



Notre Dame
CATHOLIC SIXTH FORM COLLEGE

**Level 3 Alternative Academic
Qualification (AAQ)
Cambridge Advanced National
in Health & Social Care**

F090:

**Principles of Health and
Social Care**

**Topic Area 1 – Equality, Diversity
and Rights in Health and Social
Care Settings**

Student Name: _____

Teacher(s): _____

Dates	Lesson focus
Monday Sept 8th Fri day Sept 12th 2025	AAQ Health & Social Care course induction and introduction to F090 1.1 Diversity > people's differences such as age, culture, ability/disability, dress, ethnicity, family structure, foods, gender, gender reassignment, language, music, race, sexuality and financial and employment status. 1.2 Equality , meaning and purpose, positive and negative impact 1.3 Individual's rights , to choice, to privacy and to confidentiality eg. consent, to be consulted, to be treated equally and fairly, to be given protection from abuse and harm
Mon Sept 15th Fri Sept 19th	1.4 Discrimination and prejudices; definitions and how prejudgements lead to discriminatory actions and different types of direct and indirect discriminatory behaviour 1.5 Impact on physical, intellectual, emotional, social and financial (PIESF)



F090 Exam date:

This unit is about the foundation for working in health & social care, working with people who should receive quality, safe care.

The exam questions have a range of difficulties and challenges with in the F090 exam.

There will be exam questions where you will need to recall generic (*general, non-specific and not related to a case study situation*) knowledge and understanding. (Performance Outcome 1)

Some exam questions where you will need to demonstrate applied (*specific to a particular setting or situation*) knowledge and understanding. (Performance outcome 2). These questions are mid-range marks and a bit more challenging than PO1 Q's.

A few exam questions where you will need to demonstrate analysis and evaluative knowledge, a detailed understanding and performance in relation to a case study scenario. (Performance outcome 3). These questions are higher marks and a the most challenging than the other PO's.

There are different structures to the questions (e.g. Q1 (a), (b), (c) (i) (ii) etc...) including:

- o Short answer, closed response questions (with or without diagrams) and controlled response questions including MCQs – typically 1 to 4 marks.
- o Extended constructed response with points-based mark scheme – typically 1 to 4 marks, 1 mark per factor or feature to a stated maximum.

Unit F090: Principles of health and social care	
Topic Area 1: Equality, diversity, and rights in health and social care settings	
Teaching content	Breadth and Depth
1.1 Diversity	
Diversity: <ul style="list-style-type: none"> • Age • Cultural differences • Disability • Dress • Ethnicity • Education • Family structure • Food or special dietary requirements • Gender/gender reassignment • Language • Music • Race • Religion or belief • Sexuality and sexual orientation • Socioeconomic background 	You may be asked questions about the content left hand column and specifically: <ul style="list-style-type: none"> □ Examples of each aspect of diversity and how each one could be supported in health and social care settings
1.2 Equality	

<p>Equality means that individuals must all be:</p> <ul style="list-style-type: none"> • Given the same opportunities regardless of differences • Treated fairly and with respect • Treated according to their needs 	<p>You may be asked questions about the content left hand column and specifically:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Why equality is important <input type="checkbox"/> The positive impact of applying it and recognising its importance <input type="checkbox"/> The negative impact of not applying it and not recognising its importance <input type="checkbox"/> The link between equality and diversity <input type="checkbox"/> Application to different health and social care scenarios and settings, including responding to and providing examples
<p>1.3 Rights</p>	
<p>Each <i>individual's right</i> to:</p> <ul style="list-style-type: none"> • Choice • Confidentiality • Consultation • Equal and fair treatment • Protection from abuse and harm 	<p>You may be asked questions about the content left hand column and specifically:</p> <ul style="list-style-type: none"> <input type="checkbox"/> That individuals are entitled to have their rights met in health and social care settings <input type="checkbox"/> How practitioners provide care that supports individuals' rights <input type="checkbox"/> Application to different health and social care scenarios and settings, including responding to and providing examples <p><i>Does not include:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Knowledge of the Human Rights Act
<p>1.4 Discrimination in health and social care environments</p>	
<p>Prejudice can lead to discrimination on the basis of:</p> <ul style="list-style-type: none"> • Race • Age • Culture • Disability • Religion • Gender • Socio-economic background • Sexual orientation <p>Discriminatory behaviour:</p> <ul style="list-style-type: none"> • Abuse: <ul style="list-style-type: none"> ◦ Verbal ◦ Physical ◦ Mental/psychological ◦ Neglect ◦ Financial • Being patronising • Breach of health and safety 	<p>You may be asked questions about the content left hand column and specifically:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Know the definition of prejudice <input type="checkbox"/> Recognising the basis of discrimination <input type="checkbox"/> Examples of the different types of discrimination that might occur in health and social care settings <input type="checkbox"/> How types of discrimination can be direct and indirect or intentional and unintentional <input type="checkbox"/> Application to different health and social care scenarios and settings, including responding to and providing examples

<ul style="list-style-type: none"> • Bullying • Inadequate care • Labelling/stereotyping 	
1.5 Potential impacts on individuals of discrimination	
<ul style="list-style-type: none"> □ Impact of discrimination: <ul style="list-style-type: none"> • Disempowerment • Fear • Illness • Injury • Low self-confidence • Low self-esteem • Physical harm • Poor physical health • Poor mental health • Unfair treatment 	<p>You may be asked questions about the content left hand column and specifically:</p> <ul style="list-style-type: none"> □ Whether impacts on individuals are physical, intellectual, emotional, social and/or financial (PIESF) □ Application to different health and social care scenarios and settings, including responding to and providing examples

The Importance of Equality, Diversity and Rights

Health, social care and education services serve the whole of the population.

But does every member of the population get the same service?

1.1 Concepts: Diversity

- How are we all different?
- Discuss with your partner and make a list of the key differences between people.



TASK - Complete the table independently:

1. What are the different examples for each aspect of diversity?
2. Can you think of examples of how each can be supported within settings?
What have you seen in practice?
3. Use the textbook to add further detail.

Aspect of Diversity	Definition/Example	Possible Support
Age		
Cultural differences		
Disability		
Dress		
Ethnicity		
Education		
Family structure		
Food/dietary requirements		

Gender/gender reassignment		
Language		
Music		
Race		
Religion or belief		
Sexuality and sexual orientation		
Socioeconomic background		

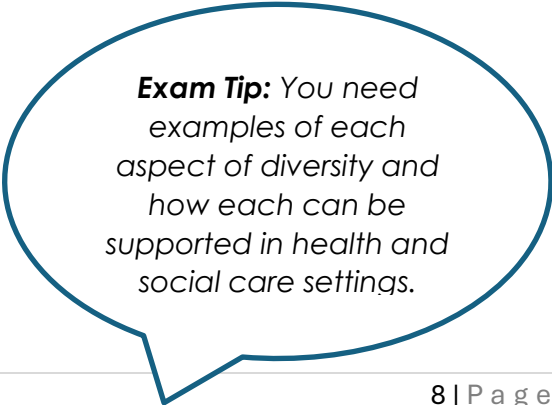
Breadth and Depth

To include:

Examples of each aspect of diversity and how each one could be supported in health and social care setting.

TASK - Complete the following questions:

1. Describe how religious beliefs can be supported in a hospital in order to respect the diversity of individuals.
2. Using an example, describe how a retirement home can ensure that disability is supported to respect diversity.
3. How can a mobile health screening unit ensure that all language needs are met?
4. Why do staff at a social services department need to be aware of socioeconomic background?



Exam Tip: You need examples of each aspect of diversity and how each can be supported in health and social care settings.

1.2 Concepts: Equality

A person is respected as an individual, treated fairly, given the same opportunities regardless of differences and treated according to needs.

Promoting equality means that individuals are not discriminated against due to their differences, such as gender, race, age or disability.

Individuals need to be treated fairly and with respect.

People should be treated according to their individual needs – NOT necessarily treated the same.

Equality does not mean treating everyone the same - people are different and have **different needs**.

In order to meet their needs, they need to be treated differently.

In health & social care settings that might mean someone is given more resources than someone else.

- Can you give **three examples** of individual needs which may mean a person needs resources/support in order to treat them equally in a setting?

❖

❖

❖

Breadth and Depth

To include:

Why equality is important.

The positive impact of applying it and recognising its importance.

The negative impact of not applying it and not recognising its importance.

The link between equality and diversity.

Application to different health and social care scenarios and settings, including responding to and providing examples.

TASK – Using the case study, consider the importance of recognising equality and diversity. Complete the questions that follow.

Resident Information:

Name: Evelyn Thompson

Age: 84

Gender: Female

Marital Status: Widowed

Previous Occupation: Retired Teacher

Length of Stay in Nursing Home: 2 years

Primary Diagnosis: Moderate-stage Alzheimer's Disease

Secondary Conditions: Type 2 Diabetes Mellitus

Mobility: Walks with a walker but requires supervision to prevent falls. Attends physical therapy twice weekly for joint stiffness and strength. Requires assistance with dressing, bathing, and toileting. Eats independently but requires supervision due to risk of forgetting to eat or leaving food untouched.

Cognitive Functioning:

- Memory impairment (short-term memory severely affected)
- Often forgets names of staff and family
- Occasionally wanders and becomes disoriented in the facility

Behavioural and Psychological Symptoms:

- Experiences anxiety in unfamiliar situations
- Occasionally shows signs of agitation, especially during personal care
- Responds positively to music therapy and reminiscence activities

Emotional Needs:

- Frequently asks about her deceased husband
- Expresses loneliness and confusion
- Benefits from consistent, familiar caregivers and routine

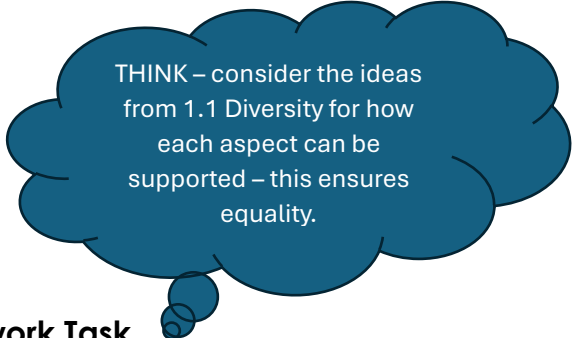
1. *What individual needs does Evelyn have?*

Benefits of Applying Equality in Settings

- ✓ A service user is more likely to be engaged in services such as screening programmes to help to prevent serious illness, e.g. cervical screening.
- ✓ They can communicate their needs more effectively, e.g. in a day centre a service user can engage in planning activities.
- ✓ A service user is more likely to ask questions/for support.
- ✓ They will feel respected and valued which enhances their mental health.

The link between equality and diversity:

In order to ensure equality, and to give everyone the same opportunities regardless of differences, you need to recognise and respect diversity. This means service users are treated fairly, with respect and they are also then treated according to their needs.



THINK – consider the ideas from 1.1 Diversity for how each aspect can be supported – this ensures equality.

TASK - Extension/Homework Task

Produce a guide on equality and diversity for a member of staff in a setting of your choice. Add in some examples of how diversity can be respected to ensure equality in that particular setting, e.g. in a hospice how can they recognise dietary requirements to ensure equality? What are the benefits of recognising equality and diversity?

Application of Knowledge – Equality and Diversity

Sarah is 19 and has suffered from depression for the past two years. She often goes to the pharmacy to collect her prescriptions as she is on medication for her condition. Sarah's GP has recently changed the type of medication she is on. When she went to collect the prescription, there was a new pharmacist working behind the counter and she was rude to Sarah, making assumptions about her understanding of the dosage and side effects due to her age.

- *How does the pharmacy need to improve their understanding and approach to recognising diversity and equality? What impact could this treatment have on Sarah?*



Paul is 78 and often attends a day centre. He has some mobility issues, is hard of hearing and struggles to read small print. One day all the visitors to the centre were taking part in a game of bingo. Paul found it difficult to see the numbers and as a result could not take part in the game.

- *How can the day centre improve their approach to recognising equality and diversity? How might Paul feel with the way he has been treated at the moment?*

Amayah is 30 and English is not her first language. When she attended the dental practice, she could not fully understand what the receptionist was asking her to do when she requested that she completed a medical form before her appointment. During the examination Amayah could not fully understand the terminology the dentist was using.

- *How can the dental practice improve how they meet the needs of individuals who do not have English as their first language?*

THINK – Consider the negative impacts of not respecting equality and diversity – lack of respect, a person's needs are not met, unfair treatment, feeling worthless, disempowerment.

1.3 Concepts: Rights

**I HAVE
RIGHTS.**

Each individual has a right to:

- ✓ Choice
- ✓ Confidentiality
- ✓ Consultation
- ✓ Equal and fair treatment
- ✓ Protection from abuse and harm

TASK – Discuss the 5 key rights – what might each one mean?

Now complete the table with examples of each one.

Also consider the key benefits of applying these rights in different types of settings – how can it support an individual?

Right:	Explanation:	Examples in practice:	Benefit to the individual:
Choice	This means enabling individuals to have a say in the decisions they make about their lives on a daily basis.		Gives individuals control over their lives.
Confidentiality	Information is shared only on a 'need to know basis' unless: there is a risk of harming others, harming themselves or of being hurt by others. Discussions should be in private. No gossiping. Secure password-protected data.		Dignity
Protection from harm and abuse	Staff should know health & safety procedures and policy. There should be a safeguarding policy and all staff should know the procedures for safeguarding.		Service users will have confidence in the professionals they work with
Equal and fair treatment	Everyone should be given the same opportunity to access services, but this doesn't always mean being given the same treatment (equality)		Increases access to services.

Consultation	Peoples who use services should have their opinions sought about the care they receive.		Increases empowerment of their own home and increases independence

TASK - The following website shows examples of how the right to choice is applied in the NHS.

- **What examples of choice are given on this site?**

[Your choices in the NHS – NHS](#)

Breadth and Depth

To include:

That individuals are entitled to have their rights met in health and social care settings.

How practitioners provide care that supports individual's rights.

Application to different health and social care scenarios and settings, including responding to and providing examples.

TASK:

1. How am I valued and respected? In pairs discuss ways that services you have accessed show respect for and values individuals. Can you think of an example of:
 - Equality
 - Diversity
 - Rights

2. What are some of the benefits of understanding equality, diversity and rights?

3. Read the case study about Robert. How are his rights being upheld? How is this benefitting him?



Robert is 22 and lives in a residential home for adults with severe epilepsy and learning disabilities. Robert lives and works as part of the community. It is his job to deliver the mail to the group homes on the complex with the help of his care worker Jess. When he has finished his job for the day, he has a programme of events he takes part in, including a music and drama class. This is a form of communication that helps him to explore his feelings.

Robert is also on the Resident's Committee that makes decisions about things like redecorating and the activities that are offered. Robert chooses to use his iPad and uses voice software to talk when he feels he does not want to. He also uses images to express his needs. Robert is currently studying for some vocational qualifications and basic numeracy and literacy.

How is residential community where Robert lives upholding his rights? What are the main benefits for him?

Key Benefits of Understanding Equality, Diversity and Rights

Positive impact if recognised/applied:	Negative impact if not recognised/applied:
<ul style="list-style-type: none"> ✓ <i>Empowerment</i> ✓ <i>Independence</i> ✓ <i>Inclusion</i> ✓ <i>Respect</i> ✓ <i>Dignity</i> ✓ <i>Opportunity</i> ✓ <i>Increased access and participation</i> 	<ul style="list-style-type: none"> ✗ <i>Disempowerment</i> ✗ <i>Lack of independence</i> ✗ <i>Feeling excluded</i> ✗ <i>Lack of respect</i> ✗ <i>Lack of dignity</i> ✗ <i>Lack of opportunities</i> ✗ <i>Decreased access to services/participation</i>

Exam Questions

1. Jackson House is a home for adults with learning disabilities. One day a new care assistant starts work there. On his first day he witnesses one of the residents being locked in his room and he is shocked to find that none of the resident are given any say in the activities they want to do and are left in the lounge with no entertainment.

- **Which rights are Jackson House failing to observe?" (2 marks) (PO2)**

1.

2.

2. Smithfield Care Home for adults with learning disabilities has just been praised by a Care Quality Commission (CQC) report for valuing diversity.

Which of the following are examples of how Smithfield has valued diversity? Put a tick next the answer (3 marks) (PO2)

- a. Welcome signs in a variety of languages
- b. Treating everyone the same
- c. Celebrating different festivals e.g., Chinese New Year, Christmas, Diwali, Hanukkah
- d. Ensuring all residents have the same food at mealtimes
- e. Always providing information in English
- f. Challenging staff/family and residents when they use racist language
- g. Not treating anyone differently

Quick Knowledge-Check Questions:

- *What is diversity?*
- *Name three aspects of diversity.*
- *What is equality?*
- *Identify four rights.*
- *Identify three benefits of recognising and applying equality, diversity and rights.*
- *Identify three negative impacts of not recognising equality, diversity and rights.*

1.4 Discrimination in Health and Social Care Environments

Task - Research the following key terms:

❖ Prejudice	
❖ Discrimination:	
❖ Abuse – verbal, physical, mental/psychological, neglects, financial	
❖ Being patronising	
❖ Breach of health and safety	
❖ Bullying	
❖ Inadequate care	
❖ Labelling/stereotyping	

TASK - Basis of Discrimination

Consider the different aspects of diversity from 1.1.

Can you give some examples of how some people may face prejudice and discrimination on the basis on these differences?

Discrimination is any activity that disadvantages someone compared to others.

Discriminatory practice is any activity that treats someone less favourably in a health or social care setting.

For example, excluding someone from an activity based on disability.

The basis for discrimination can be many things - e.g. race, culture, disability, social class, age, gender, sexual orientation, religion.

Discriminatory practices are based on characteristics that have been associated with a person because of the group they are perceived to belong to.

This is **stereotyping**:

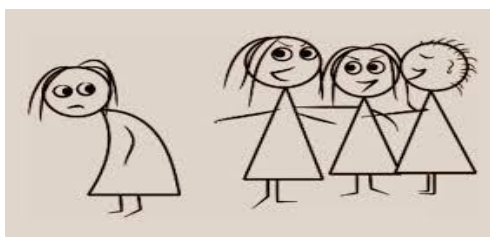
- making generalisation about a group of people.

Stereotyping is based on prejudice:

- negatively judging made about people before you know them.

In order to stereotype someone, we must first label them:

- identify someone as part of a group



Discriminatory Practices Key Definitions

Prejudice:

A negative attitude towards – or unfair dislike – **of an individual or group of people.**

Prejudice is often based on ill-informed opinion or inaccurate information.

Examples include racial prejudice or a negative attitude towards people due to their sexual orientation.

Stereotyping:

This involves making judgements about individuals or groups of people **based on prejudices.**

It means making unfair assumptions that people with certain characteristics are the same.

For example, girls are better behaved than boys.

Labelling

This means to identify people negatively. It refers to attaching a label or categorizing someone, often with negative consequences.

For example, someone might be labelled as 'lazy' in the workplace and then be judged negatively, even when they are working hard.

Also, people may prefer not to be labelled with certain terms, e.g. 'deaf' – a person may prefer 'hearing impaired'.

Bullying

This is a **range of negative behaviours that can intimidate or harm individuals.**

It can involve humiliating, insulting or harassing someone by constantly criticising them, making inappropriate comments or repeating offensive jokes or nicknames.

Bullying may be carried out by a person who is in a position of power, e.g. manager, supervisor or carer.

It may involve bullying another care worker or bullying service users.

Patronising:

Speaking or behaving towards someone as if they are stupid or not important; this can be direct, intentional or unintentional discrimination, e.g. speaking loudly and slowly to an older service user.

Examples of Discriminatory Behaviour:

- *No adaptations to improve access – steps/stairs, no lift, narrow doorway, no wheelchair access, no disabled parking / toilet /transport*

- Information not provided in different formats, e.g., braille, large print, BSL, Makaton/no hearing loop provided staff not trained for manual handling
- Staff attitudes – patronising, seen as worthless, a nuisance, too much trouble to accommodate needs / not provided with care because they cannot speak/communicate/move / told they can't take part due to physical disability
- Discrimination can be both **direct and indirect, intentional and unintentional.**

Breach of Health and Safety

- Any act which breaks health and safety rules, e.g. not making sure a floor is clear and a service user with impaired vision then falls and injures themselves.
- Other examples include not using good food hygiene procedures in a nursing home and causing an outbreak of food poisoning.

Inadequate Care

- Any act – or failure to act – that causes harm to a service user, e.g. an optician carrying out a sight test with a person with a learning disability not providing them with symbols or pictures instead of letter.
- Other examples include not giving medication on time, a drink being left out of reach and a person cannot access it due to mobility issues.

Types of Abuse

This is when someone is treated with cruelty or violently, often repeatedly. Abuse happens when people are not seen as individuals, they are discriminated against – they can be labelled, stereotyped and treated poorly. People who use services are often vulnerable and require someone else to carry out everyday tasks for them. If abuse is occurring, they service user can feel disempowered because they don't have control over what is happening. They may also not realise it is happening and if they do, feel reluctant to report it as they are reliant on the care service.

Abuse can include:

- **Financial abuse** – where a care worker or informal carer takes money or property without permission or encourages someone to give them money.
- **Verbal** – when offensive or derogatory language is used. Can be accompanied with intimidating body language.
- **Physical** – physical injury or harm is caused through not carrying out procedures correctly (moving and handling) or hitting someone.
- **Mental/psychological** – name calling, taunting, withholding attentions or belittling a person.
- **Neglect** – when a carer fails to care for someone properly/ Their basic needs for warmth, food, clean clothing are not met.



Breadth and Depth

To include:

Know the definition of prejudice.

Recognise the basis of discrimination.

Examples of different types of discrimination that might occur in health and social care settings.

How types of discrimination can be direct and indirect or intentional and unintentional.

Application to different health and social care scenarios and settings, including responding to and providing examples.

Types of Discrimination in Health and Social Care Settings

TYPE	DEFINITION	EXAMPLE
Direct		
Indirect		
Intentional		
Unintentional		

Case Study - Direct and Indirect Discrimination:

St Joseph's Primary School is planning a trip to the Lake District. The children are excited. They are looking forward to canoeing, abseiling, and den-building. The trip is designed to take the children out into the countryside, an experience a lot of them will not have had. St Joseph's is located in a deprived inner-city area. However, one of the teachers realises that the trip has been scheduled during Eid, a

Muslim holy festival and some children withdraw from the trip saying they would rather not go because they want to spend the time with their families.



Is this discrimination? Could it be direct or indirect?

Re-cap:

- **Prejudice** – Preconceived, unfair or unreasonable opinion that is usually formed when a person does not have enough knowledge or awareness.
- Can lead to **discrimination** due to religion, culture, race, disability, age, socioeconomic background, gender, sexual orientation.

TASK: Discriminatory Behaviour – What type is taking place?

Choose from the following:

Breach of health and safety	Being patronising	Physical Abuse	Neglect
Financial abuse	Inadequate care	Verbal abuse	Bullying
Labelling	Stereotyping	Mental abuse	

1. During a new mother support group, a health visitor turns to a colleague and says, 'Oh no! It's Mrs. Smith next. It's such a pain because she uses crutches to walk and it always takes longer to see her!'.

Type:

2. In a residential care home for older people, a practitioner uses the same spoon to serve the meat dishes and the vegetarian option because they do not want the fuss of swapping spoons.

Type:

3. A community centre has brought in a policy that all activities should be put away on the shelves. The chess set has been tidied away and put on a high shelf. The service users who are wheelchair users cannot reach it.

Type:

4. A student on work placement at a food bank is overheard talking on the phone. They are saying that all the service users are scruffy, smelly and a waste of time.

Type:

5. A practitioner in a residential care home for people with dementia is in a hurry to finish work, so they do not miss the bus. They need to change the service user's soiled bedsheets. They roughly grab the service user to move their arms and legs, making them groan in pain and leaving red marks.

Type:

Exam Question

1. ***Prejudice and stereotyping are types of discrimination. Give the meaning of 'prejudice' and 'stereotyping'. (4 Marks) (PO1)***

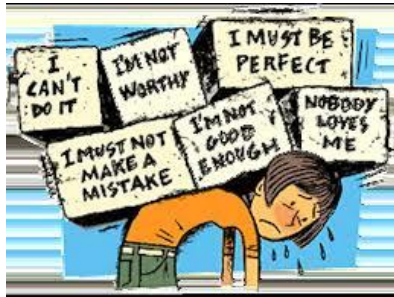
Prejudice:

Stereotyping:

1.5 Potential Impacts on Individuals of Discrimination

There are many different potential impacts on individuals of discrimination, and they can be assigned to the categories of physical, intellectual, emotional, social and/or financial (PIESF).

Individuals can experience these in different ways.



IMPACT	PIESF
Disempowerment	
Fear	
Illness	
Injury	
Low self-confidence	
Low self-esteem	
Physical harm	
Poor physical health	
Poor mental health	
Unfair treatment	

1. Give two examples of illness which could be a result of discriminatory behaviour.
2. Give two examples of mental health conditions which can develop as a result of discriminatory behaviour.
3. What physical harm can occur as a result of discriminatory behaviour?
4. Research a definition of the term 'disempowerment.'

5. Hamish is the subject of verbal abuse when he goes to a homeless shelter to stay. What might be the potential impact on him?

6. Samira is a service user staying in a nursing home for people with dementia. One of the practitioners shouts at her to 'Stop asking the same questions all the time!' How could this impact Samira's well-being?

TASK:

BBC Panorama's Winterbourne View

This is a documentary whereby an undercover reporter goes into a care home to investigate allegations of abuse which have been previously ignored and not investigated properly. It demonstrates different types of abuse taking place.

1. What is the basis for the abuse?

2. What stereotypes are being applied to the people in the care home?

3. What types of abuse are shown here?

4. What are some of the effects of the abuse on:
 - a. The individuals who require the care and support.

 - b. The families of those individuals.

 - c. The care workers.

 - d. The organisation.

Exam Questions

1. Read the following information about Ben and Jack then answer the questions. (PO2)

Ben is an adult with a learning disability. He lives independently in a flat, with support, from a carer, Jack, who visits once a day. Jack checks Ben is carrying out daily-living activities, for example having a shower, preparing and eating meals regularly, managing his bills and keeping his flat tidy. Jack is an inexperienced carer. He is very impatient and gets angry with Ben. Jack sometimes shouts at Ben and calls him stupid, if he has forgotten to have a meal or tidy up, because it means Jack has to help him.

(a) Name the type of discrimination that Ben is experiencing. **[1]**

(b) Give **one** example of how Jack is discriminating against Ben. **[1]**

(c) (i) Identify **two** possible effects of the discrimination on Ben's mental health. **[2]**

- 1.
- 2.

(ii) Identify **two** possible effects of the discrimination on Ben's physical health and well-being. **[2]**

- 1.
- 2.

2. Read the following information about Ben and Jack then answer the questions. (PO2)

Steve, 86, had a stroke. When released from hospital, he chose to return home as he did not want to live in residential care. A physiotherapist visits Steve at home once a week helping him to do exercises that will help with his mobility and improve the use of his right arm. Steve often feels upset because the physiotherapist handles him roughly, bruising him. The physiotherapist tells Steve that he is silly wanting to be on his own at home, and that he would be better off in a residential home.

(a) Describe **two** types of discriminatory practice that Steve is experiencing.

- 1.....
.....
.....
- 2.....

.....
.....
[4]

3. Read the following information about Tom and answer the question. (PO2)

Tom has a mild learning disability; he needs a bit longer than usual to learn new skills. He wants to be independent and get a job. His social worker has helped him to find a placement in a supermarket that could lead to a permanent job. Tom is enjoying his placement and has been working on the till serving customers and carrying out shelf-filling duties. However, his supervisor has complained that though customers like chatting with him, Tom sometimes gets confused having to deal with multiple tasks at the till – age checks, gift vouchers and giving change, and his shelf-filling is not always accurate. The supervisor tells the store manager he doesn't think Tom is skilled enough to do the job and he takes too long to do things. Tom's social worker arranges a meeting with the store manager to discuss the need for 'reasonable adjustments' to be made to accommodate Tom's learning disability and help him to do his job successfully.

a. Describe **four potential impacts** of this discriminatory behaviour on Tom. (4)

TASK: Produce a mind-map of the key impacts of discriminatory behaviour using PIESF – with examples for each, e.g. a service user can be impacted financially if they are unable to work due to poor mental health which is a result of the way they have been treated.

