

For Candidate Use

Please tick chosen brief

Brief 1 Produce a background report on an individual who will be using care services for the first time.

Brief 2 Produce an information booklet about a care service which includes information about one individual using the service.

Brief 3 Produce a report about a social issue and the way it influences an individual using care services.

For SQA Use Only

Section	Marks Available
Action Plan	10 marks
Responding to the brief	70 marks
Evaluation	20 marks
Total	100 marks

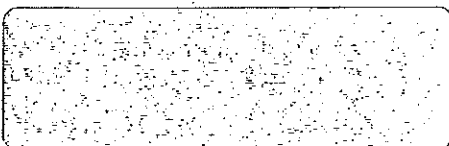
Care National 5 – Project
2014

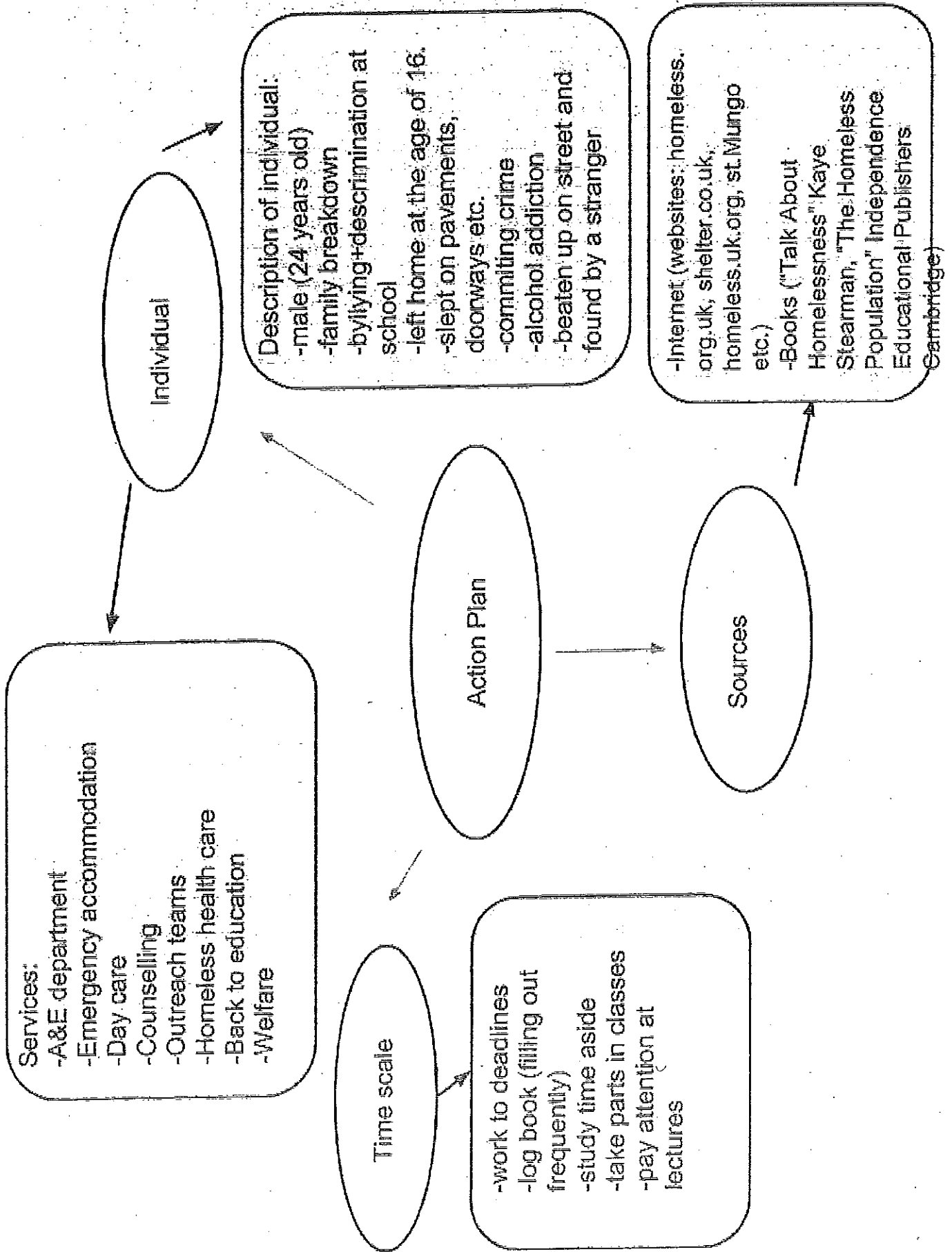
Name: _____

Brief: _____

	Total
Section 1: Action Plan	
1(a) Describe the individual you have chosen to investigate and explain why they are a suitable choice for your project	5
1(b) Develop a plan, detailing tasks and timescales, for all three stages of the project	2
1(c) Explain why three different types of sources of information will be appropriate for researching your chosen individual	3
Section 2: Responding to the brief	
2(a) Describe four needs of the chosen individual and explain why they are required to be addressed	12
2(b) Describe features from two psychological theories and use them to explain aspects of the development and behaviour of the chosen individual	12
2(c) Describe three sociological concepts and use them to explain the impact of social influences on the chosen individual	12
2(d) Describe features of the positive care environment in three care services and explain how they could meet the needs of the chosen individual	12
2(e) Describe features of two psychological theories and use them to explain how a care worker in any of the services mentioned in 2(d) could demonstrate positive care practice with the chosen individual. The features described must be different from those used in 2(b)	12
2(f) Reference three different types of sources of information used during the investigation	6
2(g) Present findings appropriately within the format required by the brief	4
Section 3: Evaluation	
3(a) Evaluate what worked well and/or what did not work well when carrying out the project, referring to your plan and/or log	10
3(b) Referring to your plan and/or log, describe what you would do differently when carrying out another project in the future and explain how this would improve the future project	6
3(c) Explain how you might use the knowledge and understanding related to Care that you have gained from this project, in one or more contexts	4
FINAL TOTAL	100

NATIONAL 5 CARE PROJECT





The project will look at overall background of the report on an individual who will be using care services for the first time.

Section 1: Action plan

1a) Description of the individual

The individual I chose for my investigation is a homeless, 24 year old male. He decided to run away from home after living with mother struggling with mental health illnesses and abusive alcoholic father, who left when he was a child.

At the age of 16, service user decided to leave home, to run away from these problems.

Family problems led to struggles with studying and school. He experienced bullying and discrimination at school as a result of family breakdown and poor circumstances he was living in. After leaving home, he decided to drop from education.

At the beginning of his homelessness, service user was depending on friends to have a place to stay. He used to work occasionally for neighbors to earn money, but the pension was very small. As a result, service user ended up on street, because the money earned didn't cover enough of the bills. He was sleeping on pavements, in doorways, railways and bus stations. During this time, he was meeting other homeless people, mostly youth, and to fit into their community and gain money - joined a gang and began to commit various minor crimes such as stealing and robbery to survive on the streets. The influence of these people, led him to reach for alcohol and sometimes even drugs. As the time was passing by, alcohol became a major part of his day. Service user believed that there was no other way of living, and as it was really hard to cope, alcohol was the only thing that kept him distant from reality. The lack of alcohol and other addictive substances made him feeling depressed and violent.

Everything changed after he was beaten up on street and noticed by a stranger who called the ambulance. Eventually, service user ended up in hospital with serious injuries.

There are several services providing help that might be used by this individual in his situation, such as:

A&E Department (Hospital) is one of departments of National Health Service. NHS represents one of Care Services from Statutory Sector (which was established by law), I've learned these information while studying Values & Principles Unit. Care provided by NHS is available to people for free. A&E department is open 24/7, 365 days a year. (NHS choices – 20.01.14)

Emergency accommodations, these are hostels, homeless shelters, B&Bs , night shelters, night stops, crashpad schemes, church or winter shelters. These are provided for homeless

people to avoid sleeping rough. Emergency accommodation could be given by a local authority through housing department as well as a third sector – voluntary, which is non-profit. These can be small local support groups or large international organisations. For example Shelter Scotland. I've learned this while studying "Values & Principles" unit. Some emergency accommodations are given for free and some for a contribution. (St Mungo's, Shelter Scotland -20.01.14)

Homeless health care - is aiming to improve access to healthcare for homeless people, and to support and develop the NHS's capacity to respond effectively to the healthcare needs of homeless people. It is also aiming to provide homeless people with all the healthcare they need to enable them to achieve their potential in our society. They provide physical and mental health support.

(Homeless Health Care-20.01.14)

Day Centre - a community service that provides a wide range of support for people living within the community. Their main aim is to provide services to help with retain and regain independence.

(Find Me Good Care-20.01.14)

Outreach teams - are groups of volunteers who comb the streets looking for homeless people who need help; aiming to help people into accommodation as fast as possible.

(St Mungo's -20.01.14)

Counselling - is helping people to help themselves by exploring with the person the options available for improving their circumstances. Counselling is a form of emotional support and there are different counselling projects aimed at clients with different needs. They advise and inform people on their welfare rights, housing and homelessness, debt, employment, courses and training.

(Homeless UK -20.01.14)

Welfare reform - Since homeless people are often unemployed, unable to work because of their illnesses or disabilities, they may need to get benefits. They may also depend on housing benefits or housing allowance to stay in their rented accommodation. Welfare reform is aiming to ensure that homeless people are not forgotten by the rest of the society.
(Homeless UK -20.01.14)

Back to education – There are various services that are aiming to help homeless people to get back to education (for example Jobcentre) to improve homeless clients' employability levels and to improve the success of this move faster. These types of services are providing training, volunteering, work placements and jobs to help homeless people reach their goals.

(St Mungo's -20.01.14)

The reason why the individual is suitable for the project

There are various reasons I chose this individual for my investigation. Although the individual I have chosen has a large range of life experience, he never used the care service and he's about to use it for the first time. The fact that he has been having many life difficulties, he fits for the purpose of my project and covers the knowledge from all three units. By assessing my individual's needs (SPEC) and presenting description of features of positive care environment in care service and explanation how could they help meet this individual's needs I want to demonstrate my knowledge and understanding of "Values & Principles" unit.

By illustrating a description of social concepts and impact of social influences on my individual, I want to show my knowledge and understanding of Social Influences.

By presenting a description of sociological concept and impact of sociological influences of my individual I am aiming to show my knowledge and understanding of human development and behavior and psychological theories, and the aspects of the development and behavior affecting my individual.

In addition, I would also like to illustrate the features of psychological theories and explanation of how a care worker could show a positive care practice to my individual.

During the project I would like to present following skills:

Through analytical/research skills I would like to demonstrate my ability to assess a situation, seek multiple perspectives, gather more information if necessary, and identify key issues that need to be addressed.

By planning and organising skills, my goal is to deal with my ability to design a plan and implement project within an allowed timeframe.

Following instruction, gathering information and extracting information from the project guidance and lecturer suggestions.

Since this project is a challenge to me, and it requires a lot of work to be done in a short period of time, I would like to develop my time management abilities, flexibility and working well under pressure.

1b) Plan, detailing tasks, and timescales

This is an 8 weeks project, divided into three sections, each section having its submission dates.

Section 1 - Action plan submission (24/01/2014)

Section 2 - Responding to the brief (14/02/2014)

Section 3 - Evaluation (14/03/2014)

Since there are different submission dates for each section, I will have to keep working to the each deadline. I will also have to work frequently twice a week at updating my log book, which is going to help me with my closed book assessment at the evaluation stage. I am going to spend my free time to study for my project. I am also planning to take part in classes every Friday and pay attention at lectures.

1c) Three different types of sources of information appropriate for the chosen individual

Source 1: Professional journals

This is the most specific source of information, that I am planning to use for my project. It is good as it is kept up to date and written by professionals for people interested in the subject. It is also important that this source is reliable and easy to understand.

Professional journals which I am going to use: The Homeless Population, editor Lisa Firth, 2010

Source 2: Books

This type of source is real and most of the information come from realistic studies. It is a good type of source to use for a research of background facts and introducing information on the topic of homelessness. In addition, it is a permanent and invariable source of information.

Books that I am aiming to use: Talk About Homelessness, Kaye Stearman, 2008

Source 3: Internet

I decided to use this source because internet is freely available and operates 24/7. It is also easy to use and can be accessed from home, coffee houses and mobile phones.

www.mungos.org

www.homelessuk.org

www.homelesshealthcare.org.uk

www.nhs.uk

To do list:

My next step is going to be assessing my individual's needs. To do this, I'm going to research as well as refresh my knowledge on the Values and Principles field.

Also I'm going to research psychological theories and apply them to my individual.

Health and Social Care
National 5
Care Project

Project Checklist

Student Name:

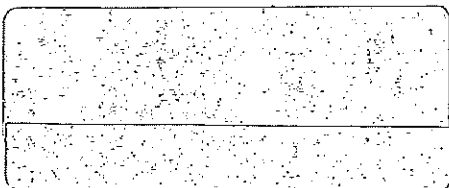
Care Project: Action Plan	Comments: COMPLETED
<ul style="list-style-type: none"> Have you chosen an individual to focus your project on? 	YES
<ul style="list-style-type: none"> Can you explain why they will be suitable choice for your project? 	PARTLY YES.
<ul style="list-style-type: none"> What is your chosen brief: 	Background report on an individual using care services for the first time
<ul style="list-style-type: none"> Have you commenced your log book, detailing timescales, tasks, etc.? 	YES
<ul style="list-style-type: none"> Have you identified at least 3 sources of information: Can you explain why these would be relevant for researching your specific individual? 	<ul style="list-style-type: none"> INTERNET BOOK PROFESSIONAL JOURNALS YES
Care Project: Responding to the Brief	Comments: COMPLETED
<ul style="list-style-type: none"> Have you described 4 needs of your chosen individual? 	NO YES - physical - emotional - cognitive - social
<ul style="list-style-type: none"> Have you described the features of 2 psychological theories? Can you use them to explain aspects of the development and behaviour of the chosen individual? 	YES - psychodynamic - behaviorist.
<ul style="list-style-type: none"> Have you described 3 sociological concepts and use them to explain the impact of social influences on the chosen individual? 	YES - education - lack of opportunities / choices - prejudice - marginalisation - peers - discrimination
<ul style="list-style-type: none"> Can you describe features of the positive care environment in three care services and explain how they could meet the needs of the chosen individual? 	YES - Statutory - A&E - Private - Aspire - Hous. - Voluntary - Shelter.
<ul style="list-style-type: none"> Have you described features of two psychological theories and used them to explain how a care worker in any of the services mentioned in 2(d) could demonstrate positive care practice with the chosen individual? 	partly YES - Humanistic - Attachment

Health and Social Care
National 5
Care Project

<ul style="list-style-type: none"> The features described must be different from those used in 2(b) 	yes
<ul style="list-style-type: none"> Have you referenced 3 different types of sources of information used during the investigation? 	partly. yes
<ul style="list-style-type: none"> Have you presented your findings appropriately within the format required by the brief? 	yes
Care Project: Evaluation	Comments:
<ul style="list-style-type: none"> Can you evaluate what worked well and/or what did not work well when carrying out the project, referring to your plan and/or log? 	yes
<ul style="list-style-type: none"> Can you refer to your plan and/or log, and describe what you would do differently when carrying out another project in the future and explain how this would improve the future project? 	yes
<ul style="list-style-type: none"> Would you be able to explain how you might use the knowledge and understanding related to Care that you have gained from this project, in one or more contexts? 	yes

Additional Comments:

RESPONDING TO THE BRIEF



Word Count: 7399

FINDINGS

Produce a background report on an individual who will be using care services for the first time.

The background report will focus on many examples such as description of needs of a chosen individual, description of features of two psychological theories and explanation of aspects of the development and behaviour of the individual, description of three sociological concepts and how to use them to explain the impact of social influences on my individual, features of positive care environment in three care services and the explanation of how they could meet the needs of my individual, description of features of two psychological theories and the explanation of how a care worker can use those theories to demonstrate positive care practice with my individual.

2a) Description of four needs of my chosen individual

Assessment is the first step in the care planning process and it involves examining needs, wants and opportunities of a service user.

Needs are those things that are essential for keeping life and well-being. We all have the same basic needs, however an individual's needs can change depending on circumstances.

Five basic types of individual's needs include: social, physical, emotional, cultural and cognitive. In my report I will be looking at four types of needs for my individual, using the SPECC Method based on Maslow-Hierarchy of needs.

Physical needs

Physical (physiological) needs are the physical requirements for human survival. These needs include for example: need of fresh air, food, water, warmth, shelter, hygiene, sleep and exercise. These basic, essential needs are necessary not only to preserve human life but also to promote wellbeing. It is important to meet basic needs first to be able to concentrate on other needs.

According to the fact that the individual I have chosen has been leaving on the street might cause many difficulties to meet his physical needs. No place to stay can have an impact on his for example safety needs, warmth needs, food, drink and hygiene needs and thereby an impact on his health and wellbeing. By sleeping on wet and cold places he might develop colds and become infected by lice and bitten by rats. This fact might affect his immune system and hygiene. It is more likely he might suffer from chronic chest and breathing problems. In addition to this by the fact, he has not been given diagnosis and treatment can mean some conditions are left to worsen. (Homeless Link-2009-2013)

One of the main physical needs is the need for a well-balanced diet. Most 'rough sleepers' do not eat regularly and healthily. I can assume that my individual struggled with not only the fact of not having three meals a day or recommended '5 a day' but with any diet. It is more likely he has been eating leftovers from café tables and rubbish bins.

Furthermore, our dependency on food might have an effect on the fact that he must fight for available supplies and put himself in danger. That might be as well one of the reasons why he committed crimes to find a way to get something to eat (Kaye Stearman - 2008)

Being on the street means people are not being free from danger, violence and abuse. Moving from place to place and constant fight for it might cause my individual lack of sleep, confidence and low self-esteem.

Emotional needs

Emotional needs are required to be met in order to facilitate good mental health as well as to be able to develop the ability to express feelings and to have those feelings recognised.

Emotional needs include: the need to love and to be loved, the need to belong and have a sense of purpose in life, the need to have a positive self-image and the need for autonomy which is a need for some personal, private space and control. (Ask Jeeves-2014)

As any other person my individual needs love, security and confidence to be able to express his feelings and have them recognised. Unsatisfied emotional needs can lead to feeling of isolation, stress, frustration and mental illnesses such a depression. The fact that he has been on the streets, can cause a fear of being attacked and not feeling safe. Insecurity and stress can have negative emotions on him, such as sadness and anxiousness which can lead to delusion, paranoia, violence, silence, mental trauma, personality disorder or even suicide.

Furthermore, he needs some assistance in the form of talking to someone who could carefully listen to him and feel the comfort of being treated with dignity (the state or quality of being worthy of honour or respect. I learnt about dignity while study Values and Principle unit), for example, not 'label' him, not calling him 'smelly' or 'creepy', but ask how would like to be called.

Social Needs

A society is made up from people who are sharing norms (accepted way of doing things) and values (something what is considered as having worth) and we all learn how we are expected to behave by learning the norms and values through socialisation process (the process of learning to participate as a member of a society. I learned it through Social Influences unit).

To socialise is to take a part with social interactions where two or more people communicate with each other. Through the social interactions we develop our self-esteem (the way how we feel about ourselves) and a sense of acceptance and belonging.

Social needs are the requirements that each of us have as individuals to help build up, maintain and break up relationships with others.

My individual has a need of a communicating and interacting with others, which could help him build up healthy relationship and develop his social identity and a sense of belonging.

In order to his difficult past and present experiences he might feel anxious, discouraged or untrusted with new people and that might lead him to the stage when he might feel isolated and have low self-esteem. He might need a support from others, for example social workers, which could

help him to learn, the ability to communicate and form relationships as well as to encourage him to take part in social events which could help him to have a good contact with others and promote his social wellbeing.

Cognitive needs

Cognitive refers to thinking skills and those things that help people to develop and maintain an active mind and to find out the knowledge about the world we live in, explore our environment and to make discoveries.

Cognitive abilities include: the use of memory, problem solving, thinking, understanding, communicating, making choices and decisions. To develop those abilities we must have opportunities for learning, to be able to share our ideas and be motivated by new opportunities and experiences. It is important to constantly stimulate our mind to keep them going.

By referring to cognitive needs of my individual, I mean that, there is a need of stimulation this individual's mind to make a progression in his life. My individual was struggling with studying and schooling from his early years as a result of his personal circumstances. Moreover, he finished his education on a basic level. The lack of education might have an effect on the way he sees the world and how he is dealing with his problems by thinking, understanding, making choices and decisions. Lack of those abilities may lead to the difficulty with his development and as a result his mental abilities may deteriorate.

By using some of the opportunities offered by social services, for instance, Homelessness Learning Clubs offered by St. Mungo's, he might get back to the education programs or get training. He also might improve his literacy and numeracy and learn how to deal with different issues and achieve goals. All the education programs and trainings offers, are surrounded with friendly atmosphere which might encourage my service user to reach his potential, and develop and maintain some interest and skills. (St Mungo's -2014)

2b) Description of features of two psychological theories and explanation of aspects of the development and behaviour of my individual.

Psychology is the scientific study of individuals which focuses on the individual's behaviour and the way their mind work. Human beings are very complicated and psychologists have developed different approaches and theories to explain and understand human development and behaviour theories which may help me to understand and explain my individual's development and behaviour. (Care in Practice for Highter-2012)

Theories which may help understand and explain my individual development and behaviour:

Psychodynamic: Eric Berne-Transactional Analysis Theory

Eric Berne (1910-1970) was a psychiatrist in the psychodynamic approach and agreed with basic psychodynamic ideas. He believed people are born with drives (state of psychological tension that typically arises from needs) and instincts (a behaviour that is generally programmed, thus the behaviour is not a result of learning). Furthermore, the behaviour of people is under the influence of early childhood experiences which influence us throughout the rest of our lives. He also believed that people were playing roles in their lives according to 'scripts'. By saying this, however, he didn't mean that people are acting fake, but what he really meant was that we are not always aware of the way we act and expand some ways of behaviour. Berne was interested in the way we interact with each other and used the word 'transactions' for these interactions. He thought that we develop mental images of ourselves and we look at ourselves as being 'OK' or 'NOT OK' and we act accordingly depending on this view.

This picture of world also includes the way how we see other people as being 'OK' or 'NOT OK' and when we add all this together, it can be seen that a person could be acting from one of four life positions:

Acting from 'I'm OK, you're OK' is best life position and it means that both people are content and feel that they had achieved what they wanted and that is the most successful interaction.

From I'm OK, you're not OK' perspective, one person is superior to the other and, perhaps, bullies or undermines the other one.

Acting from 'I'm not OK, you're OK' life position means that one person feels worthless to the other.

The final transaction is 'I'm not OK, you're not OK' where both people interact on their 'victim status' and both feel worthless.

Berne suggested that linked to the OK and NOT OK life positions which people adopted and the way how they behaved while interacting with others could be categorised into one of three roles: Parent, Adult and Child.

He called these roles 'Ego States'. People's personalities are divided into three ego states and depending on the situations and the person we are acting with, we play out one of these roles. 'The Child' ego state is the one where we are spontaneous and playful, but also prone to moods and tantrums. 'The Adult' ego state is the one where we are balanced, and where we can see our own and other people's strengths and weaknesses and can accept these. 'The Parent' ego state is either controlling and punitive or nurturing and caring. People act from different ego states in different situations while interacting. We also have a choice from which ego state we respond to people. However sometimes the transactions happen unconsciously and we are often reacting to the role-if someone is acting from 'Parent' ego state and criticizes you, you might be reacting from 'Child' ego state and become moody, angry or bursting into tears.

The explanation of how Transactional Analysis Theory applies to my individual.

Berne's theory shows that people are influenced by early childhood experiences. These experiences may affect the way we act and think in our adulthood, in the future. From the description of my individual I have learned that he faced many difficulties while he was growing up around addicted and abusive father, and mother with mental health problems. There is a possibility, that these experiences will have an impact on his behaviour, development and his wellbeing in his adult life. Because he was growing up in 'dysfunctional family', he might be struggling to trust himself and others. The fact that he grew up with parents who were emotionally unstable and their behaviour and reactions were often unpredictable and hard to trust, it can be difficult for him to trust people surrounding him in his adulthood. His childhood experiences can also affect his way of taking care of himself and people around him, causing difficulties, because nobody cared for him or showed him how to take a good care of himself, so he never had a chance to observe such thing and learn from people around him how to do it properly. His way of thinking can be different from the way that people who grew up in regular families think. His life experiences can lead to confusion and inability to function normally in the society as his image of the world can be much more negative than the way most of the society sees it. In addition he might be confused about his identity and have inability to deal with his life and its everyday challenges.

Berne also suggested that people are creating mental pictures of themselves as being 'OK' or 'NOT OK' and they are acting depending on how they see themselves to these perspectives. Since my individual had a hard life from his early years, he might not feel worthy and valuable in comparison to others. He can see himself as not important as other people. This can make him follow 'I'm not OK, you're OK' life position and identify with it, making himself feel less valuable as a human being and seeing everyone else as those who are worth more and are generally better than him. The reason for him feeling this way can be because he never heard anyone telling him that he is good at something or he is worth of being loved. The fact that he never experienced this type of comfort may cause him to find it difficult to accept it when somebody will offer it to him, and that lead to the fact my individual might act from 'Child Ego State' while interacting with other people. He might find it difficult to recognise and express his emotions and feelings. He might experience various negative emotions such as anger towards people who are surrounding him and blame them for his poor life filled with constant chaos and crisis. These emotions may cause him to become irresponsible and unaware of the amount of alcohol and drug intake, leading to addictions and health problems.

Behaviourist : Bandura-Social Learning Theory

Bandura was a psychologist who developed the ideas of the early behaviourists. Bandura theory says that we are born as 'blank slates' and as we are born we have no psychological drives, meaning we are not programmed to do anything or to be anyone, and we learn how to think, behave and act from people around us. We constantly learn throughout our life and we can unlearn and relearn new behaviour. The process of learning is called ABC process and each of these letters stand for different thing. A (Antecedent) is an impulse, an even or a trigger which leads to a certain B (Behaviour) which is our response to the trigger, this might be an action where we do or say something and which leads to C (Consequence) of our response. Depending on the result of the behaviour, it is likely or more likely to be repeated. Our behaviour is 'reinforced' when we feel, that we have been rewarded for the way we behave. Bandura believes that 'modelling' is gained through interactions with people, and we learn by observing and repeating 'models' behaviour by direct and conscious imitation as well as indirectly, this is when we pick something up, even though, we are not aware of it. And we do it only by being around other people. For example, when children learn a language just by spending time with people who speak it. Behaviour may be either rewarded or punished, and this helps us to learn how to act in ways which are appropriate and acceptable. Rewards teach the type of behaviours which is likely to bring about a pleasant

outcome. The two types of rewards are those which act as reinforcers of appropriate behaviours.

- Extrinsic (external) rewards that we receive that reinforce our behaviour, for example money, prize, and
- Intrinsic (internal) rewards which reinforce us internally and that can include feeling of pride, enjoyment or satisfaction.

Punishment can take many forms, including smacking, hitting, beating, stopping pocket money or grounding. Many social theories believe that punishment often produces hostility and resentment as well as fear and avoidance of the punisher. Furthermore, punishment teaches only what we should not do, not what we should or might do. It may also teach us that behaviour can be controlled by another person by virtue of their age, gender, strength or status and we can learn this model and use punishing strategies to control the behaviour of others in the future. In addition to that, according to social learning theories, it is important what we think about ourselves and our situation, that has an influence on our behaviour. We are more likely to achieve what we want when our self-efficacy (our belief about what we can do and how effective we will be) is high.

The explanation of how Social Learning Theory applies to my individual.

The social learning theory is based on the ABC model. Each letter stands for a different thing which is applying to my individual. First one is a trigger (Antecedent) - this is the fact that this individual is homeless, angry, tired, poor and without any prospective for a bright future, he is responding to this with certain behaviour such as stealing and committing other crimes, as well as becoming addicted to alcohol and drugs, which has the consequences such as having problems with low self-esteem, being addicted to alcohol and feeling depressed and violent.

When my individual became homeless he had to fit into a new environment of 'rough sleepers' and learn new rules and behaviours to let him survive on streets. He joined a gang which had a great influence on his actions and its members were 'models' for him. He was observing their behaviour and the way they were acting and started to learn and repeat what he saw. This is how he started to take part in rubbing and stealing. He probably picked up street language and customs just by being surrounded by people who used it.

Because of the fact that my individual had an abusive father, punishment was playing a huge part in his life at an early age. He could have been punished verbally, through the use of offensive words towards him, as well as physically, by smacking, hitting, beating. However, punishment is only teaching us what we should not do, but it does not teach what we should or might do. This shows that he never had opportunities to solve the things he had been

punished for / or understand why he was punished for what he had done. He only knew that these things were wrong. Punishment might cause many negative emotions on him including, resentment, shame, embarrassment for being who he is, also being quiet and finding it difficult to trust people. All of these aspects might have an effect on his self-efficiency.

2c) Description of three sociological concepts and how to use them to explain the impact of social influences on my individual.

Sociology is the scientific study which provides useful and sometimes unexpected insights into the way society works and allows us to look at familiar things with a different point of view.

It provides sociological concepts or ideas which might help us to understand things rather than just describe them.

Sociological concepts include, for instance, culture, norms and values; role and status; social inequality and life chances. Socialisation (the process by which people learn how to fit into a society; the behaviour patterns of the surrounding culture) (Ferlex-2003-2012) and all agents of socialisation including primary agent, family, and secondary agents, e.g. education, peers, mass media, are sociological concepts as well.

Life chances are the opportunities that people have in life, for example, education, employment, housing or finances. However, sometimes people have limited life chances depending on the circumstances in which they reside. Those people often experience inequality, disadvantage, isolation, lack of opportunities and choices, lack of self-worth, marginalisation, discrimination, stereotyping, prejudice etc. which has an impact on their lives.

Description and explanation of 'education' as a sociological concept and the impact of social influence on my individual as 'lack of opportunities and choices'.

Education is one of the agents of socialisation and a representing secondary socialisation.

Under the law (Education Act), it is essential for all people to be educated, meaning everyone should go to school to be socialised and prepared to be a part of the society, to develop appropriate skills, and learn how to behave at workplace in the future. According to statistics, 60% of homeless people have low or no qualifications. And 73% have no qualifications at all. (The Homeless Population-2010)

As a result of family breakdown and general poor circumstances my individual always struggled with studying and schooling and decided to leave school at age of 16.

He might have not been able to find a quiet space to study while living with parents who did not support him so the problem with schooling was growing.

As a result of it, he has low qualifications and lack the necessary skills for employment, what means he is going to have less opportunities and choices in his future in order to find a stable source of income to find and maintain any housing. (The Homeless Population-2010)

The fact that he does not have any job and is homeless further reduces his opportunities and choices. That is why he might wonder the streets in search of money and to gain some money, he might beg and steal, rob or commit other crimes. He might start sell drugs or get involved into sex trade work. (Stearman, K. - 2008)

Description and explanation of 'peer groups' as a sociological concept and the impact of social influences on my individual as 'discrimination'.

Peers are one of the agents of secondary socialisation and usually they are people who are within similar age group, class or education. They might be a group of people with the same status.

Peers play an important role during adolescence and have an extreme impact on people's behaviour and development.

Peers are converging to themselves, the way how they dress, talk and behave is similar or compete with each other. Peers are likely to discriminate people that are lacking what normally are the basics in life.

Discrimination occurs as a result of prejudice. Discrimination are the actions taken by people e.g. treated unfairly, who make up their opinions based on fear and/or lack of knowledge. There are three types of discrimination: direct, indirect and institutional discrimination. Discrimination is not allowed, especially in care setting, and should be reported and punishable. (Baker, G., Miller, Gibb, S., Lancaster, E., Miller, J. - 2012)

My individual was discriminated by other teenagers when he was at school, he was often bullied and excluded from the rest, as an effect of the judgment, based on his poor status, looks and behaviour.

Description and explanation of 'prejudice' as a sociological concept and the impact of social influences on my individual as 'marginalisation'.

Prejudice is an irrational (is not based on fact and evidence), usually negative attitude directed toward an individual or a group. (Crossman, A. -2014)

Prejudice might be hidden, when we are not aware of it and direct when we act by speaking and behaving in a certain way.

Common features of prejudice include: negative feelings, stereotyped beliefs, and a tendency to discriminate against. While specific definitions of prejudice given by social scientists often differ, most agree that it involves prejudgments (usually negative) about someone or something.

Prejudice can be based on factors including sex, race, age, sexual orientations, nationality, socio-economic status and religion. Some of the most well-known types of prejudice include: racism, sexism, classism, homophobia, nationalism, religious prejudice. (Cherry, K. -n.d.)

People have many negative prejudices towards homeless and basically view them as not having the competence for anything, not having good intentions and not being trustworthy. (Brown, R. -2013)

Studying my individual, I found he faced prejudice from the very beginning while he was at school and the discrimination he experienced was the result of the peers prejudice.

While he is homeless he might experience prejudice more than ever. Lack of home, poor diet and lack of hygiene probably caused a negative effect on his health and appearance. People might respond to him as 'dirty' and 'smelly' person. They might judge him as a dangerous with mental health problems person or alcohol or drug addict and never think that he might have a unique life history and we should not classify every homeless the same.

People often might think that he must be lazy and should get a job rather than beg for money, not for food, but for alcohol and drugs or while he was shopping, staff was watching him because they are being prejudiced that he is a shoplifter. (Stearman, K.-2008) (Guardian News and Media Limited-2014)

All those and similar attitudes lead to marginalisation (the social process of becoming or being made marginal-exclude from a society; when an individual or a group is systematically blocked from rights, opportunities and resources and classified as the underclass. (Dictionary.com-2014)

People often marginalised homelessness and my individual might be marginalised and slowly excluded from society because he does not look and behave like a 'normal' person so he is considered as a stranger, intruder and unwanted in society.

2d) Features of positive care environment in three care services and the explanation of how they could meet the needs of my individual.

To promote positive care environment in care sector is to take the issues such as providing assessment, planning and implementation into the person's care process to optimise their quality of life.

Word 'environment' might sound impersonal, but it refers to the surrounding and conditions in which person lives and conducts their life or part of it, wherever the location of their home is.

To promote positive care environment is to make sure that the service user is firmly placed at the centre and care workers working hard to make differences to many environments affecting the service user.

Working hard as a care worker means:

Working with service users by communicating with them to build up a positive relationship between the care user and the place where the care take place, for example, using appropriate language and right pace and tone, non-verbal communication like a smile, opening body posture, good distance between a service user and a care worker, listening skills to show genuine interest and sympathy.

Making sure that all staff is working together including the organisational way (the quality of staff training, attendance at conferences, development that provide ways in which people can improve their practice and learn to meet changing demands, supporting staff through difficulties and supervision all the work that help maintain quality and is included in the National Care Standards.

Physical condition of the buildings where the care is granted. The location, the facilities in them, the way are maintained and decorated, the quality of food, clothing and comforts to promote healthy wellbeing.

Have a contact with service user close relatives and the community the user belongs to. (Care in Practice in Higher-2012)

There are three sectors offering help to people. Those are statutory, private and third sector (voluntary).

I have chosen one care service from each sector and explained how they can help to meet the needs of my individual.

Statutory means 'by law' and provides formal care. National Health Service, Social and Educational Provision are statutory and available to people because of the law. People who are working in this sector are employed and receive payment.

Some of the services are available to people for free, however, there are other services that people may have to pay for, these include home care, day centre services, dental treatment, eye tests and prescription charges.

My individual can use the support from statutory sector through the hospital. Since he did not have home, it is more likely to become injured or ill. NHS can provide him with the right treatment. This can be done through Accident and Emergency department which is open 24/7, 365 days a year. A&E nurse assess patients to ensure the most seriously ill patients are seen first. This assessment is called triage. Other patients may be directed to alternative services to receive appropriate treatment. To decide on the right treatment of a patient, doctor will ask various questions related to patient's problem. In addition they will observe the patient to provide the best treatment.(NHS choices-n.d.)

Another sector is private, these are all services that are independent. These include private housing or private health services. This type of service is run by entities other than the government. They are also more expensive than those provided by Statutory Sector, however, due to the fact that they profit more, they can be more productive. Examples of private sector service include Aspire housing which provides resettlement services to people who can't stay where they're living because they have no right to, the accommodation is too small and people can't stay with their family or people who are temporarily staying with their friends or family.

My individual could use Aspire Housing as his accommodation option. Using the service he has an occupancy agreement and is responsible for rent and council tax payment as well as for other regular household costs such as food, fuel etc. The aim of this service is to prepare him to develop confidence and skills that are essential to maintain his house in the future. Aspire Housing also provides accessing medical care, welfare information and legal advice, staff who will also accompany my individual to meetings and interview if required, finances and budgeting, personal care and social skills, and benefits.(Aspire-2014)

Third sector (voluntary) are the organisations that are non-profit. These can be small local support groups or large international agencies. Statistically there are approximately 350 00 different voluntary organisations in the UK and about 40% of these are registered as charities. Services from this sector can provide help to my homeless individual. An example of such service is Shelter Scotland which is the national campaigning charity helping homeless and badly housed people. Shelter is a charity which also can help my individual to prevent him from sleeping on the streets by providing an emergency accommodation, advice, information, for example about hostels, night shelters, benefits, and advocacy to

him. Shelter is often helping homeless through campaigns, which are aiming to bring aspects of bad housing, try to gain some attention from the media and the public.

In addition, Shelter provides information about where my individual might find places which are running hot soup kitchen, washing facilities and toiletries. (Shelter Scotland-2014)

All of these services providing help to people are established by the National Care Standard Principles which help promote a positive care environment. These principles include people's right to privacy, dignity, safety, realising potential and equality and diversity.

My individual has right to:

Dignity – my individual has the same right as any other, to be treated with respect at all times. His dignity is harmed when a care worker put into a humiliating situation, for example, when somebody calls him "smelly". A care worker in every sector should treat y individual with the same respect as he want for himself and find out what name he wants to be called and use it to call him. My service user should also have the right to enjoy a full range of social relationships and being recognised for sense of value and worth. Care workers should create a friendly atmosphere through polite and friendly conversation, to make him feels comfortable and let him talk about his needs or fears, so that he won't feel socially isolated or useless.

Privacy – Care workers should provide opportunities for my individual to have the privacy. Using those services my individual should be free from intrusion and has the right to keep other people away from knowing about his personal life. For example care workers should keep all the information about his health, must be kept safe and confidential and should never be given forward to anyone unless needed. He has the right to be in a separate room while being examined by doctor/nurse, and every aspect of their privacy should be respected at all times.

Choice - is his right to make his own choices and to know about the range of choices available for him, and also get help to understand options and decide on the best. For example, my individual currently living on the streets should be aware of the fact that there are various organisations offering help such as Shelter or St Mungo's to them and should always know about the choices he has. It is important to provide him with information (these can be leaflets) about his rights and options or offering any other help, such as where they can eat a warm meal, apply for benefits, or receive any other extra help.

Safety – he has the right to feel safe in all aspects of his life and being free from abuse and danger. For example he might get an emergency accommodation through Shelter organisation there here should be provided various types of safety controllers such as CCTV cameras or security guards, so that my individual will feel confident, comfortable and safe. The fact that emergency houses offer secure place to stay for people from one night to few weeks also adds to safety, as he might do not have to worry that next day he will have to sleep in the streets again.

Realising potential – it is his right to make the most of your life, having the opportunity to achieve all he can, and make full use of all available resources. For example once he might develop his skills at living independently while using care service. Aspire Housing offer help for homeless people at budgeting, maintaining a place to live and showing how to plan regular payments, to live and keep a place to live in the future. However he might develop their potential, through continuing education and gaining qualification to begin his career. Care workers should help him to keep motivation and ambitions. He should have the right to go to the rehab in order to his additions.

Equality and diversity – he has the right to be treated equally and free from bullying, harassment and discrimination as well as being able to report against discrimination without fear. And live an independent life, based on purpose, meaning and personal fulfillment. For example, he has right to be free from being discriminated for his looks, beliefs or culture as any other person, and should live without a fear of being bullied or treated differently. (The Scottish Government-2005)

The Regulation of Care (Scotland) Act 2001 was established to provide greater protection to people who use care services in Scotland. The act was introduced by Scottish Parliament and set up a new organisation called "The Scottish Commission for the Regulation of Care". The organisation is responsible for the registration and inspection of care services. This is done when commission visits care service to begin inspection which is carried out through comparing the performance of the care service to the set of general principles mentioned in the act. After the inspection, they will produce a report, to inform the care service what changes they should make if the care provided is not appropriate. The commission has the power to close the service down if the service fails to apply the changes they were ordered to make. (Care in Practice for Higher-2012)

The Role of Legislation in relation to my individual

This act is a very important aspect for my individual, as it outlines principles by which services used by my individual should be run. This service can be for example hospital. As a result of the act, hospitals are required to be run at a certain level. Hospital should take account of the my individual wishes and those of his nearest relative, career, guardian or attorney; and achieve the desired purpose without unduly limiting his freedom. It is vital that he is treated equally as any other patient visiting services such as hospitals and provided with equal care. He should also receive equal medical treatment, such as surgical treatment or administration of drugs or injections, and services such as nursing by professionally trained staff, this is observation, therapy, support and advice.

2e) Description of features of two psychological theories and the explanation of how a care worker can use those theories to demonstrate positive care practice with my individual.

Care practice is the part of a process which begins with working with someone by examining the person needs and wants. Needs are those things which are necessary for us and we have a right for them. Wants refer to the things we would like to have, wish for or dream about to make our life easier.

To demonstrate positive care practice a care worker take into account not only the things which are consider as needs but also wishes and dreams of service users. Is doing that by identifying them, making a plan how to meet them and then put the plan into action with constant monitoring and improvements.

In positive care practice it is essential that all options of a care plan are presented and discussed with a service user.

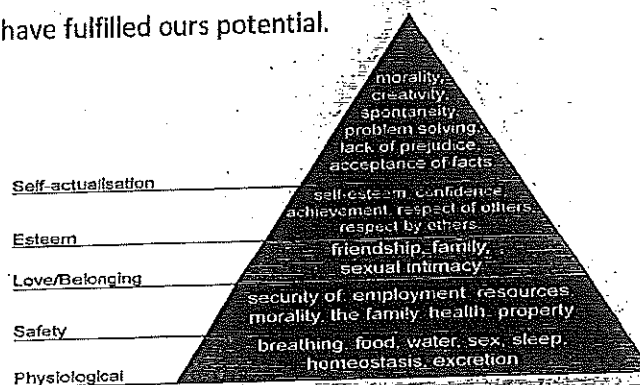
Theories which I have chosen to explain that how a care worker can use them to demonstrate positive care practice with my individual.

Humanistic: Maslow- Hierarchy of needs

Abraham Maslow agreed with humanistic approaches which say we all different and unique and we all 'experts' of our life's. Moreover, we constantly strive forward fulfilling needs to reach our potential to make full use of our talents and capabilities to become what we want to be.

He believed all people have the same basic needs, for example ,food, drink, shelter, warmth, sex and only when these basic needs are satisfied people can focus on the next level of needs.

He created a pyramid of needs to show the way of achieving self-actualisation – it is the stage when we have fulfilled ours potential.



Maslow's Hierarchy of Needs (Ideals UK blog-2011)

When in very bottom level of the Hierarchy of needs are physical needs, the basic needs which are necessary to survive.

Then, there are safety needs which refer to physical and psychological safety and that is the need of being free from fear, violence and abuse.

The third level of Maslow's Hierarchy of needs are the social (love/belonging) needs which apply to the need of belonging to a group, have relationships and be loved.

Next level of Maslow's Hierarchy of needs are esteem needs which concern the need to be valued by self and others.

And on the top of the pyramid is self-actualisation and it is happened when the potential been reached and fulfilled.

However people are facing circumstances which may cause not to progress towards self-actualisation, for instance, losing job, being in the middle of divorce or violence and abuse. Those difficulties act against individuals who are unable to move up to the hierarchy. (Baker, G., Miller, Gibb, S., Lancaster, E., Miller, J. -2012)

Maslow's hierarchy of needs might work as a 'tool' to develop an understanding and assessing my individual's needs and wants which lead to creation of a plan care for him which should be taken into action with continuous improvements.

Care worker can use the Maslow's Theory to demonstrate positive care practice with my chosen individual.

To assess my individual's needs doctor or nurse of Accident and Emergency department in hospital makes a description to summarise useful information about him, for example, his personal details, housing situation (where he has been leaving for a period of time), his physical and psychical health, his dependencies on alcohol and drugs etc. To obtain the information, they might need to do checklists, observe his behaviour and ask questions.

By taking Maslow's feature of 'uniqueness of individuals' (everyone is different) into account during the assessment of my individual's needs, it should help the staff from the hospital to deliver his 'holistic' assessment. This holistic assessment is focused on him as a whole person, on his entire well-being – physical, emotional, spiritual, mental, social, and environmental. The process culminates when the assessment results are used to inform a care plan. (National Cancer Survivorship Initiative-2012).

The care plan should be made and it should base on the diagnosis and holistic assessment of the individual. The care plan should be staged according to which needs are to be met in what time scale, for instance, there will be some needs to be met immediately, and others at some point in the future.

Since the care plan has been arranged my individual might be directed to alternative services to receive appropriate treatment, which helps him to reach self-actualisation.

John Bowlby: Attachment Theory

John Bowlby was a child psychiatrist interested in the relationship between mother and child, also known as bonding. He developed a significant amount of his work on the Attachment Theory. Bowlby believed that 'mother-love in infancy and in childhood is as important for mental health as are vitamins and proteins for physical health'. In his theory, he highlighted that the first five years of a child's life influence later development, as well as the relationship between mother and infant is very significant to child's development.

Bowlby found that there is secure and insecure attachment. Secure attachment is a solid bond between two people that lets them to interact with the rest of the world with confidence. The baby is also attached when shows distress after being separated from their main caregivers - the person who is definitely and reliably there for them (secure base).

Bowlby suggested that children who experienced maternal deprivation (this is when the child is separated from mother), could later have physical, social and intellectual struggles. This belief was later questioned in studies by Rutter. Insecure attachment, however is formed when the child has poor contact with the mother.

Rudi Schaffer and Peggy Emerson also carried out research on attachment. They proved that there was a possibility, that children are able to form multiple attachments. They also suggested that those relationships were formed with people who interacted with them in the most sensitive way. Schaffer and Emerson believed that quality of interaction is important to creating a strong relationship.

Another feature of attachment is separation - temporary loss of a person or object, and loss - permanent loss of a person or object. In everyday life we experience some features of attachment theory, these could be for example: when we put a child into nursery/school, when our loved ones die, or when we lose our phone/keys. Everyone responds differently to these situations, some people are in shock, when others are trying to stay organised to make sure they don't feel stressed and in pain, and other stay quiet and overthink. All of these feelings are accompanied by many stages (Baker, G., Miller, Gibb, S., Lancaster, E., Miller, J. -2012)

Care worker can use the Attachment Theory to demonstrate positive care practice with my chosen individual.

Aspire workers can use a knowledge of attachment theory to create a relationship where my individual feels safe and supported enough to try something new.

Accompanying my individual to meetings and interview, friendly controlling finances and budgeting, helping and supporting with personal care and social skills, and benefits can create a secure attachment between aspire worker and my individual. As a result of this, he can build up his confidence and that could allow him to go out into the world and reach his potential.

Shelter worker through providing hostels, night shelters, and other places to stay, which are safe and secure, the shelter voluntary worker can develop a secure base where, my individual can rely on the care worker and be sure that they are always there for him when he's in need.

Understanding of loss and separation can let the service workers to put themselves in a position of my individual and try to understand his situation.

By loss and separation they understand that this individual has no home to stay in and is separated from stabilization, security, routine etc. Suffering from loss and separation can cause my individual to feel isolated, quiet and finding it difficult to trust other people. By the knowledge of the Attachment Theory, service workers know that these are all natural effects of loss and separation and know what to do to make this individual more confident and open. Service workers know that they should help and how they should help my individual even though his responses may seem discouraging.

2f) References of three different types of sources of information used during the investigation.

Reference List

- Ask Jeeves. (2014). What Is an Emotional Need?. Available: <http://uk.ask.com/question/what-is-an-emotional-need>. [28 Jan 2014]
- Aspire . (2014). Many of Aspire's services provide support and development opportunities to individuals and families who are homeless.. Available: <http://www.aspireinc.co.uk/homelessness/>. [6 Feb 2014]
- Baker, G.,Miller,Gibb,S.,Lancaster, E.,Miller,J. (2012). Care in Practice for Higher. 6th ed. Paisley: Hodder Gibson
- Brown, R. (2013). Prejudice Against the Homeless. Available: <http://monarchhousing.org/2013/08/11/prejudice-against-the-homeless/>. [5 Feb 2014]
- Cherry, K. (n.d.). What Is Prejudice?. Available: <http://psychology.about.com/od/pindex/g/prejudice.htm>. [5 Feb 2014]
- Crossman, A. (n.d.). Prejudice. Available: http://sociology.about.com/od/P_Index/g/Prejudice.htm. [5 Feb 2014]
- Dictionary.com. (2014). Marginalisation. Available: <http://dictionary.reference.com/browse/marginalisation>. [5 Feb 2014]
- Ferlex. (2003-2012). Socialisation. Available: <http://www.thefreedictionary.com/socialisation>. [5 Feb 2014]
- Guardian News and Media Limited. (2014). Personal support for rough sleepers held back by prejudice of staff. Available: <http://www.theguardian.com/housing-network/2012/may/21/rough-sleepers-personal-support-prejudiced-by-staff>. [5 Feb 2014]
- Homeless Link. (2009-2013). Physical Health. Available: http://homeless.org.uk/node/402#.Uukhu_vDPFw. [28 Jan 2014]
- National Cancer Survivorship Initiative. (2012). Assessment & Care Planning Definitions. Available: <http://www.ncsi.org.uk/what-we-are-doing/assessment-care-planning/assessment-care-planning-definitions/>. [17 Feb 2014]
- NHS Choices. (n.d.). Emergency and urgent care services. Available: <http://www.nhs.uk/NHSEngland/AboutNHSServices/Emergencyandurgentcareservices/Pages/AE.aspx>. [6 Feb 2014]
- Shelter Scotland. (2014). Homelessness. Available: http://scotland.shelter.org.uk/get_advice/advice_topics/homelessness. [6 Feb 2014]
- St Mungo's. (2014). Homeless Learning Club. Available: http://www.mungos.org/services/homeless_learning_clubs. [30 Jan 2014]
- Stearman,K. (2008). Talk About Homelessness. London: Wayland
- The Homeless Population (2010). The Homeless Population. England: Independence
- The Scottish Government. (2005). National Care Standarts. Available: <http://www.nationalcarestandards.org/files/early-education.pdf>. [17 Feb 2014]

- The Twenty Eleven Theme. (2011). Maslow's Hierarchy of Needs and the Ideas Programme. Available: <http://blog.ideasuk.com/2011/06/15/maslows-hierarchy-of-needs-and-the-ideas-programme/>. [17 Feb 2014]



National 5: Care Project Log Book

Student Name:

Task:	Description of Task:	Date:	Outcome:	Comment:
1.	LECTURE PROVIDES GUIDELINES FOR "CARE PRACTICE PROJECT"	10.01.2014	COMPLETED	A BIG AMOUNT OF WORK IN A SHORT PERIOD OF TIME.
2.	LECTURE PROVIDES GUIDELINES FOR "ACTION PLAN"	10.01.2014	COMPLETED - LOG BOOK - AND INSTRUCTION SHEET - GIVEN.	PRESENTED AS A MIND MAP AND PARAGRAPHS. DIVIDED INTO THREE SECTIONS: - DISCUSS THE INDIVIDUAL YOU HAVE CHosen - TIMING AND TASKS; - TYPES OF SOURCES OF INFORMATION - AT LEAST 3 DIFFERENT TYPES.
3.	RESEARCH AND CHOOSE AN INDIVIDUAL AND A BRIEF.	14.01.2014		MY BRIEF IS TO PRODUCE A BACKGROUND REPORT ON AN INDIVIDUAL WHO WILL BE USING CARE SERVICES FOR THE FIRST TIME.
4.	SUBMISSION DAY FOR ACTION PLAN" - 24.01.2014	10.01.2014		2 WEEKS TO COMPLETE MY ACTION PLAN IN MY OPINION 2 WEEKS IS ENOUGH TO FINISH THIS TASK.
5.	RESEARCH THE INDIVIDUAL			RESEARCHING THE SOURCES AND INDIVIDUAL BY LOOKING AT REAL LIFE STORIES TO CREATE THE INDIVIDUAL FOR THE PROJECT.

Task:	Description of Task:	Date:	Outcome:	Comment:
6.	ATTENDED FOR THE WORKSHOP FOR "ACTION PLAN II"	14.01.2014	COMPLETED	I DID MY MINDMAP WITH SOME HELP BECAUSE I HAVE NEVER DONE IT BEFORE. THIS MINDMAP GUIDED ME WITH THE REST OF THE PROJECT AND SHOWED WHAT STEPS SHOULD BE TAKEN.
7.	SUBMISSION DATE FOR "ACTION PLAN II" HAS BEEN CHANGED FOR 31.01.14.	24.01.2014		DESCRIPTION OF THE INDIVIDUAL HAS BEEN COMPLETED. I MADE THE DESCRIPTION VERY DETAILED TO FIT INTO THE TOPIC OF THIS PROJECT.
8.	LECTURER PROVIDES GUIDELINES FOR "RESPONDING TO THE BRIEF"	24.01.2014		THE BIGGEST PART OF THE PROJECT AND IT SHOULD TAKE ME 4 WEEKS. IT IS DIVIDED INTO 8 PARTS. EVERY WEEK I SHOULD DO 2 PARTS. IN COMPANISON TO THE ACTION PLAN I THIS IS LIMITED TIME.
9.	MY ACTION PLAN IS COMPLETED.	27.01.2014		

→ SINCE THIS TASK IS COMPLETED BEFORE THE DEADLINE, I CAN FOCUS ON THE REST OF THE PROJECT.

Task:	Description of Task:	Date:	Outcome:	Comment:
10	STARTING THE 2ND PART OF THE PROJECT.	28.01.2014		REFRESHING KNOWLEDGE OF VALUES & PRINCIPLES ABOUT NEEDS OF INDIVIDUAL TO FIND SOME USEFUL INFORMATION WHICH WILL FIT INTO THE PROJECT. I WAS READING SEVERAL BOOKS
11	STARTING WRITING PART 1 OF SECTION 2 - ASSESSING NEEDS OF MY CHOSEN INDIVIDUAL	28.01.2014		I STRUGGLED WITH THE "EMOTIONAL NEEDS" PART. RESEARCHING THE CHILDREN WITH MENTALLY ILL PARENTS HELPED ME TO UNDERST
12	DESCRIPTION OF PSYCHOLOGICAL THEORIES.	30.01.2014		THE PART I WAS STRUGGLING WITH IT TOOK ME LESS TIME TO DO THAN THE PREVIOUS TASK. I AM ASSUMING THAT IT WAS BECAUSE WE STUDIED RECENTLY THESE THEORIES AND MY KNOWLEDGE WAS STILL "FRESH".
13	ACTION PLAN SUBMITTED. PROJECT CHECKLIST - FILLED OF ACTION PLAN	31.01.2014		
14	CLASS WORKSHOP	31.01.2014		THIS WAS ON "THE NEEDS" TOPIC AND IT MADE ME REALISE WHAT ELSE I WILL HAVE TO WRITE IN "THE NEEDS" PART OF THE PROJECT.

Task:	Description of Task:	Date:	Outcome:	Comment:
15	COMPLETED PART 1 & 2 OF SECTION 2,	3.02.2014		I NOTICED THAT I HAVE TO SPEND MORE TIME ON THIS TASK AND DO IT REGULARLY.
16	FEEDBACK ABOUT ACTION PLAN SUBMISSION DATE OF SECTION 2 HAS BEEN MOVED FOR A WEEK	4.02.2014		LECTURER GAVE US SOME TIPS ON HOW TO IMPROVE OUR WORK IN THE FUTURE.
17	DESCRIPTION OF SOCIAL CONTEXTS & EXPLANATION OF THE IMPACT OF SOCIAL INFLUENCES	5.02.2014		IN MY OPINION THIS WAS ONE OF THE EASIEST TASKS FROM THIS PROJECT SINCE I AM WORKING ON A PROJECT ON THE SAME TOPIC I AM GLAD THAT I CHOSE TO STUDY HOMELESSNESS, BECAUSE I AM CONSTANTLY WORKING ON IT THROUGH THE YEAR AND IT MADE IT EASIER FOR ME TO UNDERSTAND IT.
18	READING MY WORK AGAIN AND CHECKING IF I'M NOT MISSING ANYTHING. RESEARCH ON THE THINGS WHICH WILL HELP ME WITH THE REST OF THIS SECTION.	6.02.2014		AT FIRST I FOUND THIS PART STRESSING BECAUSE I HAD TO DO IT BUT THEN I THOUGHT IT WAS FASCINATING AND I WANTED TO DO MORE OF IT.

Task:	Description of Task:	Date:	Outcome:	Comment:
19	REFERENCES	12.02.14		I REALISED THAT I HAVE TO MAKE REFERENCES REGULARLY I ALREADY DID SOME WORK MISSING REFERENCES AND HAD TO GO BACK TO DO THEM. HISTORY FROM MY LAPTOP HELPED ME WITH THIS I WAS DISAPPOINTED WITH MYSELF BECAUSE I WASTED A LOT OF TIME TO FIND THESE REFERENCES I MISSED I STARTED USING A REFERENCING WEBSITE TO CREATE REFERENCES.
20	WRITING A DESCRIPTION OF THE POSITIVE CARE ENVIRONMENT IN THREE CARE SERVICES & EXPLANATION OF THEY COULD MEET THE NEEDS OF THE CHOSEN INDIVIDUAL.	17.02.14		I FOUND THREE SERVICES TO DESCRIBE THEM AND EXPLAIN HOW THEY COULD MEET THE NEEDS OF THE CHOSEN INDIVIDUAL RESEARCHING INFO ON A CARE WEBSITE ON LEGISLATION NURS AND NATIONAL CARE STAND
21	WORKING ON THE PART 5	21.02.14		I AM TIRED OF THIS WORK AND IT BEGINS TO TAKE ME A LOT OF TIME TO DO IT

Task:	Description of Task:	Date:	Outcome:	Comment:
22	REF. REFERENCES	24.02.14		HAS BEEN COMPLETED IN THE RIGHT FORMAT, ALPHABETICALLY SORTED
23	SUBMISSION DATE OF "RESPONDING TO THE BRIEF" ONCE AGAIN MOVED FOR A WEEK - 11.03.2014	28.02.14		
24	CHECKLIST OF "RESPONDING TO THE BRIEF" HAS BEEN COMPLETED	28.02.14		
25	MASS WORKSHOP	28.02.14		GENERAL INFO ABOUT DIFFERENT ASPECTS OF 2ND SECTION.
26	TIPS OF HOW TO PRESENT FINDINGS APPROPRIATELY WITHIN THE FORMAT ACQUIRED BY THE BRIG. EVALUATION GUIDELINES WAS GIVEN TO US BY THE LECTURER	28.02.14		
27	COMPLETED EVERY TASK IN THE RIGHT FORMAT	28.03.14		
28	SUBMISSION DATE OF "EVALUATION" - 14.03.2014	28.03.14		PREPARING MYSELF FOR THE EVALUATION, READING ABOUT GIBBS' MODEL OF REFLECTION, LOOKING THROUGH MY ACTION PLAN AND THE LOG BOOK

29.

Evaluation Day
- 14.03.14

14.03.14

I'M READY TO WRITE
MY EVALUATION
WHICH SHOULD TAKE
AN HOUR TO DO IT

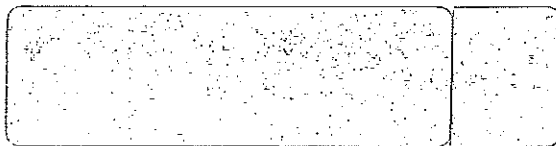
ASSESSMENT NAME:

Evaluation

UNIT NUMBER:

CLASSROOM ASSESSMENT

STUDENT NAME:



DATE:

14.03.2014

RESULT:

1. Write clearly and neatly in black or dark blue ink. You may lose marks for writing that is difficult to read.
2. Any rough work must be written in this book. Put a line through the rough work when you have written the final copy.
3. Use both sides of the paper.
4. Do not tear off any part of this book.
5. Number your answers in the margin to agree with the numbers of the questions attempted.
6. Before you leave the examination room give this book to the invigilator; if you do not, you may lose all the marks.

Question	STUDENT ANSWERS	Tutor Marks
	<p>I will describe what I would do differently when carrying out another project in the future and I will explain how this would improve the future project.</p>	
	<p>I will explain how it might use the knowledge and understanding related to care that I have gained from the project, in one or more contexts.</p>	
	<p>Feelings</p> <p>Looking through my log book I can say that, at the beginning of the project I thought that it is going to be a very difficult work to do.</p> <p>I also was feeling terrified, but my lecturer kept me thinking positively through constant motivation.</p> <p>I started enjoy the project when I was doing the second part of it.</p>	

Question	STUDENT ANSWERS	Tutor Marks
	Evaluation & Analysis	
	<p>Research information worked well. I said in my Action Plan I would like to demonstrate my analytical/research skills. I did it by, for example while I was researching information in the internet about real-life stories to create my individual. (comment 5 in my log book). I also was reading several books and refreshing my knowledge of Values & Principles (comment on 10 in my log book). Furthermore, then I was researching three services and researching information on government website on legislation and National Core Standards (log book, comment 20).</p>	
	Timesdale worked well. In my Action Plan I wanted to present my ability	

Question	STUDENT ANSWERS	Tutor Marks
	<p>to design a plan and implement the project within an allowed timeframe. I did this by working regularly on my project which is proven in my log book updates. I also planned how to organise my work and examples are in my log book in comment 2 and 8.</p>	
	<p>In my Action Plan I wanted to follow instruction, gather information and extract the information from the project guidance and lecturer suggestions. (log book, comment 1, 2, 8, 16) and that worked well. I did it by taking part of class workshops (comment 6, 14 in my log book). Moreover, I was reading and comparing my work with the project guidelines over again to make sure I am not missing anything (log book, comment 18).</p>	

Question	STUDENT ANSWERS	Tutor Marks
	<p>References did not work well because I realised that I missed some of them and I had to go back and found them again to make sure they all are included in my references list (comment 19 in my log book).</p>	
	<p>Since English is not my first language I found the project a bit challenging and in my opinion I could do it better.</p>	
	<p>I would change the way I was doing my references to improve my timing. In any future project I would do it by re creating extra document and record any references every time I am doing any research.</p>	
	<p>I would prioritise my tasks to make my work more organised and clear.</p>	

Question	STUDENT ANSWERS	Tutor Marks
	<p>In the future project I will make sure I will order my I will do my work in order of units instead jumping from one unit unit to another.</p>	
	<p>I would use more sources to make my future project more interesting. I will use, for example some interviews or magazine articles, rather than the three basic sources to make my investigation more interesting and enjoyable to read.</p>	
	<p>I might use the knowledge and understanding related to Care that I have gained from this project in following context:</p>	
	<p>I learned that from Values & Principles unit that everybody is equal and should be treated equally and ^{with} respect</p>	

Question	STUDENT ANSWERS	Tutor Marks
	<p>all the time to avoid prejudice, stereotyping and discrimination. I also know that there are three sectors that provide care services to people. Those care services can provide, for example medical, financial or psychological care and of ^{some of} them are for free and some for some of them we have to pay. All of them Although but all of them we all have the same rights and all of the services should treat everyone accordingly to this rights.</p> <p>From human development & behaviour I know we might try understand some ^{people} behaviour, which can be a result of some past experiences. I also learned that we all the have the same basic needs, even that we all different, and to reach our potential we must fulfil our needs.</p>	

Question	STUDENT ANSWERS	Tutor Marks
	<p>Reflection is an everyday process when we reflect a range of different problems and situations all the time. It happens as thoughts, feelings and emotions and as a result of it we might feel ^{that} we would do something differently or not.</p>	
	<p>In formal reflective writing it is important that we use a framework. There are ^{is} many different models of reflections which can be used, but I am going to use a common Gibbs' model of reflection (1988) which includes stages such as description, feelings, evaluation & analysis and conclusion.</p>	
	<p>Description On the base on my Action Plan and my log book I will evaluate what I did and did not do well while carrying out the project.</p>	

Question	STUDENT ANSWERS	Tutor Marks
	<p>From social influences I learned that how we act in the society as well as that prejudice, stereotyping and discrimination are all connected together.</p>	
	<p>Conclusion.</p> <p># That was my first time I did such project. I found it very interesting experience which helped me to improve my knowledge. Working under pressure and accordingly to timeframe prepared me for future projects. I became more confident as a student because now I know even something seems to be difficult to do, with ^{a bit of} extra research and extra tips from lecturer it's not that stressful to manage the work.</p>	