

# Written Assignment

## Case Study: Mrs Thompson

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## **Introduction**

This report looks at the care provided to Mrs Thompson, an 84-year-old woman who was recently discharged from hospital following a case of pneumonia. She lives on her own in sheltered housing and receives visits from domiciliary care workers twice daily. Mrs Thompson has mild dementia, which at times causes her to forget to take her medication. Recently, she missed her medication for two days, which led to increased confusion. She was also found outside in cold weather without proper clothing. These incidents highlight her need for safe, person-centred care and support from a range of health and social care professionals.

The report outlines why effective communication, sound administration, and collaborative working are vital in Mrs Thompson's care. It also covers relevant legislation, such as the Equality Act 201, the Data Protection Act 2018, and other health and social care policies. These areas help professionals offer safe, respectful, and high-quality care while safeguarding Mrs Thompson's rights and well being.

## **Effective Communication**

Effective communication is vital in health and social care because it helps professionals understand what service users need and provide safe care. Since Mrs Thompson has mild dementia, she may become confused or forget important details. Care workers should speak slowly, use straightforward language, keep eye contact, and give her enough time to answer. They should also check her understanding by asking simple questions.

When communicating with Mrs Thompson, professionals should always be respectful and focus on her as a person. They should listen carefully to her wishes and involve her in decisions about her care whenever possible. Because she sometimes forgets her medication, carers should remind her gently and explain why taking her medicine matters.

Family members are also important in communication. With Mrs Thompson's consent, professionals should keep her family updated about her health, any changes in medication, and possible risks. Good communication between the care team and the family helps everyone understand Mrs Thompson's needs and supports ongoing care.

The Equality Act 201 is significant because it protects people from discrimination. Mrs Thompson is protected due to her age and her disability (dementia). Care workers must treat her fairly, respect her dignity, and make reasonable adjustments to meet her communication needs. For example, they should give information in a way she can understand and make sure she is not treated unfairly because of her dementia.

A helpful communication model is the Shannon and Weaver Communication Model (1949). This model describes communication as involving a sender, message, channel, receiver, and feedback. It also notes that "noise" can disrupt communication. In Mrs Thompson's case, dementia, confusion, hearing difficulties, or busy surroundings might act as noise. Care workers can lessen these barriers by speaking clearly, choosing a quiet place, repeating information when needed, and checking understanding through feedback.

Good communication also helps with safeguarding. When Mrs Thompson was found outside without suitable clothing, staff needed to communicate quickly with her, the care team, family, GP, and local council. Accurate communication made sure the incident was reported and investigated properly.

In summary, effective communication builds trust, reduces errors, helps with medication management, and supports Mrs Thompson's independence and well being. It also allows professionals to deliver safe, high-quality care that respects her rights and dignity.

### **Good Administrative Skills and record-keeping.**

Good administrative skills are key in health and social care because they help professionals deliver safe and effective care. Accurate record-keeping makes sure everyone involved in Mrs Thompson's care has the right information.

When Mrs Thompson missed two days of medication, this was recorded through the organisation's incident reporting system. Recording this information correctly let professionals spot the problem and arrange a medication review. Without proper records, important details could be missed, putting Mrs Thompson at greater risk.

Care records should include medication given, missed doses, incidents, risk assessments, care plans, observations, and communication with other professionals. Records need to be clear, accurate, factual, signed, and completed as soon as possible after care is provided. Good records improve communication between carers, nurses, GP and other professionals. The Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR) require organisations to keep personal information safe and confidential. Mrs Thompson's health records should only be shared with professionals directly involved in her care.

Information must be stored securely, whether on paper or electronically, and only accessed by authorised staff.

Health and social care workers must also follow rules on confidentiality. They should not discuss Mrs Thompson's personal information with people not involved in her care. However, information can be shared without consent if there is a serious safeguarding concern or a legal requirement.

The Care Act 2014 also supports safe record keeping because it places a duty on local authorities to protect adults at risk of abuse or neglect. Mrs Thompson being found outside

without suitable clothing raised safeguarding concerns. Accurate records help professionals look into what happened and decide how to lower future risks.

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 require care providers to keep accurate records and provide safe care. Care organisations are also inspected by the Care Quality Commission (CQC), which checks if services keep proper records and meet quality standards.

Good administrative skills include organising appointments, documenting medication reviews, updating care plans, reporting incidents, and making sure information is shared correctly between professionals. These skills help maintain continuity of care and lower the chance of mistakes.

For Mrs Thompson, accurate documentation supports safer medication management, helps spot changes in her health, and ensures all professionals know her current needs. Good record keeping protects both the service user and healthcare professionals by providing clear evidence of the care given.

### **Importance of Collaborative Working**

Collaborative working means different professionals working together to give the best care for the service user. Mrs Thompson needs support from her GP, community nurse, domiciliary care workers, pharmacist, social worker, and the local council.

The GP can review her medication after the missed doses and decide if changes are needed. The community nurse can monitor her recovery from pneumonia and check her overall health. Domiciliary care workers can remind her to take medication, watch for changes in her condition, and report any concerns. The social worker and local council can assess her safety after she was found outside in cold weather.

Good collaboration improves communication, lowers risks, and ensures everyone understands Mrs Thompson's care plan. Regular meetings, shared care records, clear communication, and agreed responsibilities help professionals work well together.

One way to support effective collaboration is person-centred care. This means putting Mrs Thompson at the centre of all decisions and involving her and her family whenever possible. Respecting her views helps build trust and satisfaction.

However, multi-agency working can have challenges. Different organisations might have different procedures, communication systems, or priorities. Information may not always be shared quickly, which can cause delays in care. Staff shortages and high workloads can also affect teamwork.

These challenges can be reduced by holding regular case meetings, using secure electronic records, clearly defining professional roles, following agreed safeguarding procedures, and

keeping communication open. Ongoing training also helps staff understand each other's roles and improve teamwork.

Effective collaboration lets professionals respond quickly to changes in Mrs Thompson's condition, lower risks, and provide coordinated, safe, and high-quality care.

## **Conclusion**

Mrs Thompson's case shows why effective communication, accurate administration, and collaborative working are so important in health and social care. Good communication helps professionals understand her needs, involve her family, and provide person-centred care while respecting the Equality Act 201. Accurate record keeping and confidentiality support safe practice and comply with the Data Protection Act 2018 and other laws. Recording incidents like missed medication and safeguarding concerns lets professionals respond quickly and improve care planning.

Collaborative working between the GP, community nurse, domiciliary care workers, pharmacist, and social worker ensures Mrs Thompson receives coordinated support. Even though challenges such as poor communication and workload pressures may happen, these can be managed through teamwork, clear records, and regular sharing of information. In the end, applying these principles helps protect Mrs Thompson's safety, dignity, independence, and well being while ensuring high-quality health and social care.

## References:

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