

# [Facilitating changes in health and social care social work essay](https://assignbuster.com/facilitating-changes-in-health-and-social-care-social-work-essay/)

LEARNING OUTCOMESChange is the act of transformation in either positive or negative aspect, It gives new idea and also changes the face of profession, as well as the substitution of one thing from another. In this assignment I will be looking at the factors that facilitate changes in Health and social care and also with my working place. I work as a senior carer in an adapted accommodation. With different type of people. National Health Services provides a comprehensive range of health services, the vast majority of which are free at the point of use to residents of the United Kingdom. National Health Services are responsible for the integration of health and social care, ensuring that local health organisation work together with local authorities. There are so many key factors that drive changes in National Health and Services locally and nationally, but will talk about few of them, these are;•New legislation,•Economic change and• Political changes, has brought drastic changes to the National Health Services and the social care services. According to the recent Economic changes that took place with the National Health Services and the social care services. It is intended that Primary Care Trusts receive 75% of the National Health Services budget to provide effective health and social care. They are responsible for ensuring that the services available can meet the demand from people in the local community and that they are accessible to them. www. businessballs. comBecause of the economic changes, the needs of the elderly/vulnerable ones are not prioritise because of the new reform that capped the flow of money into health sectors. Thousands of older people living in care homes in England so many are frail and vulnerable, with many health challenges than most of the country populations. Many with Dementia, learning disability, physical disability and so on. Many are on cocktail of medication, and the average lifespan when they get to care home is very low. " Care home residents are deprived of their right and privilege from a lot of community health services they would expect to get if they were in their own homes, but they still make sure General Practitioners is in provision for them, despite they are in the care homes." Prof Finbarr Martin. Most primary care trusts plan healthcare for their local population by assessing the needs of those who lives in their own homes . So, elderly people living in care homes may be out of sight and mind respectively, they do not accord sufficiently priority " to their health needs". If the health needs of this vulnerable elderly population are not properly met, they end up in hospital instead. www. guardian. co. ukFor instance, my service users, who had a cut in her income support due to the economic factor, find it so difficult to cope or meet up with her daily needs. Mrs C finds it hard to live on the token she receives from the government because she could not pay some of her bill. Mrs C is someone who enjoys shopping and decorating her home with beautiful colours, but had to minimize her expenditure. Because of the economic factor, Mrs C could not provide the right equipment for thecare provider to work effectively. Mrs C could not buy the appropriate clothing protection. Mrs C had to manage the rate at which she use her pad, instead of changing 4 times a day, she reduced it to 2 times and as well the quality of the pad was drastically reduced, the pad could not hold urine for hours because of the loss in quality. The economic factor also affected Mrs C on choice of food, she is someone who likes to stock her fridge with different kinds of food. As a Sri Lankan by culture they enjoy cooking different type of dishes which satisfy their desire and feeling, but Mrs C could not afford that anymore , instead she buy in pieces and eat whatever available for her. In addition to the challenges Mrs C faced due to the economic factor is clothing. Mrs C has some special needs on clothing. There are some certain clothes she can wear without discomfort due to her arm structure, but because of the economic factor, Mrs C could not afford that than to keeping wearing the ones she had and as well make an hole to some of the clothes to avert any form of discomfort. Government has introduced the use of Criminal Records Bureau in order to know about the history of those who work in the Health and social care service, whether they had been convicted with crime or any form of abuse in order to avert any form of crime or abuse to the vulnerable ones. Also the introduction of Safe guarding Vulnerable Adult. This training aimed to raised awareness and usefulness of Safeguarding Vulnerable people including the elderly. Health and social care staff on completing the training on SOVA will be in a better position to implement their organisation policy and the procedure to follow, to know the signs and symbols, different types of abuse whenever they come across it. Some people could not afford the training, likewise some organisation could not afford the training for their staff, it discourages those who have interest in health and social care services. The government also put in place Care Quality Commission, whose job is to make sure that care provided by Health and social care meets government standards of quality and safety. The government standards covers all the aspect of care, including:•Treating people with dignity and respect.•Meeting the needs of the people•Having a clean and safe working environment•Managing and staffing services. Care Quality Commission came to my work place unannounced couple of months ago. They were recognised with their identification card on display. They went through all the files and the environment in order to see how we render care to the service users. They met the service users in the lounge, asked question from them randomly. After the whole assessment, my organisation was rated with good recommendation. Introduction of Technology has increased the effectiveness and efficiency of staff in Health and social care services. It also help on record keeping. With the use of password which prevent other party intruding into service user privacy. The impact of technology has brought the use of Hoist which has improved the health of both the service user and provider. The use of hoist has improved the efficiency of the staff and is doing away huge difference to health care services. It also help on how to move and handle service user in an appropriate and safe manners, which works in line with the policy and procedures. For instance, my servicer user who use rotating stand get in and out of bed which causes back pain to the staff and to herself , but the invention of the new technology device (Hoist) was a great relief for we the carers and my service user. Before the Hoist is used, the staff had undergone training on how to operate the new device and the Hoist will be service 3 times a year to avert any form of accident or damage. Due to finance, some organisation could not afford the training for their staff or even buy the device for working efficiency. The new electronic device for measuring and recording time for staff to clock in whilst at work had brought a change in the punctuality of staff in my working place, staff who come late to work will not be able to backward their time of arrival. The introduction of Closed Circuit Television has increased the safety of the service users. It also gives the image of those who comes in and out of the premises at a particular point in time. Technology had given independent to my service user in some areas of life. Almost all the things in her house is remotely controlled. For example her Doors, window, curtain and the switches, before this electronic device, my service user finds it difficult to access her door or anything what so ever in her home because of her state of health which does not permit her to do so. With the use of the computer, my service user regained her independence and privacy, which enable her to undergo some online course without learning under hardship or being stressed and the easy access to the computer without the use of plaster to prevent boils on all her fingers. Political changes has brought a lot of unacceptable act into the National Health Services, for instance, leaving people waiting for over three months to receive treatment that could significantly improve their quality of life, especially when you consider that the average life expectancy of an older person entering a care home is between one and two years. People had to wait six weeks or more to receive treatment. The figure is markedly worse when the coalition came into powerThe Care Quality Commission also looked at how staff in a small sample of care homes dealt with the health needs of residents. They found good practice in most cases in identifying residents' medical needs and planning, but there were also problems. Thirty-five per cent of homes said they " sometimes" had difficulties getting medicines to residents on time, and only 38% of care homes said General Practitioners made routine visits, while 10% paid the General Practitioner surgeries to visit. Under the health changes, the Care Quality Commission no longer has responsibility for monitoring the work of commissioners. The British Geriatric Society says it is concerned to know " who is looking out for the needs of this very vulnerable group of older people. This January, 8, 973 people waited more than six weeks for tests, out of a total waiting list of around 500, 000. www. guardian. co. uk. It happened that my service user needs to change a pair of glasses given to her at Moorefield eye hospital which is a wrong lens and needs to be replaced with the correct pair, the exchange took them almost 3 months the along with the eye test she is meant to undergo. Due to the political change and the changes to the National Health Services , the social care sectors has made a mandatory reductions of hours to those in care either on a direct debit care, care home and Nursing home. With this change, the amount of care vulnerable people receives does not meet up with their needs. For instance, Mrs C who is on a direct debit of 55hrs per week since she has been in care, but when the change in government took place, the hour was reduced drastically. She has no hour for shopping, or any leisure time for herself and she could not meet up with her daily care/needs any longer. The political change also affected social care services staff by stopping some people from working with the organisation. For example, the case of not allowing oversees student to work in care sector, this has reduced the number of people working in Health care sectors and increased work load on the staff and has slow down the efficiency of work done.. I devise a strategy in measuring the recent changes in my work place by carrying out survey through questionnaire for the staff and getting feedback from the family members and the service user themselves. With the strategy in place, I was able to know how the changes have affected both the service users and the staff within the organisation and if there is anything to improve on. I propose appropriate service response to recent changes in my organisation by asking the service user, how well did the care provided able to meet up with her daily activity. Also seek any suggestion or ways on how to improve on the service we render. The key principles of change management are: Supervision : on how best the staff are performing in their working activity and what are the areas in change they needed to under training on the new device or to update their training statusAssessment: the service needs to be reassess, medically, mentally and physically to know the type of changes on them , works within the organisational policy and procedure. Meeting with all the people in care of the services users to know how well their needs are met. How we planned the changes that took place in my work place, we made use of SMART principle (specific, measureable, achievable, realistic, time). We specify on what the changes will be, Train the staff with the new technology device Hoist, the use of biometric device which deals clocking in instead formal communication. We measured the effect of the changes by weighing the positive and the negative part of it. We also both the time and how achievable it will be for us as an organisation and how the changes will not affect us too much. As a Senior carer, I monitored the recent changes in the organisation by asking the staff what they have learnt in the process of the recent changes in the Health and social care services and how best are they relating it with their working activity. As a Senior carer, I evaluate the overall impact of recent changes to my organisation is through the information I gathered from questionnaire that was given to staff, the service users who are capable of writing and their family members who are present to share their view about the recent changes that took place within the Health and social care sector which also affected our organisation in either positive or on the adverse side. Team meeting with those in care of the service users, like G. P, Nurses, Occupational Therapist e. t. c. To facilitate changes in my work place as a Senior carer, I will identify the areas that require the change through assessing the needs of the service users and the staff collectively. Seeking the opinion of people in the organisation will also help on the changes.