

# Understand effective communication in the work setting essay sample

[Sociology](#), [Communication](#)



As a carer- communication is vital. We use communication to understand what others needs are and to express our own needs.

We use communication to share information or to receive direction. To share knowledge

We need communication to build relationships and maintain them. To express our feelings and to understand how others are feeling. To express a preference and offer choices.

Communication is vital to ask for help or assistance, to reassure or give encouragement

4a. 2 Describe factors to consider for effective communication

Factors to consider for effective could include,

- Can the person understand what I am saying
- Can the person hear what I am saying
- Does this person speak the same language
- Is the person paying attention to what I am saying

If I was communicating in written form I would consider

- If the person can read.
- Is my writing eligible
- Am I using the correct language

I would also consider

- Is this the correct environment.
- Is this the right time for this particular conversation
- Is this person in the right frame of mind for this conversation

4a. 3 analyse reasons why in a particular situation a child or young person may be unable to use verbal communication A situation could be that you are trying to give directions or instruction to a child to a child but they are unable to use verbal communication for example:

- The child may speak another language
- The child is hearing impaired
- They are playing music or the TV is too loud
- They are too upset to speak
- They may have a speech impediment
- They may have a form of brain damage and cannot communicate without the aid of electronic devices

4a. 4 Explain how communication affects relationships and effective practice at work. In every setting communication is very important to create a safe, secure and caring place for children, staff, parents and visitors to communicate . It also helps us to plan and meet the needs of the children in our care.

Good communication with young people, work colleges and other professionals is essential to build up good working relationships If relationships are strained between the young person and practitioners then two way communication will be difficult to achieve and that is needed to support the children in our care, therefore the child will not communicate effectively and this will affect the child in the long term. If you provide good communication skills, then you will have a strong relationship with the children.

Communication skills are useful for attachment issues as they will enable you to build a strong relationship with the young. A key person provides vital links with parents/carers and is crucial to help the children settle when left in their care, so it is important that practitioners communicate effectively. A key Person will help the child become a skilful communicator. A young person will imitate or mirror people they are fond of or respect- this will enable better communication all round. The young person will trust and approach a familiar person (key person) rather than a wide range of carers on duty that day- it gives a personal touch and the key person will understand and use the rights words to communicate effectively.

All staff and young people need to communicate to get things done. If communication was lacking, things would not get done because people would not understand what was expected of them and more importantly what was needed to be done, so the setting would probably become dysfunctional. If anyone requires support, this needs to be communicated. By expressing our view or concerns we can receive the support we require.

We need to have access to information on the young person and communicate or share information when a child is new to the setting, this will enable us to get to know the young person and form an attachment with the child and work effectively and help them. We can gain knowledge of the young people in our care by reading the young persons care plan. These would include information about their identity, their likes and dislikes, any medical concerns, any development issues and risk assessments.

We communicate any physical concerns to the school nurse and the house manager. This is to help get the best for the child that we are looking after. Important information can be shared with other professionals. In our setting this can be done via a handover meeting, and by keeping accurate up to date logs. Or by the telephone or emails.

If a child needs help communicating you can speak or refer a child to the Speech and Language Therapist with parents permission, this will help you to gain strategies to help the young persons needs met.

Sometimes we need affective communication skills to pass on unpleasant information. For example a young person may be ill or they may have self harmed or absconded. This would involve professional and compassionate communication to family members and maybe health care professionals. All of our communication skills are necessary to build and maintain relationships with the young people we look after, their parents and carers. Also our work colleges and other care professionals. This in the long run will have a positive affect on our working practice.

4b. 3 Explain how children and young people use communication methods in different ways.

The usual ways able body young people communicate are

- speech- using their words to express themselves, ask for things, disclose things, to make accusation. Say sorry ect
- Body language- reading body language is an indicator to how a young person is feeling. A young person can also use their body language to hide

how they are actually feeling. They may “ square up to some one using aggressive gestures while on the inside being afraid.

- Eye contact - to look at some one in the face, to look at some one longly or to look away. Reading eye contact can be an indicator of shame, embarrassment. Or Distaste
- Touch- to reassure or to move away. To caress or to harm
- Sign language refers to signs made with one or both hands that have a specific meaning and may represent words or ideas. Signs can be recognised visually or tactilely by making the signs in the receiver’s hand. Sign can be used to express themselves or get the point across.

Young people today communicate via Mobile phones and laptops and tablets. By sending messages by text message or use of messenger services through

Facebook , Twitter, snap chat and Instagram Using these (and other) social media channels young people can communicate both positive and negative expressions and feelings to a wider audience of “ friends”. Using such tools as photographs (including selfies) and emojis they can communicate their emotional state or share activities and personal news and garner feedback from family, friends and their wider social network.

Forms of communication include

- Expressive communication refers to the way in which someone conveys thoughts. Methods of expressive communication include speaking, signing, gesturing, pointing, or crying.

- Receptive communication refers to the way in which someone interprets or understands a sender's communication. Listening and reading are examples of receptive communication.
- Pre-symbolic or non-symbolic communication refers to communication that does not use symbols such as words or signs. This kind of communication therefore does not have a shared meaning for others. Infants use pre-symbolic communication when they cry, laugh, reach, or point as a way of communicating their thoughts, and the receiver has to guess at the meaning of their messages. For example, babies may cry when they are hungry or reach for a toy when they want to hold it.
- Symbolic communication refers to communication that involves a shared message between the sender and the receiver. Examples of symbolic communication include speech, sign language, writing (print or Braille), picture communication systems, and tactile communication systems.

In my work setting the young people struggle to communicate in an effective way. They use verbal communication in a negative way. They can use foul language and loud voices in attempt to express how they are feeling.

Because they also struggle to understand how they are feeling they become more frustrated because they don't know how to express those feelings or they lack the vocabulary

#### 4c. 1 Describe barriers to communication and their impact

- Physical disabilities such as Visual Impairment - can have a huge impact on a young person's communication and social skills. Many conversations begin when people make eye contact (look each other in the eye) or use

some type of signal, such as a welcoming smile or a wave. People who have vision impairment may not always recognise our efforts to communicate with them because they may not be aware when we are looking, smiling or waving at them. People may need to work out ways of getting their attention by sound or touch..

Parents, teachers and friends can assist by using words in place of gestures. For example, it is important to say 'goodbye' rather than to wave, or to answer 'yes' rather than respond with a nod. Speech pathologists and specialist teachers can

- Emotional barriers and taboos. Some people may find it difficult to express their emotions and some topics may be completely 'off-limits' or taboo. Certain words or situations may triggers past memories.
- Lack of attention, interest, distractions, or irrelevance to the receiver can have an impact on a young person taking part in a conversation or taking direction.
- Differences in perception and viewpoint. Can have an impact on communication and learning. Having a different point of view could lead to arguments and not and not contributing to communication.
- Physical barriers to non-verbal communication. Not being able to see the non-verbal cues, gestures, posture and general body language can make communication less effective.



- Language differences and the difficulty in understanding unfamiliar accents

could lead to misunderstandings.

- Expectations and prejudices which may lead to false assumptions or stereotyping.

People often hear what they expect to hear rather than what is actually said and jump to incorrect conclusions.

- Cultural differences. The norms of social interaction vary greatly in different cultures, as do the way in which emotions are expressed. For example, the concept of personal space varies between cultures and between different social settings.

- The use of jargon. Over-complicated, unfamiliar and/or technical terms. Or the use of slang or words that the other person does not understand. This can make a conversation disjointed and make no sense to the receiver.

4c. 4 Explain how to access support or services to enable a child or young person to communicate effectively Each local authority educational department has access to a team of support specialists including speech and language therapists. Support can also be found on the internet through various specialist websites, including:

- The British Deaf Society
- The National Blind Children's Society

There are services such as

- Interpreters

- Translators
- Signers
- Advocator

And a range of aids, such as Induction loop systems help people who are deaf or hard of hearing pick up sounds more clearly, by reducing background noise. They work in a particular area when a person's hearing aid is switched to the ' T' setting (or loop programme). This allows them to focus on sounds - such as a person speaking - from the loop system microphone, rather than the internal hearing aid microphone, which will normally amplify all noises in the area. The system helps hearing aid users to communicate efficiently and confidentially, even in noisy environments where deaf and hard of hearing people often struggle

Augmentative and alternative communication There are a wide range of AAC systems and devices that are used by children who have visual impairments and additional disabilities. (AAC; also referred to as augmentative communication) refers to the use of an alternative method to help a child communicate. They can be unaided, such as the use of gestures or sign language, or aided, using a symbol system or a device, such as one that plays a recorded message when the child presses a switch.

Symbol systems can use pictures, objects, or other tactile symbols as a communication method. Each symbol has a meaning. For example, a cup (either a picture or an actual cup) may represent " I want something to drink." A piece of chain or picture of a swing may be used to represent " go to the park." Your child can point to a symbol on a board or in a book or hand

a symbol to someone to communicate expressively what he wants. Or you can show a symbol to your child to let him know what is going to happen next.

Communication boards or books are two types of symbol systems. The symbols can be displayed on a board for your child to point to, or they might be arranged in the pages of a book

Knowing about different alternative methods of communication can help you better understand the ways to help your child communicate.

#### 4e. 1 Explain the term confidentiality

Confidentiality is the protection of personal information Confidentiality is keeping a confidence between the client and the practitioner which is an important part of good care practice.

Confidentiality means not telling anyone, other than those who should or need to know, what an individual has said to the care worker or the problem that they have.

#### 4e. 2 Explain the conflict between confidentiality and disclosing concerns

A difficult situation could arise if a young person discloses something private and personal that raises concerns. On one hand you have a confidentiality issue but on the other hand you a potential safe guarding issue. In this situation safeguarding is our primary concern. Therefore we must follow the companies procedure relating to safeguarding and reach out to the designated safeguarding person .

According to the NSPCC - “ It’s important to ensure a child or young person understands their personal information will be treated respectfully and confidentially. This provides a safe space for them to be open and honest with the people caring for them. Establishing this form of trust is fundamental for the provision of safe and effective care. But when working with children and young people, it’s important to keep in mind two essential factors:

- timely information sharing is key to safeguarding and promoting the welfare of children. It enables intervention that crucially tackles problems at an early stage
- if a child is at risk or suffering significant harm, the law supports you to share information without consent. “

4e. 3 Explain the boundaries of own role and responsibilities in in relation to confidentiality disclosure - Information from [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419628/Information\\_sharing\\_advice\\_safeguarding](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419628/Information_sharing_advice_safeguarding)

States... The seven golden rules to sharing information:

1. Remember that the Data Protection Act 1998 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom

3. Obtain and verify the consent of the individual (or their family where appropriate) before sharing information, unless it is obvious that the individual would expect you to share information with them in this situation

information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.

3. Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

4. Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).

7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.