



Module name: Introduction to Health and Social Care

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References

1. Introduction

High-quality professional practice is essential in health and social care to ensure the public have access to safe, effective person-centred support. This report explores the care Mrs Thompson; an elderly woman recently discharged from hospital with pneumonia, who lives independently and receives domiciliary care. Living with mild dementia, episodes of missed medication and an incident of being outside appropriately dressed, highlight the importance of clear communication and accurate record keeping and effective collaboration between agencies. These areas are significant due to failures in information sharing and communication can impose risks to Mrs Thompsons health and safety. This report will first examine effective communication with Mrs Thompson and her support system, including dignity, equality and necessary adjustments in accordance with the Equality Act 2010, alongside one communication model. Additionally, it will examine record keeping, administrative skills and confidentiality under the Data Protection Act 2018. Finally, it will discuss how professionals can work collaboratively, addressing any issues or challenges that may arise within multi-agency care.

2. Importance of effective communication

Effective communication is crucial in health and social care services as it supports person centred care, provides safety and helps professionals to understand an individual's needs and requirements. This is particularly important for Mrs Thompson, since she is an 84-year-old who was recently discharged from hospital with a diagnosis of pneumonia and lives alone with domiciliary care support twice daily. Her mild dementia, difficulties remembering to take medication and episode of being found outside in the cold inappropriately dressed indicate that clear and effective communication are vital to identify risks and ensure her care needs are appropriately met.

Upon communicating with Mrs Thompson, professionals should approach this with clear, simple and mindful language, allowing adequate time for her to process information and give a response. Due to having mild dementia, this could affect her understanding, memory and ability to communicate any needs. Therefore, repeating information may be necessary or communicated in smaller sections to support her understanding. Professionals within health and social care should also use active listening and study any non-verbal communication, such as body language and facial expressions, as these observations may provide additional insight into Mrs Thompsons thoughts and feelings. Respecting her dignity and including her

in in decisions regarding her care is essential to promoting her autonomy and supporting person-centred practice.

Communication between professionals and Mrs Thompsons family could also contribute to effective support, particularly determining changes in her behaviour, adhering to her medication or inability to solely manage on her own. However, professionals must always respect confidentiality towards Mrs Thompsons information and her rights with whom this is shared with. Where necessary, consent should be given by Mrs Thompson prior to sharing personal information, "For consent to be legally valid, the individual must be informed, must have the capacity to make the decision in question and must give consent voluntarily" (NHS England, 2022), unless it is lawfully necessary to disclose information for hers or others safety and protection from harm.

Moreover, the Equality Act 2010 aims to avoid unlawful discrimination and make reasonable adjustments where appropriate, supporting equal access to care for the public (Equality Act 2010). In Mrs Thompsons case, adjustments such as repeating information, using clear language and allowing sufficient time during conversations may help to identify and address her individual communication needs.

Berlo's (1960) SMCR model of communication can be used to understand communication involving Mrs Thompson and health and social care professionals and how this could be made more efficient. " David Berlo's SMCR Model (1960) proposes that there are five elements within both the source/ encoder and the receiver/decoder which will affect fidelity." (Rudovick, n.d.). The model used consists of four elements: Source, Message, Channel and Receiver. In Mrs Thompsons case, professionals should be the source, providing clear information with regards to her care, medicinal and heath requirements. As Mrs Thompson is the receiver, professionals should therefore check that she has understood the information correctly. Furthermore, applying Berlo's model can reduce misunderstanding, promote her inclusion in care decisions and facilitate person-centred practice.

Overall, clear and effective communication is pivotal to Mrs Thompsons care needs.

3. Importance of good administrative skills

A good level of administrative skills is fundamental within professional health and social care practice as they ensure effective, safe and person-centred care. " High-quality admin has the potential to improve patient experience, reduce inequalities, promote better care – and contribute to a better working environment for staff" (Ewbank et al., 2021).

Regarding Mrs Thompson, accurate record keeping is essential due to her diagnosis of mild dementia and that she has missed medication. Professionals would be required to ensure care records are accurate, up to date and comprehensive, documenting medication, any changes to her needs, incidents and potential risks to herself or others. This enables professionals to work collaboratively with effective communication to make informed decisions based on care needs to support Mrs Thompson in remaining safe.

The Data Protection Act 2018 suggests an important legal framework for personal information and how it is to be handled by professionals. Mrs Thompsons medical information, including medication records and details relating to her diagnosis would constitute health information, therefore would require extra protection as sensitive personal data. This act works alongside the UK General Data Protection Regulation (UK GDPR), requiring organisations to have a valid legal basis for processing personal sensitive information and appropriate conditions upon processing special category data (Data Protection Act 2018). The Information Commissioner's Office (ICO) outlines that health and social care information on patients should only be processed when there are a suitable lawful basis and appropriate conditions are met for processing special category data (Information Commissioner's Office, 2026).

From a practical perspective, this means professionals caring for Mrs Thompson should ideally be collecting and recording relevant information in relation to her care. Security of records should be in place, and access is to be restricted to authorised individuals only. For example, details of her incidents with missed medication or cognitive challenges should not be discussed with anybody who does not have a legitimate reason to know such information. Adhering to these principles supports the protection of Mrs Thompsons dignity, privacy and confidentiality, in addition to reducing the risk of sensitive information being disclosed inappropriately.

The Caldicott Principles provide an additional policy framework specifically relevant to health and social care. They highlight that professionals should have a clear justification for using confidential information and should only provide access to those who require the necessary information to perform their role (National Data Guardian, 2020). However, confidentiality does not mean that information can never be shared. The principles emphasise that sharing relevant information can be vital in supporting safe and effective care for individuals (National Data Guardian,2020). Therefore, any information involving Mrs Thompsons medication, risks and specific needs can be shared with appropriate professionals dealing with her care, and her wider support system where necessary and with consent, ensuring they avoid unnecessary disclosure.

Overall, following the Data Protection Act 2018 and Caldicott Principles ensures accurate information for Mrs Thompson, in addition to being kept secure and shared only when appropriate. Effective administrative practice enables safe and coordinated care while ensuring that her confidentiality and rights are fully respected.

4. Importance of working collaboratively

Working in collaboration with other professionals within health and social care is significant for Mrs Thompson to receive safe, coordinated and personalised care. Professionals supporting her care could include her GP, community nurses and domiciliary care workers. Each of these roles have different duties of care and areas of expertise. Effective collaboration allows applicable information to be shared and responded to appropriately for shifts in Mrs Thompsons health, care needs and helps identify any risks that may arise. SCIE (2022) demonstrates that multi-disciplinary teams strengthen collaboration between professionals, enhances better coordination and helps ensure that care remains person-centred.

Collaborative working can be supported using clear communication, accurate record keeping and regularly exchanging relevant information. For example, any concerns should be communicated by professionals to relevant members of care teams when supporting Mrs Thompsons health needs and if any changes are required. Regular reviews of care plans and updates are essential for everyone involved to understand their responsibilities and working towards the same goals. Inclusion of Mrs Thompsons decisions regarding her care where possible, ensures that her needs remain central to the process.

Nevertheless, multi-agency working can present challenges, including working practice differences, poor communication and delays in information sharing. These issues arising, could result in duplication of work, misunderstandings and important changes in Mrs Thompsons condition being overlooked.

Professionals can overcome these challenges by having clear responsibilities, open communication and accurate records. Regular meetings will help review Mrs Thompsons progress and highlight concerns. Recognising each professional's role strengthens collaboration and ensures she receives safe, well-coordinated care.

5. Conclusion

To conclude, providing effective care for Mrs Thompson requires a person-centred approach that identifies her individual needs, rights, preferences and overall wellbeing. Consistent communication and collaborative working between health and social care professionals are pivotal to ensuring important information is shared and any changes in her condition are recognised and addressed appropriately. Record keeping accuracy and up to date information also supports continuity of care and ensures professionals understand their duties. In addition, following both Data Protection Act 2018 and Caldicott Principles contributes to Mrs Thompsons personal information being securely handled and shared appropriately when necessary. The Equality Act 2010 also supports fair, equal accessibility to care by protection patients from discrimination and enabling reasonable adjustments where appropriate. Overall, integrating these principles ensures professionals work collaboratively while maintaining Mrs Thompsons dignity, confidentiality and personal needs, promoting safe and effective person-centred care that meets Mrs Thompsons individual requirements and protects her overall wellbeing.

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