

# [Working with older adults. essay](https://assignbuster.com/working-with-older-adults-essay/)

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Area of practice 1 Working with adults. This essay is based upon the case study three, to which I will identify the needs of the service user in this case study. It will also indicate any gaps in this scenario and what further information I might need and how I collected such information. Once all available information has been collated it will be necessary to analyse and make sense of that information in order for it to be of use in making an assessment of the service users needs.

Working upon a Student Social worker perspective, I will include what knowledge, skills and values that I personally feel is most relevant to the underpinning social work practice of this case study. Sound analytical skills will therefore facilitate an assessment that will provide the basis for any proposal for intervention. Referring to (Trevithick P. 2005) the assessment is a professional judgement likely to contain factual information, opinion and interpretation but it is important that each is identified as such, with evidence supporting any factual information.

The assessment should be needs led approach, which looks at what is needed to make a difference rather than looking at what is available. (Trevithick P. ) Cited in Payne, M. 2005. It is important to illuminate the importance of all interpersonal communication as it is guided by the value system of empowerment, which is knowledge, values and skills in so creating effective social work practice. Further information that is required to proceed would be; To include concrete information about Brian such as his age, marital status, family composition, what he or she is wearing, level of verbal and nonverbal communication, emotional affect, and anything of interest that may have happened in the interview? I would include the defined problem(s) as stated by Brian, whilst ensuring not to make interpretations here but just to report the relevant information. Important information might be that Brian cried throughout the interview, or he just stared off into space and answered questions in a flat monotone.

In order to get this information I would implement a range of communication skills. Communication has been identified as one of the core skills included within the Central Council for Education in Social Work (CCETSW) [1][1] as it plays a significant and central role towards good social work practice. As Neil Thompson (2000) identifies communication is developed to “ carry out a particular activity effectively and consistently over a period of time”. According to Veronica Coulshed my task and plan of social work processes can be divided within the seven stages, in brief the list suggests the following guidelines: ?          Stage 1 Information Gathering          Stage 2 Referral and Initial Contact ?         Stage 3 Assessment ?          Stage 4 Care planning ?          Stage 5 Implementation of the Care plan ? Stage 6 Monitoring the Care plan ? Stage 7 reviewing the care plan. This is known as “ systematic and responsive communication” As specified in task centre practice this is a method in which a step-by-step plan is devised to reach a target problem with Brian and my response including an expressed interest in what Brian is saying and its value and therefore relaying understanding and reflection is important skills to uphold. The above stages continually rely upon communication, not only between me and Brian but for me to consign any plan into action to include the contact with other associated agencies.

Verbal communication is not only face-face interaction but can involve telephone communications that as Neil Thompson writes “ good telephone manners should be a part of a social worker’s repertoire”. Examples of verbal communication as taken from VSO, involve asking questions, how to verbally show understanding and focus, and present eflection and summary. The use of verbal communication has to be of relevance to the context in which it is being used, a skill a social worker’s need to acquire. Verbal communication usually goes hand in hand to some degree with non-verbal communication, more commonly known as body language or symbolism. Koprowska J (2004). I need to pay particular notice of non-verbal communication when it begins to show either a clash or contradiction with what is being said, this relates between both worker and client.

(Payne. M. 1996). The final form of communication I would like to point out is one I have been using throughout this essay, the means of written communication. To communicate within words can sometimes be one of the most difficult forms of communication.

Without the use of body language, symbols and even insufficient explanation a written piece of communication can be misinterpreted. It has been argued by (Lishman, J, 1994) that not enough attention is given to written communication, although it complies as a large piece of social work practice and an important tool to contain. In social work, values such as respect for people, equality, and non-discrimination might constitute ultimate values. Proximate values are more specific and suggest shorter-term goals. In social work they might take the form of policies related to welfare clients’ right to health care or affordable housing, or psychiatric patients’ right to refuse certain types of treatment. Finally, instrumental values specify desirable means to desirable ends. In social work respecting clients’ right to confidentiality, self-determination, and informed consent might be considered instrumental values. Banks, S 2004) Pumphrey offered a broad typology of social work values, placing them into three categories of value-based objectives.

The first focuses on the relationship between social work values and values operating in the culture at large with respect to, for example, social justice, social change, and basic human needs. The second category focuses on internal relationships within the professional membership, for example, the ways in which the profession interprets and implements its values and encourages ethical ehaviour. The final category focuses on social workers’ attempts to understand and respond to clients’ values (Pumphrey, 1959) Levy on the other hand, also provided an important classification of the profession’s values.

The first of Levy’s three groups includes “ preferred conceptions of people” such as the belief in individuals’ inherent worth and dignity, capacity and drive toward constructive change, mutual responsibility, need to belong, uniqueness, and common human needs. The second group includes “ preferred outcomes for people” such as the belief in society’s obligation to provide opportunities for individual growth and development; to provide resources and services to help people meet their needs and to avoid such problems as hunger, inadequate education or housing, illness, and discrimination; and to provide equal opportunity to participate in moulding the society. Levy’s third group includes “ preferred instrumentalities for dealing with people” such as the belief that people should be treated with respect and dignity, have the right to self-determination, be encouraged to participate in social change, and be recognized as unique individuals (Levy, 1973). Social workers are/should be committed (CCLTSW1989, p. 15) To be a competent social worker, all these values and actions have to be looked at and balanced when working with client, with guidance of professional values and principles.

“ Competence in social work requires the understanding and integration of values of social work”. These values include dignity of individuals, promotion of choice, privacy, respect, confidentiality and action (shardlow). “ There is a direct link between values and action. When we perform an action and the act itself, may be judged according to the values expressed through that action”(shardlow 1989. p2) none of these values should be looked at exclusively, because it will be at the expense of the others (Banks, S, (2006).

According to Banks “ Personal professional, agency and social values are interlocking, yet in world of the person who comes for therapy, so that the person feels accepted and understood. Two things are important about this, firstly that the empathy should be accurate, and secondly that the empathy should be made known to the client. Both of these are learnable skills, and they do make a huge difference to the relationship between service user and practioner. The second quality is genuineness, if empathy is about listening to the service user; genuineness is about listening to yourself, really tuning in to yourself and being aware of all that is going on inside yourself. It means being open to your own experience, not shutting off any of it. And again it means letting this out in such a way that the service user can get the benefit of it. Genuineness is harder than empathy because it implies a lot of self-knowledge, which can really, only be obtained by going through one’s own therapy in quite a full and deep way.

It is the term, a fully functioning person, Rogers’ word for the person who has completed at least the major part of their therapy who can be totally genuine. The third quality is unconditional positive regard, it means that the service user can feel received in a human way, which is not threatening. In such an atmosphere trust can develop, and the service user can feel able to open up to their own experiences and their own feelings. In a therapeutic situation where these qualities are operating, Rogers found, clients go through a sequence of stages that more and more closely approach being fully functioning persons, able to take charge of their own lives and really be themselves. Biesteck (1961) included self-determination in his list of values and can be seen to be the predecessor to empowerment ( Shardlow ).

BASW (1986) developed this and included it in their code of ethics. It can also be recognized in the CCETSW code of ethics in relation to promoting people’s rights and assisting people to increase control and improve their quality of life. Braye and Preston Shoot (1995) also highlighted the importance of empowerment through enabling people to take control over their lives, make decisions and achieve their goals. These are important skills for a social worker to posses when working with their service user. For me to respond empathically to what Brian says, he may be more able to continue discuss his problems at an increasingly reflective and accurate level without any prompting or questioning.

This exerting power to the service user and so making Brian feel empowered. Due to Brian suffering from Depression as a result of being diagnosed HIV positive, skills such as advocacy would be used to signpost him to the relevant agencies for additional emotional support and therefore provide a local social support network for him. In relation to this Case Study of Brian, I would develop the procedural, questioning and exchange models into my working practice. Smale and Tusan (1993) identify the following three models. The procedural model; with this model a checklist is most likely used. Social workers undertake agency duties by gathering information to see whether the service user meets the criteria for services. The questioning model; here the social worker holds the expertise and follows a format of questions, listening and processing answers. The exchange model; an exchange model will be used in my assessment.

This model acknowledges that the service users are the experts on their circumstances and problems, with an emphasis on exchanging information and ideas in order to make a difference and finding alternative ways of approaching situations. Social workers follow what the individual is saying rather than interrupting. A strengths based approach will also be applied when working with Brian. This approach focuses on positives with the intension of increasing capacity, motivation and potential for making choices. Brian would be classed as the expert on his own problems. Systematic practice could also be adapted within this case study, thus enabling me to keep a clear focus of what I am doing and why, which is to safeguard and protect Brian.

Additional knowledge that I have learnt so far is the Ecological perspective; this looks at his environment factors, such as the home and the local community. Also it could include friends, their house and the neighbourhood surrounding them. Each component is interrelated and each will have an effect on the other.

As a social worker in learning it would help to identify further factors attributing to my clients problems. Inter professional collaboration is needed this is where professionals from different backgrounds or disciplines work together to collaborate to meet the needs of Brian. Relating this to my knowledge I would use Task-centred practice, which concentrates me and Brian working together to solve problems which he considers important. It argued by Howe (1993) to be a transparent approach which with its partnership between professional and service user is considered to be empowering for the client.

I believe that task-centred and anti-discriminatory theories can work well together to benefit the service user. Howe (1993) tells us that in task-centred work “…goals are set and mutually agreed …” and that these goals are achieved “…by way of small, sequential, manageable steps. ” The steps between problem and goal are: 1.

Preparation. 2. Exploring problems 3. Agreeing goal and time limit 4.

Tasks 5. Ending the work and evaluation. Task-centred work is not suited to all the situations one might work in, but Payne (1997) sees it as being appropriate to “ problems with formal organisations” and “ inadequate resources”. In conclusion, it is vital that the social worker identifies the appropriate assessment, so the most effect outcome can be planned. It is then important to work in partnership with the service user when carrying out an assessment in order to reduce the oppressive nature of the unequal distribution of power. It is also important to use frameworks as a practice tool to ensure that all possible influences in the service user’s life are taken into account. It is important to identify other cultures and differences so further discrimination can be prevented.

Most importantly though is to safeguard the service user’s well-being, by utilising all services available, whilst working in an anti-oppressive manner. It further more became apparent to me, that social work knowledge, Skills and values interlock and overlap with one another; This allowing me to see social work as an integrated activity, making it very complex field of work and sometimes challenging. . References Adams, R, Dominelli, L and Payne, M (eds) (2002) Social Work: themes, issues and critical debates, Basingstoke, Palgrave. Banks, S (2004) Ethnics, Accountability and the Social profession. London; Palgrave Banks, S (2006) Ethics and Values in Social Work. 3rd edition Basingstoke, Palgrave Central Council for Education and Training in Social work (CCETSW) (1995)Coulshed, Veronica & Orme, Joan (1998) Social Work Practice: An Introduction.

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