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INTRODUCTION:

A stroke happens when the brain's blood supply is cut off due to a blockage or bleeding, which damages brain tissue. A stroke can have profound impact on a 68-year-old person's body, mind, and emotions. Physically, it might result in balance and coordination issues, weakness or paralysis on one side of the body, and difficulties carrying out daily tasks. Memory loss, trouble focusing, and poor problem-solving abilities are examples of cognitive effects. Communication is also frequently hampered by speech and language issues. Because their independence and way of life have changed, stroke survivors may feel depressed, anxious, or frustrated. Recovery varies and frequently calls for a multidisciplinary strategy that includes medical care, rehabilitation, and continuing assistance to enhance quality of life(Albert, K, 2023).

Discuss the importance of effective communication within the context of Mr Ahmed's care.

Effective communication with service user and his family involves tact, deference, and adherence to moral and legal standards, especially those found in the Equality Act of 2010(Ndzendze, B, 2024). This Act guarantees that service user receives fair treatment and communication that is suited to his needs by protecting people from discrimination based on traits including age, disability, race, and language ability(Wilson, R. A, et al, 2021).

First, it's important to comprehend service user post-stroke situation. It is crucial to use straightforward language because the stroke may impair his cognitive and communication abilities. Communication must be modified to reduce misunderstandings because he speaks Bengali as his primary language and has poor English skills. Although his wife, who speaks English well, serves as a crucial conduit for communication, care must be made to interact directly with service user in order to maintain his independence and dignity(Maniruzzaman, M, 2025).

One of the fundamental tenets of the Equality Act 2010 that applies here is making reasonable accommodations for communication in order to get around obstacles brought on by language and disability (Leigh, J, et al, 2020). Service user this would entail using translated information, hiring multilingual employees or qualified interpreters, and utilising gestures or visual aids to enhance comprehension. Additionally, it's critical to treat him with tolerance and respect and to refrain from making assumptions based only on his language abilities or impairment.

1. Clearly encode messages by using straightforward: non-jargon language and idioms that are appropriate for the target culture. Instructions on personal care or medication, for instance, must be divided into digestible steps (Collis, H, 2008).

2. Use the right channels: In-person interactions are ideal, and when feasible, they should be accompanied by written Bengali translations or visual aids. Direct communication with service user is still crucial, even if the wife can help with interpretation when she is around (Timmis, K., Baquero, F, et al, 2025).

3. Carefully decipher messages: To determine whether service user is understanding or confused, pay attention to his verbal and nonverbal signs. Information should be clarified and repeated as necessary (Mariel, P., Hoyos, et al, 2020).

4. Seek and provide feedback: Encourage questions from both service user and his wife to confirm comprehension

5. Contextual awareness: Understand the emotional and physical context of service user post-stroke state, his cultural background, and his family dynamics to ensure respectful interaction (Chan, C. K. Y., & Colloton, T, 2024).

In conclusion, to this research Berol's model can help significantly in the case of : service user, a 68-year-old stroke sufferer with low English proficiency, benefits from improved communication according to Berlo's (1960) communication model. His wife, who speaks English well, plays a crucial role in communicating with the care team, which consists of a speech therapist, district nurse, and general practitioner. In order to facilitate Mr. Ahmed's comprehension and improve carer teamwork, the model places a strong emphasis on concise, straightforward messaging, a variety of channels, and customised communication.

Discuss the importance of good administrative skills within professional practice within the context of Mr Ahmed's care.

Good administrative skills are crucial in health and social care settings, especially when managing complex cases like that of service user, whose first language is Bengali and who experiences communication challenges (Hahid, S., Hogeveen, S., Sky, et al, 2023). Effective administration enhances coordinated care, ensures accurate record-keeping, promotes patient safety, and upholds legal and ethical standards, all essential for delivering high-quality care (Rony, M, K, 2023).

In service user situation, strong administrative skills enable clear communication and coordination among his multidisciplinary team, which includes a GP, district nurse, speech and language therapist, and care agency. As service user has limited English and relies on his wife for communication, maintaining accurate and comprehensive records is vital. It guarantees that all professionals involved access consistent and up-to-date information regarding his care needs, treatment plans, and any concerns. This meticulous approach helps reduce misunderstandings and errors, such as recent incidents of missed home visits and delays in medication administration. Record keeping is a fundamental administrative responsibility that must be performed with precision. Following the Data Protection Act 2018, which incorporates the General Data Protection Regulation (GDPR), all personal and sensitive information of service users must be managed lawfully, fairly, and transparently. Health and social care professionals are mandated to maintain records that are accurate, complete, and current. These records need to be securely stored to prevent unauthorized access and shared only with individuals who have a legitimate need to know, thereby respecting the service user's confidentiality and privacy(Lacity, M, C, et al, 2024). Practically, this entails detailed documentation of all aspects of service user care, including his medication schedule, visits by healthcare professionals, speech therapy sessions, and interactions with the care agency. Any incidents, such as a missed visit, should be documented factually, specifying what occurred, the impact on service user wellbeing, and the actions taken subsequently. Such thorough documentation is essential for transparency, accountability, and ongoing quality assurance(*Los Angeles Magazine*, 2003).

Moreover, effective administrative practices ensure compliance with health and social care policies and legislation, notably the Health and Social Care Act 2012 and the Care Quality Commission (CQC) standards, which prioritize effective and person-centred care(Glenngård, A, 2017). By maintaining detailed and confidential records, the multidisciplinary team can monitor service user progress, respond adeptly to his evolving needs, and provide coordinated interventions that honour his cultural and linguistic background(Rosser, P, M, et al, 2015).

However, stroke remains a complex clinical condition that requires health professionals to work together to bring to bear their collective knowledge and specialist skills for the benefit of stroke survivors. Multidisciplinary team working is regarded as fundamental to delivering effective care across the stroke pathway. This paper discusses the contribution of team working in improving recovery at key points in the post-stroke pathway(CLARKE, D.J et al, 2015). This can help the healthcare workers to get better understanding about Mr Ahmed conditions and support in his daily activities.

In conclusion, proficient administrative skills are foundational for effective communication, continuity of care, and legal compliance, ensuring service user receives timely and appropriate support while safeguarding his rights under data protection laws. This comprehensive approach fosters trust between service user

and the care team, ultimately promoting positive health outcomes(Freeman-Hicks, S, L, 2025).

Discuss the importance of working collaboratively with other professionals involved in Mr Ahmed's care, such as the GP, district nurse, domiciliary care workers and the speech and language therapist.

Several strategies are essential to promoting productive cooperation in multi-agency work for Mr. Ahmed's case:

Clear Communication: To overcome linguistic hurdles resulting from service user weak English competence, use straightforward language and, when necessary, hire multilingual workers or expert translators. This guarantees that the family and all agencies are aware of his care requirements.

Shared Goals and Care Planning: The hospital, domiciliary care, social services, and language assistance should all agree on shared objectives that are centred on service user recuperation, self-sufficiency, and general well-being. These objectives should be recorded in a shared care plan that is available to all parties.

Frequent Multi-Disciplinary Meetings: Coordinated decision-making, information sharing, and progress reviews are made possible by planned meetings with social workers, healthcare professionals, carers, and family members.

Respect for Individual and Cultural Needs: Acknowledging service user linguistic and cultural preferences promotes person-centred care and trust.

Communication breakdowns, conflicting priorities, and resource constraints are common issues in multi-agency cooperation. Techniques for overcoming these obstacles include: To overcome linguistic and cultural divides, interpreters and cultural mediators are used. Clearly defined roles and responsibilities prevent duplication and care gaps(Loizides, F, Winckler, et al, 2020).

Conflict Resolution Mechanisms: Methods for resolving disputes in a positive way. Training and Awareness: To improve understanding across agencies, cross-agency training on stroke treatment, cultural competency, and teamwork((Willis et al., 2023)

CONCLUSION:

Service user first language is Bengali, and although he can understand some English, he has trouble with sophisticated interactions. His wife, who speaks English well, serves as a crucial go-between, helping service user and the care team communicate. In order to properly meet his health needs, this support system is essential. Overall, service user is able to manage his recuperation at home with dignity and safety thanks to the coordinated care and language support,

underscoring the significance of culturally sensitive care and family involvement in post-stroke rehabilitation. Service user, a 68-year-old stroke sufferer, was just released from the hospital to complete his recuperation at home. meal preparation, medicine administration, and personal care. His mobility demands are met by living in a ground-floor flat with his spouse. He receives domiciliary care three times a day to help with everyday living activities, with an emphasis on meal preparation, medication administration and personal care.

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