him how to use public transportation, for example looking at bus routes and physically showing Ben what stop to get on and off at. This will enhance his independence and confidence. This would effectively overcome this challenge as it provides practical support and guidance in finding suitable job opportunities that match his skills and interests. This can help build Ben's confidence and give him a sense of accomplishment which would help with his development. This would also be effective as the support worker can teach Ben these skills which promotes his independence outside of his supported living which means he can positively engage with the community; this prevents him feeling isolated. By a support worker helping ben with travel getting to work, this would overcome the challenge as they could be an advocate for ben, and they can enable Ben to live as independent as possible. They also overcome this challenge by making sure that companies/employers fit in with the rights and laws. This includes the Employment Law, the health and safety at work act 1974 protects employees against any form of discrimination. Overall, getting support from a support worker would be incredibly beneficial as they can provide encouragement and motivation ensuring Ben understands his role and responsibilities in his workplace. (Pearson 2016, Aldworth 2016 and Class notes 2024).

B.P3+B.M2
C.P4 + C.M3
BCD2

One challenge Ben may face due to his down syndrome and type 2 diabetes are the **attitudes of others**, such as not being allowed access to events. The impact of this challenge on Bens daily living is that he will feel social isolation, exclusion from events can lead to feelings of loneliness and isolation. This will also impact Bens daily living as being denied access to events can affect self-esteem and confidence which will make him feel rejected and frustrated. A health and social care worker that could help overcome this challenge is a social care **advocate**. A social care advocate would overcome this challenge by engaging with event organizers especially the funfair manager who denied Ben access to the fair due to his appearance and remind them of the human rights act and the inclusion policy to promote the importance of inclusivity for individuals like Ben with down syndrome. They could also **overcome** this challenge by creating inclusive opportunities, if certain events remain inaccessible the advocate could work to create alternative events that Ben can be involved in. A social care

B.P3
B.M2

advocate would also provide support by helping Ben with any discrimination and verbal abuse he may have when facing others. This support would be long term as he may experience being discriminated against and denied access several times and therefore would require an advocate. This would effectively overcome the challenge as although Ben may feel disempowered by not being able to make his own decisions because of his mental age he can work with the advocate to express his feelings about not being allowed into events like the fun fair and can come up with solutions to overcome this issue, so he is involved with the process. This would also effectively overcome the challenges of isolation for Ben as raising awareness can be done, through campaigns to educate the public about the needs and rights of individuals with disabilities. This adaptation and support from the health and social care worker will benefit Ben overall as making people aware will impact his self-esteem and having that support will reduce his marginalization as he can feel included in society. (mencap, unavaliable, People First info, unavaliable, Scope, unavaliable and Aldworth 2016).

C-15 CMB
B402

One challenge Ben may face due to his Down syndrome and type 2 diabetes are **personal challenges**. Such as socialization, like days out, for example going to the zoo. This may impact Bens daily living as because of his diabetes he will have to remember/carry his **medication** in case of an emergency. This will also affect his daily life as he will have to remember to take the medication, which will be a problem as his mental age is only that of an 8-year-old. One health and social care worker that could work to overcome this challenge would be a **support worker**. A support worker would work with Ben and the people who are in charge at his residence, to create a tailored medication plan. This ensures that reminders and support are in place for taking medication while out. Additionally, they would have to also provide the assistance of a support worker during outings to ensure that the medication is taken correctly as he can't do it himself. This would be a long-term adaptation because of his mental age he would require this support throughout the rest of his life. This would effectively overcome the challenge as providing structured support for Ben will help him feel more secure about their medication. This would also overcome the challenge of creating a scheduled medication plan, reducing the likelihood of forgetting medication on days out. This would also be effective as making a plan would ensure that Ben's health is put first so it rules out any possible situations of him getting hurt. This would lead to a more enjoyable outing for Ben, as there wouldn't be any worry about forgetting to take medication. (class notes 2024, Lifeways, 2023 and Pearson 2016).

B. P4 B112
C-15 CMB

Further personal challenges ben may have due to his additional needs specifically around his down syndrome and daily living also include his emotional wellbeing as Ben may experience social isolation or be at an increased risk of depression due to his dependency on others, previously his mom and now the support workers at his residential home. One health and social worker that could work to overcome this challenge is an occupational therapist. They would work with Ben by designing activities that he will enjoy which will help boost his self-esteem. Occupational therapists may also work with Ben to help develop his daily living and coping strategies which will

empower him to speak about his feelings. Occupational therapists would connect Ben to community resources that will encourage his social interactions and emotional health, whether it be a group with people with additional needs where they do activities. They could also overcome this by using Statutory provisions, they can help navigate these and entitlements, such as mental health services if Ben needs extra support to deal with the loss of his mom and how overwhelmed he might feel. These reasons would effectively overcome this challenge of Bens emotional wellbeing as it will reduce feelings of isolation and Ben having an occupational therapist supporting him might give him a quality of life and reduce any possible feelings of depression. This would also effectively overcome this challenge as they can help Ben achieve multiple goals that will improve his mental wellbeing. (Down syndrome resource foundation unavailable, Ndss, 2024 and theotcenter, unavailable).

B.P3 BM2
CP4 BM3
BODL

Conclusion for Ben

I believe that from my research regarding Bens challenges to his daily living that the biggest impact on Ben is personal challenges. This is due to his diabetes it is hard for him to manage medication by himself, especially because of his mental age. Also, because he will need a health and social care worker like a support worker to help him with this, Ben may struggle to understand that the support worker is trying to help him and may get overwhelmed as he is only used to being with his mom. This is also the biggest impact as if he doesn't have medication properly for his diabetes it will affect his health and wellbeing. In relation to this challenge, it could be overcome effectively by the support of the support worker if they involve Ben as much as they can with the decisions and speak through everything, they are going to do so he doesn't feel isolated. Working alongside the Government, they provide support workers with a grant to help pay for things like specialist equipment and assistive software which could help in Ben's situation. Whereas the challenge that has the least impact is the attitudes of others. This is because it is possible to make support groups or find other activity groups that Ben can get involved in. It is also easier to find places that include Ben for the way he is which will make Ben think about the positives rather than the negative comments he has faced.

BM2

Conclusion for Rebecca

In conclusion from my research regarding Rebecca's challenges to her daily living, I believe the biggest impact on Rebecca is personal challenges. This is due to her delay in her independence, because of this it is hard for her to wash and dress herself. I also think that this is the biggest impact as it will affect her throughout the rest of her life, it isn't a temporary issue. As Rebecca becomes a teenager and hits puberty her body will change, and she may not want to be dressed and washed by her mom who cares for her however she will not be able to if she doesn't gain independence and a way of becoming independent and not letting her condition get to her. Whereas the challenge that has the least impact is environmental and social challenges. Regarding Rebecca having to have access to a hoist when swimming, in my opinion this would have the least impact on

BM2

Rebecca's daily living as she can have access to equipment from the government resources or the company where she goes to for these lessons. This means that Rebecca can feel involved in what the other children are doing, although she won't be able to do exactly what they can do she has adaptations in place unlike she does for her personal challenges.

Analysis of benefit of support for Ben

The support/provision in place of Ben follows a person-centered approach. A person-centered approach is about focusing on the needs of an individual, ensuring that people's preferences, needs and values guide decisions, and providing care that is respectful for them. This means that Ben is involved in his own care. Like Ben deciding what supported living environment he wants to live in this specifically would benefit him as he can make this informed decision on what he wants not what the people around him want. A health and social care worker would have worked with Ben to see what he felt comfortably and help him support him making this decision as his mom is unable to. This means that Ben will have access to his own care plan and will be able to decide if he wants to change where he now lives if it isn't right for him. This is important that the healthcare professional takes a person-centered approach, so it doesn't marginalize him. They should work alongside him to come up with what's best for him not just physically but mentally. (NHS 2024, Aldworth 2016, Pearson 2016 and Class notes 2024. ✓ CMB

Analysis of benefit of support for Rebecca

It is also important that as well as Ben, Rebecca is supported in this way. A Person-centered approach is important as it supports Rebecca to develop knowledge, skills and the confidence she needs to effectively manage her paraplegia as she gets older. It is vital that this approach is used when a health and social care worker makes her home mobility adaptations. This is because it is pivotal that it ensures that these adaptations meet specific needs and preferences of Rebecca and with her mom's help. This approach fosters independence, comfort for her and promotes a sense of ownership over her living space. By using a person-centered approach and involving Rebecca in the decision-making process it can lead to better outcomes. (national institutes of health, unavailable, Class notes 2024 and Pearson 2016). ✓ CMB

Statutory Provision

Statutory provision is important for individuals with additional needs referring to a specific part of the law that enforces certain services. Ben and Rebecca would require different statutory provisions to help them in their day-to-day life.

Rebecca statutory provision for children with additional needs

There are multiple forms of statutory provisions that can be put into place to help support Rebecca. One of these provisions that would benefit Rebecca the most is the

Education, Health and care plans service. This service is for children and young people aged up to 25 who need more support than is available through special educational needs support. EHC plans would identify Rebecca's educational, health and social needs and set up additional support to meet her needs. This would be provided for Rebecca, especially when she is in school. Due to her paraplegia the EHC plan would be implemented in school through multiple support measures tailored to her specific needs. For example, **physical accessibility**, the school would ensure that the environment is accessible including ramps, appropriate classroom layout. EHC plans also can include provisions for **medical support** for Rebecca during school hours, ensuring that her health is monitored. The creation of Education, health and care plans involves **collaboration** between parents, teachers and health professionals. This makes sure that a comprehensive approach to Rebecca's education and well-being with everyone involved, especially considering the time she has spent of school and future appointments she may have. Statutory provisions like Education, health and care plans have an impact on the support Rebecca has for her **PIES**. EHC plans positively impact her **physically** as physical adaptations are made in school, such as wheelchair access helping Rebecca navigate the school safely and comfortably. **Intellectually** the plan can include tailored education resources that fit in with Rebecca's learning style and needs. This helps to keep Rebecca engaged in her education. The plan also often includes **mental health** support to help her cope with her condition and worries she may have. Finally, the EHC plan positively impacts her **social development** as it can promote inclusion, making sure that Rebecca has opportunities to interact with her peers which can help her build friendships and improve social skills. This statutory provision has a positive effect on Rebecca as it allows personalized support catered to her and her learning requirements. It also allows regular reviews allowing for adjustments to be made. The EHCP from the **1st of September 2014** stated that schools in England must provide support to children with specific educational needs. This is called **SEN** support. Schools are deemed to have **£6000 of national funding** within their existing budget to support children at the SEN support level. If this type of statutory provision was not in place or was removed it would have a negative impact on Rebecca for many reasons, one of them being lack of support without this plan Rebecca might not receive the tailored support she needs which will make it difficult for her to keep up with her peers. It would also mean that there would be accessibility issues, the absence of adaptations in school would lead to increased barriers making it harder for her to move around. Finally, it would negatively impact as it would leave an emotional impact as she will feel frustrated and isolated. There are several statutory frameworks available for someone with paraplegia including the **Equality Act 2010, Children and Families Act 2014** which outlined the requirement for EHCP, **Care act 2014** and the **Special Educational Needs and Disability (SEND) Code of practice**. Research shows that children with special educational needs or disabilities are "particularly negatively affected" by ongoing financial pressures in schools, a report by Ofsted has found. One to one support has been cut at some schools to ease financial pressures. Research conducted by the inspectorate found that 80 per cent of primary school head teachers

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and 72 per cent of secondary school head teachers who responded to a survey said changes to SEND provision had been made due to financial pressure. This shows that if the EHCP was to stop funding entirely then Rebecca wouldn't be able to gain the most out of her education like her peers. (cypnow.co.uk, Education, Health and Care plan-local offer Birmingham and class notes 2024).

Another Statutory provision for children like Rebecca with additional needs is the **Common Assessment Framework (CAF)**. This is a shared assessment tool used across agencies in England. It can help professionals develop a shared understanding of a child's needs. This offers a way to look at what's working and what's not working to come up with a smart plan to make things better. The CAF involves listening to both the carer and their child to establish what extra support may be needed. This would typically be used in the identification of needs, the CAF helps identify the specific needs of a child like Rebecca with paraplegia in various areas such as education, health and social care. This allows professionals to gather information about Rebecca's strengths and challenges. The CAF is primarily designed as an early intervention aid to help small problems be recognized before they turn into something larger. It can also be provided in multi-agency collaboration. This plan is designed to promote collaboration among different agencies, including health services, schools and social care. For Rebecca, with paraplegia, this means that teachers, healthcare providers and social workers can work to create a plan with Rebecca and her family. The common assessment framework can **significantly impact** Rebecca's **PIES** development as the plan identifies specific **physical** requirements such as mobility in her home. The plan can **intellectually** provide tailored educational support. The CAF addresses **emotional** wellbeing by recognizing the potential challenges in her coping with paraplegia and it promotes **social skills** as Rebecca will talk about what adaptations she wants to make. The common assessment framework will have a **positive difference** on Rebecca as it allows **empowerment and advocacy** by involving Rebecca and her family in the assessment process as they empower them to advocate for her own needs and preferences. It also provides **ongoing monitoring** and review as it includes provisions for regular reviews of the support plan and adjustments can be made if anything changes over time. If this statutory provision was taken away it would negatively impact Rebecca as it would be difficult to identify needs early. The CAF often helps in early identification of needs, without it there might be delays in recognizing and addressing issues which could worsen Rebecca's situation over time. It would also have a negative impact as it increases burdens on Rebecca and her family. Her family and Rebecca may find themselves taking on more care and responsibility without the guidance and structure that the CAF has to offer. **Research on the effectiveness of the common assessment framework** concluded that the CAF processes lead to better outcomes for children and young people and show that initial investment in early intervention, supported by the CAF process, can lead to significant savings through a reduction of specialist services accessed in the future. This Study also finds that implementing the

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CAF process leads to improved outcomes. All the case studies reported some improvement for the child, the family and the extended family. Statutory frameworks that are available for Rebecca include, **The mental Capacity Act** and **The Health and Social Care Act 2012**. (communitycare.co.uk, Class notes 2024, proceduresonline.com and www.learningladders.info, Gov.uk).

Statutory provision for adults with additional needs

There are also multiple statutory provisions that can be put into place for adults like Ben with additional needs. One of these provisions which would positively impact Ben is the **Care and Support statutory guidance issued under the Care Act 2014**. This provision is a legal framework for Adult Social Care, it places a duty on councils to support and promote the wellbeing and independence of working age disabled adults and older people, and their unpaid carers. This gives them more control of their care and support. This guidance sets out how local authorities should go about fulfilling their responsibilities, both individually and in partnership with other local organisations, communities and people themselves. The local authorities would be responsible for providing this support for Ben, most likely the adult social services department of the local council. These authorities are tasked with assessing the needs of Ben, determine eligibility for support and ensuring that appropriate services and care plans are in place. Additionally, they work in collaboration with health services and other organisations to provide support tailored to Ben. It would typically take place in various settings, depending on the individual needs, this would typically take place in various settings. In Bens case this could include his home environment which is his residential home. The local authority would conduct assessments and provide necessary support. This support would positively impact Bens PIES as under the Care Act 2014 it promotes wellbeing. Research shows that the care and support under the care act is useful as it emphasises a person-centred approach which means that the service is original to fit the individual's needs. This will promote Bens **emotional** development as under the act the core purpose of adult care and support is to help people achieve the outcomes that matter to them. The local authorities must promote wellbeing when carrying out ant of their care and support, this will encourage Ben. This provision will positively impact Bens **physical** development as they ensure that Ben receives this tailored support that will addresses his specific health and care needs, this guidance promotes access to services like physiotherapy, which can help improve his muscle strength and coordination. **Intellectually**, it positively impacts Ben as the provision can also meet his cognitive needs promoting his engagement in his own care plan. Finally, it would impact Bens **social** development as they will promote opportunities for social interaction and community engagement. This guidance emphasises the importance of integrating Ben into social settings where he can build relationships. This statutory provision makes a significant difference for Ben as it helps cognitive abilities, promotes social interaction and community engagement which are essential for his overall development. Other types of statutory frameworks available for Ben is the **Mental Capacity Act 2005** as it protects individuals who may need assistance in making

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decisions about their care and welfare ensuring rights are protected. (Gov UK, 2024, classnotes, 2024, Carers trust 2024 and Pearson 2016).

Another statutory provision that can be put in place for Ben is the **Personal Health Budget**. This provision is a personal health budget where an amount of NHS money that is allocated to support a person's health and wellbeing. If someone is eligible for this, the individual (or the person who represents them) will work with the local NHS team to plan how to spend the money and get the care they need. A personal health budget allows Ben to manage his healthcare and support for treatments, equipment and personal care in a way that suits him. A personal health budget for Ben can be used in various ways to enhance his quality of life and support his needs. Funds can be used to help aid like **support workers** for Ben to help with his daily living, this could include personal care, meal preparation and household tasks in his residential home. This support empowers Ben to lead a more fulfilling life as it provides the resources he needs to thrive. The Personal Health Budget can positively impact Bens **PIES, physical**; it allows for access to health services who can advance his physical well-being and promote a healthier lifestyle. With a personal health budget, Ben can engage in skill-building activities, fostering cognitive development, this will improve his **Intellectual** development. Having control over certain aspects of his health budget can boost self-esteem and confidence as he can make choices that reflects his personal preferences, this leads to greater **emotional** well-being. The budget can also facilitate participation in **social** activities. Helping to build relationships and reduce feelings of isolation. Overall, a personal health budget empowers adults like Ben with Down syndrome to lead more independent lives across these four areas. This statutory provision makes a significant difference for Ben by providing him with greater control of his care and allows him to choose the services he wants. This approach can lead to improved outcomes in his physical health, emotional well-being and overall quality of life. Removing or not having a personal health budget in place could significantly impact Ben by limiting his access to necessary support services and resources. Without this flexibility of support, he may face challenges in receiving appropriate social support and other essential services which could hinder their development. **In a study conducted on the impact of Personal Health Budgets** found that, after a year, the use of personal health budgets led to a significant improvement in patients care related quality of life and psychological well-being. Other statutory frameworks that are available and can be provided for Ben is **code of practice equality act 2010, Disability Discrimination Act and Care act 2014**. These will further support Bens rights because of his additional needs. (nihr.ac.uk, unavailable, www.nhs.uk, 2024, www.england.nhs.uk, 2023 and class notes 2024).

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Statutory provision has significantly impacted current practice in caring for children like Rebecca with paraplegia by establishing clear guidelines and frameworks that ensure her needs are met. Such as the **Children and Families Act 2014**, this explains the importance of support personalised for children with disabilities. This has led to the development of **Education, Health and Care (EHC)** plans, which outline specific educational and health needs, making sure Rebecca receives appropriate support and

resources. These statutory provisions positively impact Rebecca's life as they both are designed to support children like her making sure that her health and wellbeing is priority. Leading to her having greater independence and confidence in her daily living in the future as she becomes an adult. The **care act 2014** also plays a role in promoting the wellbeing of children with disabilities. It encourages a person-centred approach where care fits in with the individual and their family. However, statutory provision has had a profound impact on the current practice on caring for adults with Down syndrome by creating a framework that supports Bens rights and needs. The **mental capacity act** plays a crucial role in guiding how decisions are made for individuals with down syndrome, particularly when Ben may need guidance in understanding and making choices. This promotes supported decision making, allowing adults like Ben have a voice in his care. Furthermore, the **Disability Discrimination Act** makes sure that Ben is protected from discrimination in various settings like employment and public places. This has promoted organizations to implement inclusive practices. The Care act 2014, the mental capacity act and the disability discrimination act all have a positive impact on Ben's life. These statutory provisions each play a pivotal role in bettering Ben's life as they all help protect his rights, ensure he has the appropriate care and support, and makes sure that he can participate fully in society. This means that with these put into place it enhances his life and quality of life. This is important for Ben's future as well as now as discrimination against him can be controlled meaning he can live as independent as he can in the future. Overall, statutory provisions have fostered a more inclusive and supportive environment for adults and children with disabilities.

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There are many positives and negatives to the impact of providing support for Rebecca in improving her well-being and life chances. Providing support for Rebecca (who has paraplegia) under the statutory provision of the **Children and families act 2014** can have a positive impact on her PIES, one of them including her **physical development**. This statutory provision ensures that children like Rebecca with a disability have access to tailored healthcare, education and social services. For example, they can provide specialist equipment or physiotherapy to aid mobility and independence for Rebecca, when possible, like in her home and at school. Another example is personalized care plans to manage her physical needs effectively. This has a positive impact on Rebecca's wellbeing and life chances as it can promote better physical health for Rebecca and can help to try and reduce complications, enhancing her ability to participate in daily life like other children her age. It also increases her independence as she's been cared for her whole life this makes it easier to transition into adulthood with confidence as she will be living by herself. Health and social care professionals also be significant support for Rebecca as professionals can provided tailored exercise therapy to help build her muscle strength and endurance which can again contribute to greater independence for Rebecca. Professionals can also provide physical therapy sessions and rehabilitation, healthcare professionals like a physiotherapist can help Rebecca develop techniques and how to use assistive devices that enhance her mobility allowing her to navigate her environment more easily. Under the **Children and Families act 2014**, providing support for a childlike Rebecca with paraplegia can significantly enhance their intellectual

development through specific education and learning opportunities, particularly via the **Education, Health and care (EHC)** plans. This ensures that Rebecca has access to the appropriate resources and support to fully engage in her education after being in hospital. For example, they ensure that adaptations to learning environments are made to make them physically accessible. One on one teaching support or trained specialist educators who can address Rebecca's specific needs. This will impact and improve Rebecca's wellbeing and life chances as it may boost academic achievement, access to education resources ensures that Rebecca can fully participate in learning, enabling her to achieve qualifications as she gets older in her GCSES and A levels as she will have the same progress as her peers. This might also improve her self-esteem as having good education, even though she's only 8, this will promote her confidence, motivation and sense of accomplishment, which positively impacts emotional wellbeing. A professional like an occupational therapist can positively impact Rebecca's **intellectual development** by advocating for Rebecca's rights to access an inclusive educational setting, where she can collaborate effectively alongside her peers which will give her a more positive impact. (NHS, 2024, GCP 2024 and Gloucestershire County council 2014).

Alternatively, there can also be negative impacts of the support that Rebecca is provided which aims to improve her health and wellbeing. A statutory provision that aims to provide support for children with disabilities is the **care act 2014**. However, it can have some unintended negative impacts on Rebecca's PIES development. It can negatively impact her **emotional development** as she gets older, and she fears this provision may be taken away when she turns 18. This may have a negative impact on her emotional development as she will fear constant distress and anger of not knowing how she will cope in her daily life without this provision in place. This can negatively impact her health and wellbeing as this may affect her feelings of motivation of doing good in the future as she will not be able to access/do things like others her age, this will cause a decline in her emotional health as she might have an increase of anxiety and depression. Another way in which her emotional development may negatively be impacted is that she may feel disempowered or overly dependent on careers and healthcare professional's leading to her being frustrated. While professionals aim to provide care and support, their support can sometimes negatively impact the emotional development of someone with paraplegia. One of these being a lack of personal connection. Some professionals may use a task orientated manner without building a relationship with Rebecca which can make her feel unseen or undervalued especially if she sees certain professionals often. This can affect her health and wellbeing as poor emotional bonds with the people who care for her can have a negative impact on her quality of life. In comparison, the **care act 2014** can also have a negative impact on Rebecca's **social development**. This is because if the care act unintentionally causes delays or gaps in care during her transition to adulthood this could limit opportunities for Rebecca to engage in social activities. This can affect her well-being and life chances as social isolation can lead to long-term difficulties in forming and maintaining relationships, which will be crucial in her teen and adult life.

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On the other hand, providing support under the statutory provision of the **personal health budget** will have a positive impact on Bens **PIES**. As Ben has Down syndrome and type 2 diabetes, this statutory provision may have a positive impact on his emotional development. The **personal health budget** is an amount of NHS money that is allocated to support a person's health and well-being needs. A personal health budget will allow Ben to manage his treatments, equipment and personal care in a way that suits him. This gives Ben more control over his decisions as he can contribute to what services that he wants/needs. This will have a positive impact on his **emotional development** as he will feel empowered, and it will increase his self-concept that he can do things himself rather than always relying on others. Health and social care professionals are also important to Ben as they can work together with Ben to create a person-centered care plan by considering specific equipment that may help with his diabetes. They are also important in having a positive impact on Bens emotional development as they can use this health budget to push Ben into accessing support or social groups which will boost his confidence majorly as he can make new friends outside of his supported living environment. This statutory provision may also have a positive impact on Bens **PIES especially his physical development** as the personal health budget can cover memberships for a gym or activity sessions like swimming, dance classes or yoga. This is important for his physical development as it encourages him to get out of his room and participate in regular physical activity. This ensures that if Ben decides he wants to take part in these activities the option is there for him as all costs are covered. This will positively impact his life chances and future as now he can have access to these activities. It may reduce any joint problems; he might have due to his down syndrome and obesity. This leads to better overall health and a longer healthier life. (NHS, 2024, England NHS, unavailable, Birmingham and Solihull NHS Unavailable and GCP 2024).

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However, there can also be negative impacts of the support that Ben is provided which aims to improve his PIES and his health and well-being. A statutory provision that aims to provide support for adults with disabilities is the **Care and Support statutory guidance issued under the care act 2014**. This statutory provision is the legal framework for adult social care. It places a duty on councils to support and promote the wellbeing and independence of working age disabled adults to give them more control of their care and support. This provision may have an unintended negative impact on Bens PIES one of these being his emotional development. This is because the generic approaches that may be followed under this provision might not fully consider the specific needs of Ben, for example the extra tailored support that he may need for his diabetes. This can lead to Ben feeling frustrated or misunderstood as he may feel like he is not being listened to by others, eventually making him feel worthless. Another way in which this may affect his emotional development is that there might be a limited social interaction opportunity under this provision. A care plan that doesn't prioritize access to activities for Ben can make him feel isolated and that he doesn't have any support

around him other than the people from the supported living environment. Health and social care professionals play a critical role in supporting adults with disabilities, however while trying to provide the best care they can it can have a negative impact on Bens **emotional development**. For example, a professional could focus too much on Bens physical or intellectual development/delays meaning they overlook the emotional affect that his disabilities have on him, and he might struggle to deal with these emotions by himself. By the professionals ignoring this it could lead Ben to feel abandoned with his feelings. In contrast, the provision can also negatively impact other areas of Ben's PIES like his **social development**. The **Statutory guidance issued under the care act 2014** doesn't always ensure that adults with down syndrome have access to employment opportunities, if Ben doesn't have some sort of hobby or Job where he can meet new people it can lead him to be socially isolated from the world around him. While the care act outlines a person-centered approach it doesn't always provide specific social groups that are designed to enhance social skills for adults with down syndrome. Without these types of interventions put into place Ben might struggle to develop friendships and relationships affecting his overall development. This can affect Ben's well-being and life chances in the future as it means he will struggle to form relationships, meaning that as he gets older and older he might lose the ability to start a friendship and maintain one with the people around him. (Wandsworth Gov, 2023, Down syndrome UK, 2023, Gov UK, 2024, NHS 2024, class notes 2024 and Aldworth 2016, Pearson 2016).

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In conclusion, the support has had a positive impact on Bens emotional and physical development as he may now feel empowered that he can do things himself/with less support as the statutory provision has allowed him to have any treatments or equipment that he may need which has meant that his day-to-day life is now easier. The support has also positively impacted Ben as physically he can take part in physical activity sessions or activities as they are paid for him to take part in if he wishes to. This is a positive on his well-being and on his life chances as he will now feel like things are easier to manage and, in the future, he can be more independent, overall leading to a better quality of life. However, it can't be ignored that the support has had some negative impacts on Bens social and emotional development. This is because the provision may also overlook the emotional side and focus on other areas leading him to have to handle his emotions on his own. It has also had a negative impact on his social development as they may not always consider any access to employment for adults with down syndrome which reduces another chance of him not being able to interact with others. On top of this, the improvements that have been made due to the support Rebecca has had a positive impact on her intellectual and physical development. This has a positive impact on her well-being and life chances as she is now building up muscle strength which will mean in the future, she will have improved physical health, meaning she will be able to have greater independence. This also has a positive impact on her wellbeing and life chances as she can now feel included in an educational setting meaning she can have the best opportunity to get the best education opportunities she can. There are also negatives that come with this, the support also

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has some negative impacts on Rebecca's social and emotional development because this support could be taken away from her as she turns 18 so she has the fear of what will happen next if that happens. This support also has a negative impact on her because her transition to adulthood could be affected due to this care meaning that socially it can lead to her making friendships in her teenage and adult life due to being away from her peers regularly.

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Assignment 2

Unit 12 Aim B and C

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