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Introduction

Health and social care services in the United Kingdom aim to promote individuals' health, wellbeing, independence and quality of life through the delivery of person-centred care (Care Quality Commission, 2024). Older adults living with long-term conditions such as dementia often require coordinated support from a range of health and social care professionals to ensure their physical, emotional and social needs are met (NICE, 2022). This report focuses on the case of Mrs Thompson, an 84-year-old woman recently discharged from hospital following pneumonia who has mild dementia and receives domiciliary care. Her recent missed medication and increased confusion highlight the importance of effective communication, accurate record keeping and collaborative working between professionals. The report will discuss how these three aspects contribute to safe, effective and person-centred care while considering relevant legislation and professional responsibilities within the UK health and social care sector.

Section 1: Communication

The Importance Of Effective Communication in Mrs Thompson’s Care

For Mrs Thompson, effective communication is fundamental as she has mild dementia, has recently been discharged from hospital after pneumonia and has missed two days of her medication. These factors increase the risk of confusion and could affect her health if information is not communicated clearly. By communicating effectively, health and social care professionals can better understand Mrs Thompson's needs and ensure she receives the right support at the right time (NICE, 2022). Effective communication also helps to build trust, allowing Mrs Thompson to feel respected, listened to and involved in decisions about her care (Care Quality Commission, 2024).

When communicating directly with Mrs Thompson, professionals should adapt their approach to meet her individual needs. They should use simple language, speak slowly and clearly, maintain eye contact and give her enough time to process information and respond. It is also important to check her understanding rather than assuming she has understood instructions, particularly when discussing medication or appointments. These approaches can reduce misunderstandings and help Mrs Thompson remain as independent as possible. The Equality Act 2010 supports this by requiring services to make reasonable adjustments so that people are not disadvantaged because of protected characteristics, including age

and disability. In Mrs Thompson's case, adapting communication to account for her dementia helps ensure she receives fair, respectful and person-centred care (Equality Act 2010).

Communication with Mrs Thompson's family is equally important. Family members can provide valuable information about her daily routine, behaviour and any changes they have noticed since her discharge from hospital. This information can help professionals make informed decisions and identify concerns before they become more serious. At the same time, staff must respect Mrs Thompson's privacy and only share information with her consent or where it is appropriate to do so in line with professional guidance. Working closely with family members helps create a more consistent approach to Mrs Thompson's care and supports better health outcomes. A systematic review by Braithwaite Stuart, Jones and Windle (2022) found that involving family members in communication can help maintain meaningful relationships, improve understanding of a person's needs and support more person-centred dementia care (Braithwaite Stuart, Jones and Windle, 2022).

The Shannon and Weaver communication model explains communication as a process where a sender delivers a message through a channel to a receiver, with the possibility of "noise" interfering with the message (Shannon and Weaver, 1949; University of Wales Trinity Saint David, 2026). In Mrs Thompson's situation, her dementia may act as a form of noise, making it more difficult for her to understand or remember important information. Environmental distractions, medical terminology or speaking too quickly could also affect communication. Health and social care professionals can reduce this by using clear language, repeating important information when necessary and checking that Mrs Thompson has understood the message correctly. Recognising these potential barriers allows professionals to adapt their communication to Mrs Thompson’s individual needs, helping to reduce misunderstandings and support safer, more person-centred care.

Section 2: Administrative Skills

The Importance Of Good Administrative Skills Within Professional Practice

Good administrative skills are essential in health and social care because they help professionals provide safe, effective and well-organised care. One of the most important administrative responsibilities is maintaining accurate record keeping. In Mrs Thompson's case, records should include her medication administration, daily care notes, hospital discharge information, incident reports and any changes in her physical or mental health. Accurate records allow professionals to monitor her condition, identify any concerns and make informed decisions about her care. For example, when Mrs Thompson missed two

days of her medication and became increasingly confused, documenting this information accurately ensured that the incident was recognised, reported and followed up with a medication review. If records are incomplete or inaccurate, important information could be missed, increasing the risk of medication errors or further deterioration in her health (Nursing and Midwifery Council, 2018).

Good record keeping also supports communication between the different professionals involved in Mrs Thompson's care. As she receives support from domiciliary carers and may also be seen by her GP, community nurses and other healthcare professionals, each person involved relies on accurate records to understand her current needs and any recent changes in her condition. Clear documentation helps ensure continuity of care, particularly during handovers or following her discharge from hospital. Research by Blair and Smith (2012) highlights that accurate and timely documentation improves communication between professionals, supports safer clinical decision-making and reduces the risk of errors in patient care (Blair and Smith, 2012). Records should always be factual, written as soon as possible after an event and based on what has been observed rather than personal opinions (Nursing and Midwifery Council, 2018). This creates a reliable record that professionals can trust when planning and reviewing Mrs Thompson's care.

Maintaining confidentiality is another important administrative responsibility. The Data Protection Act 2018 requires organisations to collect, store and share personal information lawfully, fairly and securely (Data Protection Act 2018). Mrs Thompson's medical records contain sensitive information, including details about her dementia, medication and care needs. This information should only be accessed by professionals who are directly involved in her care and should not be shared with others unless there is a lawful reason to do so or Mrs Thompson has given her consent. Protecting confidential information helps maintain trust between service users and professionals while ensuring that personal information is handled responsibly.

The Care Act 2014 places a duty on health and social care organisations to promote an individual's wellbeing and protect adults who may be at risk of harm. Mrs Thompson's missed medication and the incident where she was found outside in cold weather highlight the importance of maintaining accurate records and reporting concerns promptly. By documenting incidents correctly and sharing relevant information with appropriate professionals, staff can ensure that risks are identified early and appropriate action is taken. Overall, strong administrative skills, supported by legislation and professional standards, play a vital role in protecting Mrs Thompson's safety, supporting effective decision-making and ensuring that she receives high-quality, person-centred care.

Section 3: Collaborative Working

Fostering Effective Collaboration

Collaborative working is essential in health and social care because it enables professionals from different organisations and disciplines to work together to provide safe, effective and person-centred care. Mrs Thompson's needs are complex due to her recent hospital discharge, mild dementia and difficulties managing her medication independently meaning no single professional can meet all of her health and social care needs. As a result, her care requires input from a multidisciplinary team (MDT), including her GP, community nurses, domiciliary care workers, a pharmacist and the local council. Working together allows these professionals to share important information, identify concerns early and respond quickly to changes in Mrs Thompson's condition, helping to improve her overall health and wellbeing (NICE, 2022; NHS England, 2024). Research by Körner (2010) found that effective multidisciplinary teamwork improves communication between professionals, supports better decision-making and contributes to improved outcomes for service users (Körner, 2010).

One way to encourage effective collaborative working is through regular communication, shared care plans and accurate record keeping. When professionals have access to up-to-date information, they can make informed decisions and provide consistent care. For example, after Mrs Thompson missed two days of her medication and became increasingly confused, carers could document the incident, inform her GP and pharmacist, and arrange a medication review. This joined-up approach reduces the risk of repeated medication errors and helps ensure Mrs Thompson receives the support she needs (Care Quality Commission, 2024).

Despite its benefits, collaborative working can present challenges. Delays in communication, differences in professional opinions and concerns about confidentiality can sometimes affect the quality of care. These challenges can be addressed by holding regular multidisciplinary meetings, maintaining clear and accurate records and sharing information appropriately in line with the Data Protection Act 2018 (Data Protection Act 2018). Working collaboratively and following professional guidance, care professionals can provide coordinated care that promotes Mrs Thompson’s safety, independence and quality of life, and also helps prevent avoidable hospital readmissions and supports her to remain living independently for as long as possible (NHS England, 2024).

Conclusion

In conclusion, effective communication, good administrative skills and collaborative working are all essential in providing safe, person-centred care for Mrs Thompson. Clear communication helps professionals understand her needs, involve her in decisions about her care and reduce the risk of misunderstandings, particularly considering her mild dementia. Accurate record keeping and maintaining confidentiality ensure that important information is shared appropriately and that professionals can make informed decisions to support her wellbeing. Collaborative working between health and social care professionals also plays a key role in providing coordinated care, allowing concerns to be identified early and appropriate action to be taken. By applying relevant legislation, following professional standards and working together effectively, professionals can promote Mrs Thompson's safety, independence and quality of life. Overall, these three areas work together to ensure that Mrs Thompson receives high-quality care.

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