

WABIWA MUKA (2008415)

INTRODUCTION TO HEALTH
AND SOCIAL
CARE(LCHS4003-BIRM)

BERNICE EJIOGU

COMMUNICATION
ADMINISTRATIVE SKILLS AND
COLLABORATIVE WORKING

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INTRODUCTION

This report is about Mrs Thompson, who is an older woman with health and social care needs. She lives at home and receives support from different health and social care professionals. Because of her age and health conditions, she needs help to stay safe, healthy, and independent. She may also face difficulties with communication, managing her health, and carrying out everyday tasks. This means it is important that everyone involved in her care works together and provides the right support.

Health and social care workers need a range of skills to provide good quality care. Three of the most important skills are communication, administrative skills, and collaborative working. These skills help professionals understand the needs of the person they are caring for, share important information, and work together to make sure the individual receives safe and effective care. When these skills are used well, they help build trust, reduce mistakes, and improve the person's quality of life.

The purpose of this report is to explain why communication, administrative skills, and collaborative working are important when caring for Mrs Thompson. It will also explain how health and social care workers use legislation and professional guidance to provide safe, person-centred care.

Communication

Communication is one of the most important skills in health and social care. It is used every day when professionals speak to service users, families, and other members of the care team. Good communication helps build trust and makes people feel respected and valued. It also helps professionals understand what the person needs and how they are feeling. If communication is poor, mistakes can happen, which could affect the person's health and wellbeing (NMC, 2018).

In Mrs Thompson's case, good communication is very important because she may find it difficult to understand information or explain how she is feeling. This could be because of her age, illness, hearing problems, or memory difficulties. Health and social care workers should speak clearly, use simple language, and give Mrs Thompson enough time to answer questions. They should also listen carefully and make sure they understand what she is saying before making decisions about her care.

It is also important to use person-centred communication. This means treating Mrs Thompson as an individual and involving her in decisions about her care. Professionals should ask about her wishes, respect her opinions, and explain information in a way she can understand. When people are involved in decisions about their care, they often feel more confident and independent, which can improve their wellbeing (NICE, 2023).

Sometimes there are barriers that make communication more difficult. Mrs Thompson may have hearing loss, poor eyesight, confusion, or memory problems. These barriers

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can make it harder for her to understand information or tell professionals what she needs. Health and social care workers should recognise these barriers and find ways to overcome them.

If English is not Mrs Thompson's first language, a professional interpreter should be used. This helps make sure information is translated correctly and reduces the risk of misunderstandings. It is better to use a trained interpreter than a family member because confidential information should remain private. Professionals can also use pictures, written information in large print, hearing aids, or communication boards if these would help Mrs Thompson understand information more easily.

The Equality Act 2010 says that everyone should be treated fairly and should not be discriminated against because of their age, disability, race, religion, or other protected characteristics (Equality Act, 2010). This means health and social care workers must make reasonable adjustments if Mrs Thompson needs extra support with communication. For example, they may provide written information in larger print or make sure appointments are held in a quiet environment if she has hearing difficulties.

One communication model that can be used is the Shannon and Weaver Communication Model. This model explains that communication starts with a sender giving a message to a receiver through a communication channel. The receiver then gives feedback to show whether they have understood the message (Shannon and Weaver, 1949).

For example, a nurse may explain to Mrs Thompson how and when to take her medication. After listening, Mrs Thompson repeats the instructions back to the nurse. This allows the nurse to check that she has understood everything correctly. If there is any confusion, the nurse can explain the information again using different words or provide written instructions. This helps reduce mistakes and keeps Mrs Thompson safe.

Overall, good communication is essential in Mrs Thompson's care. It helps professionals understand her needs, build a positive relationship with her, and provide care that is safe, respectful, and person-centred. Good communication also helps different professionals work together and ensures Mrs Thompson receives the best possible support. good communication is not only about talking to people but also about listening carefully, showing respect and making sure the person understands the information they are given. This helps Mrs Thompson feel involved in her care and allows professionals to meet her individual needs (NMC,2018)

Administrative Skills and Record Keeping

As well as good communication, health and social care workers need good administrative skills. One of the most important parts of this is keeping accurate records. Every time Mrs Thompson receives care, the information should be written

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down clearly and correctly. This could include details about her medication, any treatment she has received, changes in her health, or concerns raised by staff or family members. Keeping records up to date means that everyone involved in her care knows what is happening and can provide the right support (NMC, 2018).

For Mrs Thompson, accurate record keeping is very important because she is cared for by different professionals. Her GP, nurses, carers, social worker and other healthcare staff all need the same information so they can work together. If one member of staff notices that Mrs Thompson has become more confused or has had a fall, this should be recorded straight away. This allows the next professional who visits her to understand what has happened and decide if she needs more support or treatment.

Keeping good records also helps to keep Mrs Thompson safe. For example, if she has an allergy to a certain medicine, this should always be written in her records. If this information is missing, she could be given the wrong medication, which could make her very ill. Accurate records also help staff notice changes in her health over time. If her mobility becomes worse or she starts eating less, these changes can be recorded so that action can be taken before her condition gets worse.

Poor record keeping can cause serious problems. If information is forgotten, written incorrectly or not updated, professionals may make decisions based on the wrong information. This could lead to delays in treatment, medication errors or poor care. It can also make it difficult for staff to understand Mrs Thompson's needs, especially if different professionals are involved in her care (Care Quality Commission, 2023).

Health and social care workers also have a responsibility to keep Mrs Thompson's personal information confidential. The Data Protection Act 2018 explains that personal information must be stored safely and only shared with people who need it to provide care (Data Protection Act, 2018). For example, staff should not discuss Mrs Thompson's medical condition with friends, neighbours or anyone who is not involved in her care.

The Caldicott Principles also help professionals decide when confidential information can be shared. They explain that information should only be shared when it is necessary and that only the information needed should be passed on. This helps protect Mrs Thompson's privacy while allowing professionals to work together and provide safe care (National Data Guardian, 2020).

The Nursing and Midwifery Council (NMC) also says that nurses and other registered professionals must keep clear, accurate and up-to-date records because they are an important part of safe practice (NMC, 2018). The Care Quality Commission (CQC) expects health and social care services to do the same because good record keeping helps improve the quality-of-care people receive (Care Quality Commission, 2023). Overall, good administrative skills are a very important part of caring for Mrs Thompson. Accurate records help professionals communicate with each other, reduce the risk of

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mistakes and make sure she receives safe, person-centred care. They also help everyone involved in her care understand her needs and respond quickly if her health changes.

CONCLUSION

To conclude, this report has shown why communication, administrative skills and collaborative working are all important when caring for Mrs Thompson. Good communication helps health and social care professionals understand her needs and make sure she feels listened to and respected. It also allows Mrs Thompson to ask questions, share any concerns and take part in decisions about her own care. When professionals communicate clearly and treat her with dignity, it helps build trust and improves the quality of care.

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