

# [Communicating in health and social care](https://assignbuster.com/communicating-in-health-and-social-care/)

The Health and social care sector in the United Kingdom is a vast sector and it constitutes of different aspect of care to different types of service users. There are many relevant theories which is applicable in the Health and Social care sector. Abraham Maslow defined some of these theories as humanistic, behaviourist, cognitive, psychoanalytical, social and biological.

Humanistic Theory is achieved whereby you approach an individual positively. In health and social care service users are considered to be vulnerable and the way to approach them should be in a well positively way by using humanistic manner, thoughts, actions, love, respect and dignity by providing the relevant care according to the philosophy of care as per legislation.

Behavioural Theory relates to how people behave to sort out some ways of dealing with people for effectiveness through acting, thinking and feeling. An example in health and social care setting is where colleagues at work provide services to service users in a positive manner that can help in monitoring the behaviour of the individual in respect of the well being.

Cognitive Theory is about what we recognise about the need of a person or situation to be able to implement instantly according to his behaviour.

Psychoanalytical is about the analysis in depth of the person’s internal mental state and thoughts to define their identity of their message, ego and super ego following unusual behaviour.

Social Theory relates to people socialising with other people in any kind of environment

## Case Study

Mr X is a 24 years old gentleman. A few hours ago, he was admitted in Psychiatric Intensive Care Unit. He is a well known service user and he suffers from paranoid schizophrenia and had this illness since he was a child. From previous admission on a mental health ward, Mr X was aggressive and abusive to the nurses. He has a history of attacking staff during his previous admission. Mr X was quite aroused and frustrated as the ward he is at the moment is a locked unit. He does not have access to many things such as going off the ward to smoke. Mr X became very challenging and is willing to leave the ward and started to kick the doors.

The multi disciplinary team had to intervene in this situation as Mr X was becoming more and more aggressive and this started to make the other service users uncomfortable.

The shift leader confronted him and ask him in a well positive way to walk himself in the soft furniture room for a chat. He was unwilling to go but I had a good rapport with him from his previous admission. I approached him in a humanistic way and I asked him politely to come with me in the soft furniture room which he agreed. I also informed him that the other nurses should be present in the room while I talk to him. He eventually agreed. That’s how the humanistic theory of communication helped to calm him down.

During the interview, he mentioned about his habit of smoking. I told him that there were smoking facilities on the ward and that this would calm his frustration. I inform him about the benefits of medication and that staff are here to help him in any way whatsoever. He compromised with staff but he was unwilling to take his medication. I used the behaviour techniques I also informed that he was detained under Section 3 of the Mental Health Act and medication is part of his treatment without any choice. I also explained to him about his rights under the Section 3 of the Mental Health Act.

He agreed and was in concordance with his prescribed medication. I showed him the smoking room and he was given time to reflect about his behaviour. In fact he has been agitated because he wanted to smoke. His ego was to smoke, so once this was facilitated he became fine.

Later during the shift, I applied the social theory i. e I informed him about the importance of socialising with other service user on the ward. There are so many activities on the ward and Mr X conveyed to me that he likes to play video games. I told him that there will be games activities in 1 hour and he said that he will be happy to participate in these activities.

## Case Study

Mr Z is a patient on a psychiatric Intensive care unit and suffers from dementia. On the other hand, he broke his left hand and it was plastered. Mr A is having difficulty while moving around on the ward and he did not have a shower for a couple of days now. I assisted him to give him a shower. I went into his bedroom and told him that he should have a shower and that I was prepared to help him in doing so. I asked Mr Z about the clothes he would like to wear. He said the blue jeans and a t-shirt. I brought him to the shower and assisted him. I gave him shampoo and helped him by scrubbing all around his body as he had difficulty as his left hand was plastered. I helped him to dry himself and put his clothes on and brought him back to his bedroom. I made him comfortable and he wanted to lie down and listen to his music. Mr Z thanked me for my support. In this technique, my tone of voice was at the right level, my speech was coherent and my abilities to help him proves that humanistic and behavioural theory concept were maintained.

## b(i). Review a range of communication techniques that are applicable for different purposes used in health and social care work.

In health and social care we need several types of communication techniques in order for the system to be effective. We can use verbal and non verbal communication techniques to deal with service users and colleagues.

It is good practice in the health service that there is a handover. Generally, there is a handover during each shift. A handover is essential whereby it updates you on the progress of a service user. A handover normally review the service user health condition and usually the nurse in charge of the morning shift discussed with the afternoon staff the progress of a client.

Training is mandatory in the National Health Service. There are so many types of training whereby it enhances one’s communication techniques in the work place. Staff are encouraged to attend these trainings as it benefits the health sector and ultimately it provides a better service to the clients. Sometimes during training, the use of dvd and video is available.

There is also a communication book on the ward. This book is essential as it provides information of what has happened or will happen at the workplace. Staff are kept up to date by checking the communication book.

There is also a notice board on the ward. On this board, clients name is written and as well as their allocated nurse and support worker. The name of staff working on this particular shift is written and the activities during this shift.

The recruitment process is one of the hardest stage before actually getting into a job. There is a formal interview which is carried out and usually communication skills are tested in this interview. The candidates should demonstrate the ability of effective communication. When there is a team meeting regarding the service user, verbal and non verbal methods of communication takes place. Notes are usually taken on papers. On the other hand if there is staff meeting, the minutes of the meeting are taken and usually printed so that each and every staff member is aware of the ward issues.

When a visitor rings the ward to visit their close relatives, this information is written on the visitor’s book.

These verbal and non verbal is of great importance to the health sector.

## 1b(ii). Analyse the use of techniques and strategies for supporting communication between people with specific communication needs.

There are different techniques to support the vulnerable people in the health sector. The government has implemented a policy regarding these techniques and according to one’s human rights. Staff working in this sector are provided with different training before starting the job and the use of verbal and non verbal communication helps a lot. Gradually with time, staff are encouraged to attend more of these training in order to update their knowledge and skills and perform better at work.

There are many types of equipment being used for the disabled, physically impaired and the most vulnerable people such as use of Makaton, Picture Exchange Communication System and communication passport. Technology has been evolved to such an extent like there are speaking head set, reading lenses and voice recognition, screen keyboard and Braille helped the vulnerable people tremendously.

MRI (magnetic resonance imaging) is a fairly new technique that has been used since the beginning of the 1980s.

The MRI scan uses magnetic and radio waves, meaning that there is no exposure to xrays or any other damaging forms of radiation. The MRI scan show the picture of the tissue of the body

Another technique used is the Picture Exchange Communication System. This system is mainly used as an aid for children who suffer from autism. Makaton is

## 1b(iii). Explain ways of dealing with inappropriate interpersonal communication between individuals.

Communication is more than just talking . Communication is important between carers and service users. It is important to have good communication skills in the care setting in order for the smooth running of the service. Effective communication is an essential aspect to work in the care sector. It is with utmost importance that we should avoid the inappropriate ways of communication.

Communication is a learned skill. Speaking, Listening and our ability to understand verbal and our ability to understand verbal and non verbal meanings are skills we develop in various ways.

An example will be if a patient cannot speak because of stroke condition. A menu will be given to him and by instance he can chose from the menu set. If somebody suffers from a visual impairment, an ideal way of communicating with this person will be introducing yourself in the first place, ” Hello I’m Arshad and I am one of the carer and I am allocated to look after you today”. With this way I have communicated effectively and efficiently with him.

From the case study below is an example of how there is inappropriate interpersonal communication between individuals.

Case Study

Mr J has a history of bipolar disorder. His mood splits from severe mania to depression and at the moment Mr J is quite upset with himself and with life. He was feeling suicidal and was very isolative on the ward. He approached a member of staff, demanding a razor to shave his moustache. There was an immediate risk as he was feeling suicidal. The carer refused to give him a razor and Mr J was very upset and started screaming. “ Why can’t you give me a razor, If you think I’m going to kill myself then why don’t you have shave my moustache yourself”. “ It is my human right to have a shave and you have to respect this”. The staff was shocked as he said something which was true. So the staff assisted him with his shave. Humanistic and psychological approaches in this scenario help to understand and deal with inappropriate interpersonal skills.

## 1b (iv). Discuss the ways in which communication influences how individuals feel about themselves.

Communication is the most important means to find the needs and requirements of individual. The way of understanding communication is through Abraham Maslow.

Referring to Abraham Maslow “ theory of hierarchy needs” individuals in health and social care setting are being looked after with much concern in relation to their required needs for a normal living. They can feel to be considered and treated in individuals and protected by the legislation.

## Case Study Basic Needs

I was scheduled to work an early shift on this Monday morning. I attended the handover and I was told to assist Mr T with his personal hygiene. From the nursing notes, Mr T slept well last night and he woke up early and was still in his bedroom. Breakfast time was near and I asked him if he preferred to have breakfast first or to have a shower.

Good morning Mr T, I said.

He replied Good morning, Arshad.

I engaged in a conversation with him and told him about the football last night. He was pleasant with me. He told me that he wanted to have a bath first. As Mr T has a physical disability, I opened his drawers and asked him about the clothes he wanted to wear. He told me that he wanted the black trousers and a white shirt. I assisted him by walking to the bathroom where I sat him down on the bath chair and gave him a wash.

Soon after, I helped him to wear his clothes and wore his shoes. I escorted him to the day area, where he had his breakfast. In this case study, I have showed how I assisted a service user in his basic needs.

## Case Study Self Actualisation

Mr H suffers from paranoid schizophrenia. He was diagnosed of this illness since he was five. Mr H is a 19 year old gentleman and has been on the ward for the past1 week. Mr H wanted a 1: 1 communication with his primary nurse. Unfortunately his primary nurse was off duty and I was allocated for his care. He conveyed to me that he preferred to have a chat in the interview room.

I asked him if how was his mental state on the ward. He told me that he was feeling low in mood and at times he was responding to visual and auditory hallucinations. I asked him what were the voices asking him to do. He said that the voices told him that there is poison in the water in the bath and this is the very reason why he did not have a bath for a week.

I engaged with him in a therapeutic way whereby I informed him about his medication and this will help him in the next few days and he will stop responding to the voices. I also emphasised on him having a bath and told him regardless of his illness, he should be motivated to have one as other residents they have the same bath with the same water. He was rational with me and thanked me how I dealt with me. He reassure me after the interview he will have a hot bath and assist with his personal hygiene.

## Case Study Needs to know and understand

I was on annual leave at my work place for the past 3 weeks. On my return back to work, I attended the handover. Mr B, a 21 years old gentleman presented as a first time admission on a psychiatric unit. He was diagnosed from paranoid schizophrenia.

I went into his bedroom and asked him if he would like breakfast. He started to shout at me and became irritable and said in an angry tone “ I have my shower before I eat breakfast”

I left Mr B on his own so that he can calm himself down. I read his care plan and eventually its part of his treatment that he likes to have his bath before breakfast. I brought him some shower gel and towels and went into his bedroom and approached him a therapeutic way and told him that he could have his bath and soon after I’ll make him some breakfast.

In this case study, the service user has a choice and this shows that it is essential for the service user to participate in social development activities and considered them within the society.

## Case Study Transcendence

Mr Q is a service user on my ward. Mr Q is 85 years of age and speaks very little English. Mr Q requested that he should write his will before he dies. He conveyed to me that he was willing to do that. I liaised with the manager of the ward and he advised me to contact support services and to book an interpreter as well at the same time. A meeting was sent up with support services and the interpreter and Mr Q where they could discuss about the will.

In this case study, Mr Q has the rights to write his will. It is essential to provide him with the support he needs.

For people to be able to live happily and especially those who need support for their living, the communication process that needs to be put in practice must be made sure that it has some influences upon their behaviour and requirement. Therefore by applying the hierarchy of needs of the theory, we can find the ways to help these people.

## 1c. Evaluate workplace strategies, policies and procedures for good practice in communication.

Good practice in communication in the work place is achieved by various methods. The Data protection Act is one of the important legislation of the workplace. Information cannot be disclosed to third party without the consent of the service user. It is in the best interest of the client to withhold these information as this will have an impact on patient’s care. The Data protection Act of 1998 promotes good practice and the health sector is run smoothly.

Treating somebody as humane as possible is one of the fundamental aspect in health and social care. Privacy and dignity is respected and human rights is achieved. There is freedom of speech, choice and rights of an individual. With the introduction of the equality act in October 2010, the service in the health sector will be more effective.

Management sends staff for Induction and they attend all these training before starting their job as these are the fundamental aspects of care.

There are various policies and procedures at work. Those are governed by the trust. Information is not disclosed to third party and unqualified member of the team cannot disclose any information. Only qualified member of the team can disclose such information with the consent of the ward manager. Anybody seen to be disclosing information may be disciplined as this is written in the policies and procedures of the trust.

There is a computer software on my ward relating to information stored on computer. Different staffs have various access level to these types of information. Trained staff are familiar with the software which will give them full access as others are restricted.

There is a policy at my work place regarding the personal development review. Each staff should complete one of the PDR inorder to be updated and they should upload this file on the computer system. On the personal development review, it records the supervision and appraisal of staff and all the trainings and qualifications achieved. It states the performance of staff and usually they are promoted if they are deemed competent to be so.

These are the various methods of good practice in the workplace.

## 2a(i). Discuss relevant legislation, charters and Code of Practice governing the rights of individuals to communicate and their implications relating to records and communication about people.

The government is committed in considering the bills of rights. Adopting Bills of Rights provides a moment when society can define itself. “ A Bill of Rights is a law protecting the fundamental rights and freedoms to which each person is entitled. Those rights might include the right to life, the right to freedom of religion, the right to freedom of expression, the right to education or the right to good health care. Each country’s Bill of Rights should reflect the particular needs and circumstances of its people.

Each person has the right to

request desired objects

refused undesired objects, actions or events

express personal preferences and feelings

be offered choices and alternatives

reject offered choices

request and receive another person’s attention and interaction

ask for and receive information about changes in routine and environment

receive intervention to improve communication skills

receive a response to any communication, whether or not the responder can fulfill the request

have access to AAC (Augmentative and alternative communication ) and other AT (assistive technology) services and devices at all times.

be in environments that promotes one’s communication as a full partner with other people, including peers

be spoke to with respect and courtesy

be spoken to directly and not be spoken for or talked about in third person while present

have clear, meaningful and culturally and linguistically appropriate communications

Taken from the National Joint Committee for the communicative needs of persons with severe disabilities. (1992). Asha, 34 (Suppl. 7), 2-3

The Human Rights is the basic rights and freedoms that all humans should be guaranteed, such as the right to life and liberty, freedom of thought and expression, and equality before the law. Therefore in a health and social care context, through assistive technology and the use of facilities, these have been implemented in order to help vulnerable clients within society.

The summary of rights can be classified as follows

Information

i) Every person with a communication disability has a right to be given information in a way they can receive and respond.

ii) Every person with a communication disability has a responsibility to identify how they can communicate to exchange information.

Support and Training

Every person with a communication disability and their family members have a right to be given access to training and support to minimise the impact of the disability and improve communication skills.

Time to communicate

i) Every person with a communication disability has the right to be given time to receive, comprehend and respond to information.

ii) Every person with a communication disability has the responsibility to ask for extra time when making appointments.

Access to services

i) Every person with a communication disability has the right to access services appropriate to their needs irrespective of where they live or what their income is.

ii) Every person with a communication disability has the right to be assessed and provided with the basic tools or equipment to help them communicate.

Inclusion in Social Networks

Every person with a communication disability has the right to be included in social networks.

Services from Employers

Every person with a communication disability has the right to expect that employers and potential employers will provide the support they need to communicate effectively.

## 2a(ii) Analyse the effectiveness of organisational systems and policies in relation to good practice in communication

Good practice relating in health and social care setting can be achieved through various ways. The use of computer has revolutionized the National Health Sector. There is a new system which has been implemented in the NHS called RIO. It was introduced in the late 2005. On this system, detailed information about a client is stored on the database. This has helped to reduce a lot of paperwork.

With the introduction of internet and information technology, it has revolutionized the health sector. All hospitals have been computerized and this acts as a good practice in communication.

An example of this effectiveness is described as follows. The police picked up a gentleman wondering on the streets. This middle aged man has been shouting and responding to voices and it appears that he is unwell. The police rang the Mental Health Assessment Unit and is asking for more information about the patient, if he is known to the services or not. From the use of RIO, a simple search on the browser will indicate if he is known or not whether he has been in contact with the services or not. On the system, it will indicate all types of communication and engagement with the clients. This information is kept confidential and no third party can access it without the consent of a senior manager.

## 2a(iii). Analyse how methods of communication are influenced by individual values, culture and ability.

In Great Britain, there are many people of different background and ethnic groups. Cultural values are respected within society. Religion and ethnicity is a top priority in the health care sector. An example will be a muslim client may request Halal meal and the hospital should by all means provide this meal as it is the client’s choice. Strong values and beliefs is an aspect of health care setting.

For many people, English is not the official language and they obviously find it difficult to engage with health care professional. The NHS trust provides translators which helped these people in such instances. The Department of Health ensures that when information is provided to clients/service users and leaflets are distributed that they should be available in different language. If these leaflets were unavailable, this would have a drastic impact on health sector and ineffective communication would lead to poor quality services.

It is in good practice and best interest while communicating with somebody to use terms like “ please” and “ thank you”. If the service user wears a headscarf due to his religion or grow a beard, he should be respected and cared for according to his creed or religion.

Food ordering should be ordered and cared for according to the service user choice. The care plan of a client is very important aspect of his care as this will show if the clients like to socialise the way he will engage with others.

These policies and procedures are implemented so that religion, culture, background and social factor are respected and well practiced within a health and social care setting.

## 2b. Demonstrate your ability to communicate appropriately using a range of techniques.

In health and social care we need several types of communication techniques in order for the system to be effective. We can use verbal and non verbal communication techniques to deal with service users and colleagues.

The nurse must acknowledge the importance of and use of communication skills for working with people with dementia and their carers; particular attention should be paid to pacing of communication, non-verbal communication and the use of language that is non-discriminatory, positive, and tailored to an individual’s ability

Mr J is a client on the ward. He is detained under Section 3 of the Mental Health Act. The doctor discussed Mr J case in the ward round and he agreed to give Mr J half an hour escorted ground leave accompanied by a nurse. I promised Mr J to escort him for his walk after the handover at around 14: 30. Unfortunately, at this particular time, it was raining heavily and the ground leave could not be facilitated. I approached Mr J and explained to him that because of the weather and the health of safety of myself and himself, I could not take him on ground leave but I reassured him if the weather gets better, I will definitely escort him outside. I reassured him by putting my hands on his shoulder. Mr J understood and took the message on board and jokingly he said “ hope the weather gets better”. In this scenario, I have explained and made it clear to him. He understood my way of communicating with him.

Mr D was transferred to the Ward from prison. He was escorted by two prison officers. He has a history of Paranoid Schizophrenia and is currently detained on Section 38 of the Mental Health Act 1983. On arrival, he was hand cuffed and escorted to the search room where I asked permission to search him for contraband items and some of his razors and nail clippers were kept in his lockers. His hand cuffs were removed. I introduced him to the staff present was re-orientated to the ward but he had been on this particular ward before and knew almost everyone present. I read his right under Section 38 of the Mental Health Act 1983 and I asked him if he understood and politely asked him to sign the disclaimer. I also asked him if his vital signs could be taken and recorded it and he was then shown his bedroom. He was cooperative and interacted pleasantly and politely with me and other staff.

## 2c. Suggest and justify ways of improving communication systems in a health and care setting.

The National Health Sector has implemented a system whereby patient’s record and daily progress are being saved on RIO. On this system a patient’s file can be retrieve and updated as per along the day to day care of a client. In most hospitals, RIO is being used and it has proved to be effective. The main drawback of this method is that all staff members whether junior or senior has got access to RIO. Patient’s health are being monitored on RIO. Any staff can delete information like care plan when they are under investigation. RIO can be assessed by any staff and there should be a way that Senior Managers are the only ones that can modify any information whether care plan or day to day progress of a client. Another method is that, they should send a copy of the care plan to the senior managers or social workers so that they are aware of the current plan when something goes wrong they won’t be able to modify any information.

On some of the wards in the hospital, the verbal and written command of staff is very poor. Staff should be recruited on the basis of the qualification i. e from the Department of Health criteria staff should be educated to a minimum of NVQ level 2 qualification, yet this is not the case as some are being recruited without experience whatsoever. On top of that, their level of English is so poor that ultimately this have an impact on patient’s care. These barriers are a detrimental to the health sector.

## 3a(i). Demonstrate how you use the standard IT software routinely to support work in health and social care to present a spread sheet, a menu, an activity programme and the daily care plan of the service user.

In my work place, the use of computers have been evolved to such an extent that it has cut down on all paper work. The Information technology system has been implemented and has helped the nurses, doctors, consultants and clients on the ward. Various organization department works along with the National Health Sector.

Microsoft Office Packages are widely used on the ward. Records keeping are saved and retrieved from the computer and can be edited using such packages. Daily progress notes are entered on a sophistical packaged named as RIO. Day to day care of the clients is being input on the system.

The internet at work place is also an important tool as information can be retrieved within seconds. Another positive factor of the use of computers is that stock ordering for the ward can be done via the internet. I was given a secret username and a secret password to order stock for the ward. Nurses do order medicines via the internet using such system.

## 3a(ii). Explain how the use of IT benefits the service users with consideration to legal implications.

The use of Information Technology has helped tremendously the health sector. It has benefited not only the staff but service users as well. There are two main types of health care information system: Clinical Information System and Administrative Information System.

The Administrative section deals with patients charges, health care cost, outstanding cost, details of next of kin,

Information technology has benefited the National Health Service in various ways. Information are relayed quick and effectively on the system. The system can be accessed 24 hours a day.

On the ward I work, computers are very practical. They have implemented the use of computers on my ward since 2001. I have seen so many changes in relation to health and social care. For example, they have implemented a system in West London Mental Health NHS trust, it is called RIO V5. With RIO V5, you can access a client information within a certain