

PGCE/PCE (PCT) LESSON ASSESSMENT FORM



Student Teacher Name: Jodie Wilson Establishment: NUTSD (MTRC) Filer Date: 2.10.17

GRADE DESCRIPTORS: (When compared with an experienced teacher)

VG - Excellent awareness, understanding and application of different approaches to the planning and delivery of effective teaching and training.
G - Comprehensive awareness, understanding and application of different approaches to the planning and delivery of effective teaching and training.
S - Awareness, understanding and application of different approaches to the planning and delivery of effective teaching and training.
U - Needs attention through further development and improvement

Content of observation

(e.g. class, ability, number of students; topic; main activities and organisation; other features)

Working in Pairs/Groups

A. SUBJECT KNOWLEDGE

	VG	G	S	U
1 accuracy of knowledge of subject matter	/			
2 understanding of context e.g. scheme of work, programme of study	/			

B. LESSON PLANNING AND PREPARATION

	VG	G	S	U
1 detail and structure of plan	/			
2 clarity and suitability of learning objectives	/			
3 consideration of SpLDs, anticipated difficulties, health and safety, etc.	/			
4 resources selected, prepared, organised	/			
5 consideration of professional standards	/			
6 consideration of appropriate cross-cutting enhancement theme(s)	/			
7 consideration of active learning, learner engagement and skills development	/			

C. TEACHING

	VG	G	S	U
1 lesson start, e.g. outlining content, aims and objectives	/			
2 presentation: instructing, explaining, demonstrating	/			
3 effective questioning	/			
4 choice and variety of tasks/activities	/			
5 variety and suitability of teaching strategies/methods/approaches	/			
6 use of emergent technologies	/			
7 pace of lesson, use of time	/			
8 lesson ending, e.g. summarising, recapping key points, etc.	/			

D. CLASS MANAGEMENT AND CONTROL

	VG	G	S	U
1 presence and voice projection	/			
2 transitions - smooth	/			
3 awareness, vigilance and intervention	/			
4 use of praise and encouragement	/			
5 management of tasks/learners/work groups	/			

E. MONITORING AND ASSESSING STUDENTS' PROGRESS

	VG	G	S	U
1 monitoring understanding and progress during lesson	/			
2 suitability of assessment strategies/methods/approaches	/			
3 assessing achievement of learning objectives	/			
4 giving feedback and setting targets for progress	/			

F. EFFECTIVENESS

	VG	G	S	U
1 in setting high expectations for work	/			
2 in conveying enthusiasm and challenging students	/			
3 of students' engagement and learning in this lesson	/			

Observer Signature: Mark Filer 2.10.17

General Notes and Comments:

Planning and Preparation
A well constructed plan with the key information
A good overview in place - clear design for
learning and good choice of strategies

Development/Delivery

you have a clear and confident style of teaching
I also feel your teaching is relaxed, informed
and inclusive. You clearly have a part
in it and it's clear. It was difficult to see
you engage the learners in the group / focus
and further discussion. You do.

Penary / Conclusion

There was clear evidence throughout the
lesson - and the assessment driven on evidence

TARGETS FOR IMPROVEMENT

My suggestion are that you may want
to review the learning objectives which
are more detailed to the assessment strategy
and more detailed to the assessment strategy
and more detailed to the assessment strategy

A very important piece of learning executed
successfully - well done!

WORKING IN PARTNERSHIP WITHIN THE HEALTH AND SOCIAL CARE SECTOR



By Julia Williams

1

AIM OF THE LESSON

To consider the impacts on the following: service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership.

LEARNING OBJECTIVE

Describe and discuss partnership working and its impact on all those involved.

2

WHAT IS PARTNERSHIP WORKING WITHIN THE HEALTH AND SOCIAL CARE SECTOR ?

- Joint Working
- Integration
- A form of working together/ partnership

According to Community Care (2008) Partnership working is a matter of life and death!

3

v. Useful + informative
Review

WHY WORK TOGETHER?

Successful joint working between Health and Social care staff is a vital component of improving the lives of vulnerable adults. (Valios 2011).

Working together is seen to improve quality of life and independence
improving the efficiency of the care system as a whole
improving information sharing between professionals.

Integrated care is seen as significant according to NICE (2015)

The call for care to be more integrated, so there is a more person-centred approach to the care of older people developing long-term conditions, is reflected in the social care review (HSE, 2015).

According to Drakeford, (2016) partnership working benefits patients and communities by relieving pressure from hospitals while people can be treated at home.

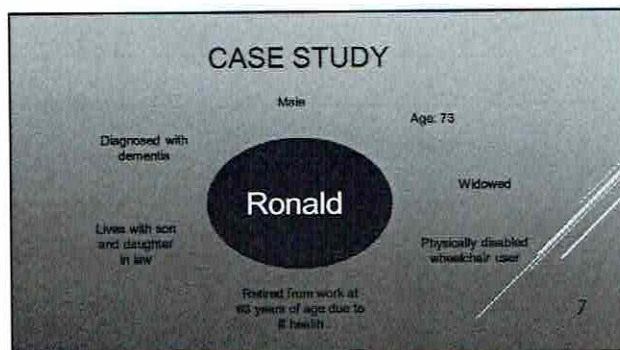
By working in partnership, it gives a greater focus on providing care and safety for people who need it most.

Effective communication is largely improved by using the new Information Technology (IT) system. It provides important information that is linked through data collected by local authorities, the NHS and many other partnerships.

ARE THERE ANY BARRIERS TO CARE?

There are several potential barriers to care including lack of communication that causes only a negative impact on the individual's health and well-being, also including:

- Delayed Transfers
- Care packages
- Miscommunication
- No communication
- Lack of resources
- Limited budgets
- Having individuals who are located in different areas (some will be far, isolated and far from the hospital)



CONTINUOUS CARE

- Due to Ron's diagnosis of Dementia he requires care assistance three times a day, at a cost of £175 a week for only 14 hours of care every week.
- Luckily, because of his previous successful work life, Ron can pay for this continuous health care.
- Unfortunately, Ron's health is deteriorating and the likely outcome for him would be to live in a care home, in the meantime, respite is on the agenda to enable the family to have a break. Respite is an opportunity for the family take a break from caring for their loved ones, it also allows the individual receiving care to have a break too.
- It is obvious that the family would need a break and have time to look after themselves too, while keeping jobs, preventing a hassle, and providing care for Ron, can be quite challenging.

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The impact of these side effects are putting dramatic strain on the family causing problems within their own personal lives, such as:

- Organising constant care at home – including doctor appointments, district nursing, social workers and private home care.
- Involving the family's privacy and personal space.
- Consultant appointments – taking Ron to his appointments can be an inconvenience.
- Ordering meals and picking up prescriptions.
- Planning weekly medication packs.
- Obviously to the family Ron comes first, but giving constant care can have a negative effect on university assignments, opportunities within work etc.
- More constant social life for the family, providing constant care.
- The lack of communication between all agencies regarding the continuous care for Ron also puts strain on the family – trying to make sure he receives all the care needed daily.

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The Positives and Negatives of Health and Social Care when Working Together

Positives:

- Better health outcomes for patients, residents or clients
- Improving the lives of vulnerable older adults
- More cost effective
- Streamlining arrangements, which prevent facilities from having to give the same information to each professional more than once (Vidler, 2004)

Negatives:

- Lack of communication
- Different structures
- Different perspectives in mind
- Delayed transfer of care begins from hospital (Vidler, 2011)

WHY ARE WE NOT ALREADY WORKING TOGETHER?

- The access of health care is often seen differently from the access to social care
- Health: First at the point of delivery
- Social: Needs assessed

Elford and Watt, 2009

What is integrated care and why is it important?



(The King's Fund, 2013)

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THE FUTURE OF ACCESS AND PATIENT EXPERIENCE

The vision of the Welsh Government (WG) in 2015 for the NHS was to create sustainable, reliable and easy to access services so that the NHS, Local Government, Third Sector and other agencies work together and commit to improve the quality of life for everyone, including individuals like Ron who can enjoy many years of high quality life.

The aim of the vision by 2020 is have:

- Access to primary care services to be easier.
- Provide more services through local pharmacies.
- Being available 24 hours a day, 365 days a year.
- Introducing a range of local services that need less travel.
- Education on the services provided and information on health issues are also available through telephone and online.

(Welsh Government, 2011)

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THE FUTURE OF ACCESS AND PATIENT EXPERIENCE

In order to achieve these aims, better improvements in health must be educated to the population so that future generations could improve many causes of poor health that put a greater demand on the NHS and partnerships.

(Welsh Government, 2011)

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RECOMMENDATIONS TO IMPROVE PARTNERSHIP WORKING IN THE FUTURE

- Communication between service user, carers and family members must improve due to many missed calls.
- Try to accommodate the needs at the specific times stated – to reduce anxiety levels.
- Recheck assessment every point, as that families are aware of what is going to happen next and when, as soon as possible.
- Make family aware of the timing of all care that is needed.

CONCLUSION

Achieving the Aim and Objective

- The AHA was to consider the impacts on the following: service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership.

BIBLIOGRAPHY

- Case UK (2017) *Respite care*. Available at: <http://www.casual.com/care-homecare/care-homecare-uk/> (Accessed: 20th September 2019).
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- Welsh Government (2011) *Welsh Government Together for Health*. Available at: www.wymru.gov.uk (Accessed: 20th September 2019).

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**Thank you very much for listening
and participating, I do hope that you
found this presentation educational.**

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Working in Partnership within Health and Social Care Sector –

Questions and Answers.

Question 1. What do you understand of partnership working within the health and social care sector?

Question 2. Why work together?

Question 3. Are there any barriers to care? If so, what are they?

✓ Good amenent tool

Question 4. What are the positives and negatives of health and social care when working together? The impacts?

Question 5. Why do you think they are not already working together?

Question 6. What recommendations would you put forward so that service's users and families similar to 'Ron's' situation, that can help them live a more manageable life?

Working in Partnership within Health and Social Care Sector –

Questions and Answers.

Question 1. What do you understand of partnership working within the health and social care sector?

- Two different sectors but a partnership exists to link the two in order to effectively provide the good standard of service to people that need it.

Question 2. Why work together?

- Teamwork and team building
- Shared knowledge
- Problem solving as a group.
- Integration

Question 3. Are there any barriers to care? If so, what are they?

- Access to care and availability
- Requirements to quality for care
- Cost
- Is it the right care?

Question 4. What are the positives and negatives of health and social care when working together? The impacts?

Positives	Negatives
• Achieving outcomes as a group	• Group members may clash due to conflicting opinions

Question 5. Why do you think they are not already working together?

- Access
- Funding
- Limited contacts

Question 6. What recommendations would you put forward so that service's users and families similar to 'Ron's' situation, that can help them live a more manageable life?

- Better communication
- Access at the right place and time
- Make families aware of what will happen and when, where, why who?
- Tell the family about the costs involved.

Working in Partnership within Health and Social Care Sector –

Questions and Answers.

Question 1. What do you understand of partnership working within the health and social care sector?

The help and Support that would be given.
healthcare meaning the NHS
social care, the societies working along
side the NHS.

Question 2. Why work together?

To give more help and support where
needed.

Question 3. Are there any barriers to care? If so, what are they?

- finances
- family
- care available (may not be much
care available.)

Question 4. What are the positives and negatives of health and social care when working together? The impacts?

Positives would be the extra care given.
Social & healthcare can work together to give extra help.

Negative, the two may clash with one another.

The impact would then be negative on the patient and may result in no help.

Question 5. Why do you think they are not already working together?

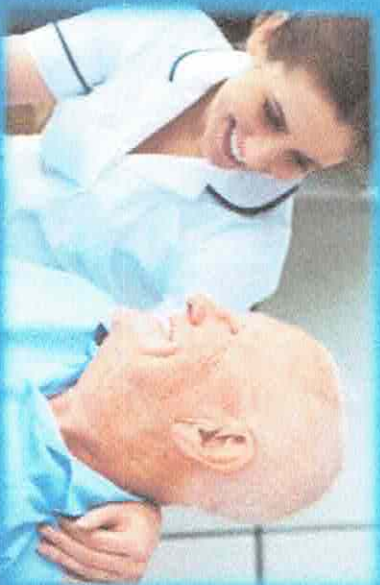
No funding.

Question 6. What recommendations would you put forward so that service's users and families similar to 'Ron's' situation, that can help them live a more manageable life?

* Communication between service users.

* Reducing assessment time plan.

WORKING IN PARTNERSHIP WITHIN THE HEALTH AND SOCIAL CARE SECTOR



By Julie Williams.

1

a lot of work has gone into this
before delivery V. good
2.10.11

AIM OF THE LESSON

To consider the impacts on the following: service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership.

LEARNING OBJECTIVE

Describe and discuss partnership working and its impact on all those involved.

WHAT IS PARTNERSHIP WORKING WITHIN THE HEALTH AND SOCIAL CARE SECTOR ?

- Joint Working
- Integration
- A form of working together/ partnership

According to Community Care (2008) 'Partnership working is a matter of life and death'

WHY WORK TOGETHER?

Successful joint working between Health and Social care staff is a vital component of improving the lives of vulnerable adults, (Vailios 2011).

- Working together is seen to improve quality of life and independence
- Improving the efficiency of the care system as a whole
- Improving information sharing between professionals.

Integrated care is seen as significant according to NICE (2015)

- The call for care to be more integrated, so there is a more person-centred approach for the increase of older people developing long term conditions as well as their social care needs (NICE, 2015).

- According to **Drakeford, (2016)** partnership working benefits patients and communities by relieving pressure from hospitals while people can be treated at home.
- By working in partnership, it gives a greater focus on providing care and safety for people who need it most.
- Effective communication is largely improved by using the new Information Technology (IT) system. It provides important information that is linked through data collected by local authorities, the NHS and many other partnerships.

ARE THERE ANY BARRIERS TO CARE?

There are several potential barriers to care including lack of communication that causes only a negative impact on the individuals health and well-being, also including;

- ▶ Delayed Transfers
- ▶ Care packages
- ▶ Medication
- ▶ No district nurses
- ▶ Low income
- ▶ Sharing Information is distributed in different ways (care will be fragmented and fall through the gaps).

(Pollard, Thomas, and Meirs, 2010)

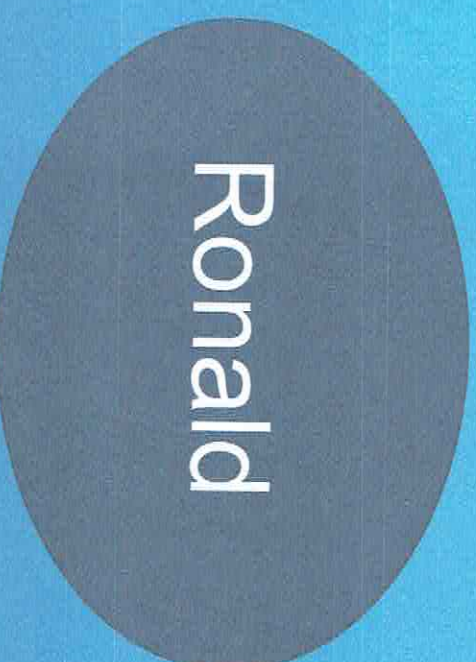
CASE STUDY

Male

Age: 73

Diagnosed with
dementia

Widowed



Ronald

Lives with son
and daughter
in law

Physically disabled
wheelchair user

Retired from work at
63 years of age due to
ill health

CONTINUOUS CARE

- Due to Ron's diagnosis of Dementia he requires care assistance three times a day, at a cost of £175 a week for only 14 hours of care every week.
- Luckily, because of his previous successful work life, Ron can pay for this continuous health care.
- Unfortunately, Ron's health is deteriorating and the likely outcome for him would be to live in a care home. In the meantime, respite is on the agenda to enable the family to have a break. Respite is an opportunity for the family take a break from caring for their loved ones. It also allows the individual receiving care to have a break too.
- It is obvious that the family would need a break and have time to look after themselves too, while juggling jobs, university, running a home, and providing care for Ron; can be quite challenging.
- As Dementia has no cure, and things can only get worse the need for Ron to have 24-hour care is essential – examples of why he needs constant care include;
 - Wandering
 - Hallucinating
 - Unpredictable/aggressive behaviour
 - Short term memory loss
 - Unsteady mobility – falling over
 - Assistance required with personal care and hygiene (Care UK, 2017).

The impact of these side effects are putting dramatic strain on the family causing problems within their own personal lives, such as:

- Organising constant care at home – including doctor appointments, district nursing, social workers and private home care
- Invading the family's privacy and personal space
- Consultant appointments – taking Ron to his appointments can be an inconvenience
- Ordering meals and picking up prescriptions
- Planning weekly medication packs
- Obviously to the family Ron comes first, but giving constant care can have a negative effect on university assignments, opportunities within work etc.
- Non existent social life for the family, providing constant care
- The lack of communication between all agencies regarding the continuous care for Ron also puts strain on the family – trying to make sure he receives all the care needed daily

The Positives and Negatives of Health and Social Care when Working Together

Positives;

Better health outcomes for patients, residents or clients

Improving the lives of vulnerable older adults

More cost effective

Streamlining assessments, which prevent families from having to give the same information to each professional more than once (Valios, 2011).

Negatives;

Lack of communication

Different structures

Different goals/outcomes in mind

Delayed transfers of older people from hospital (Valios, 2011).

WHY ARE WE NOT ALREADY WORKING TOGETHER?

- The access of health care is often seen differently from the access to social care:
- Health: Free at the point of delivery
- Social: Means tested

(Lloyd and Wait, 2005)

THE FUTURE OF ACCESS AND PATIENT EXPERIENCE

- ▶ The vision of the Welsh Government (WG) in 2015 for the NHS was to create sustainable reliable and easy to access service so that the NHS, Local Government, Third Sector and other agencies work together and commit to improve the quality of life for everyone, including individuals like Ron who can enjoy many years of high quality life.

The aim of the vision by 2020 is have:

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- ▶ Education on the services provided and information on health issues are also available through telephone and online.

(Welsh Government, 2011).

THE FUTURE OF ACCESS AND PATIENT EXPERIENCE

In order to achieve these aims, better improvements in health must be educated to the population so that future generations could improve many causes of poor health that put a greater demand on the NHS and partnerships.

(Welsh Government, 2011).

RECOMMENDATIONS TO IMPROVE PARTNERSHIP WORKING IN THE FUTURE

- ▶ Communication between service user, carers and family members must improve due to many missed calls.
- ▶ Try to accommodate the needs at the specific times stated – to reduce anxiety levels.
- ▶ Reduce assessment time plan, so that families are aware of what is going to happen next and when, as soon as possible.
- ▶ Make family aware of the costing of all care that is needed.

CONCLUSION

Achieving the Aim and Objective

- The **Aim** was to consider the impacts on the following: service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership.
- The **Objective** was to describe and discuss partnership working and its impact on all those involved.

BIBLIOGRAPHY

- Care UK (2017) *Respite care*. Available at: <http://www.careuk.com/care-homes/our-care-homes/respice-care> (Accessed: 20th September 2019).
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**Thank you very much for listening
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LESSON PLAN

TOPIC: Working in Partnership within the Health and Social Care Sector.		CLASS: Access Level 2
DATE: 02/10/2019	LENGTH OF LESSON: 30 minutes	NO IN CLASS: 7
ABILITY/SPECIAL EDUCATIONAL NEEDS: • None for this session		
AIM OF LESSON: • To consider the impacts on the following: service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership. <i>I would suggest 1-4 LO's in a hierarchy Ref to DGCare</i>		
LEARNING OBJECTIVES - The Learners Should Be Able To: • Describe and discuss partnership working and its impact on all those involved. ↓		
PREVIOUS KNOWLEDGE: • None-required		
ANTICIPATED DIFFICULTIES: • Time restraints - 30 minutes, maybe too short.		
RESOURCES/EQUIPMENT REQUIRED: • Computer; PowerPoint; Video link; Group discussions; Questions and answers papers. ✓		
HEALTH & SAFETY: • A risk assessment has been undertaken of room/set up.		

CROSS-CUTTING ENHANCEMENT THEMES

Please note any cross-cutting enhancement themes are embedded in the lesson and WHEN and HOW they are met:

The purpose of this lesson is to promote awareness of the issues' and barriers' of care that surround Partnership Working within the Health and Social Sector.

The following themes will be embedded throughout the whole lesson.

- It looks at a case study of a dementia service user and the difficulties and impacts that himself and his family endures on a daily basis.
- In addition, this presentation highlights a video link of 'The Kings Fund' and how Partnership Working should be managed.
- What the future plans are for the Welsh Government in order to tackle the ongoing issues that the service users, informal carers, health and social care professionals, organisations, agencies, through working in partnership.

LESSON DETAIL:

STAGE	FOCUS	STRATEGY	TIME
Introduction	Aim & objective	PowerPoint – Slide 2 Introduce the subject & aim and objective.	2 minutes
	What is Partnership Working	PowerPoint – Slide 3 Question and Answer handouts	5 minutes
Development	Why work together?	PowerPoint – Slides 4, 5 Deliver Presentation and Question and Answer session. Group discussions Recapping	12 minutes
	Barriers to care.	PowerPoint Slide - 6	
	Case Study	PowerPoint Slides – Slides 7& 8	
	Identify main impacts, positives and negatives.	PowerPoint – Slides 9, 10 & 11.	
	Why are they not working together	PowerPoint Slide - 12	
	The Kings Fund Video link.	PowerPoint Slide – 13.	5 minutes
	The future of access and patient access experience.	PowerPoint Slides – 14 & 15.	6 minutes
Conclusion	Recommendations to improve partnership working.	PowerPoint Slide – 16.	
	- Final summary -Working in Partnership - Recap of Aim and Objective.	PowerPoint Slide – 17. <i>V. Good.</i>	

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ASSESSMENT STRATEGIES USED (WHEN and HOW):

Questions and Answers (Introduction)

Group Discussions & Questions and Answers (Development of main topic)

Observations (Throughout lesson)

1.1 part

Formative & Summative - Stages