

BSc HEALTH AND SOCIAL CARE]
CHANGEMAKERS: CREATIVITY AND VALUE CREATION

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REFLECTIVE REPORT

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TABLE OF CONTENT

1. Introduction	Page 1
2. How Innovation changes the world (Unit 1, topic 1)	Page 2
3. Seeking solutions (Unit 2, topic 4)	Page 2 and 3
4. Collaboration not competition (Unit 3, topic 1)	Page 3 and 4
5. Personal Evaluation (Unit 4, topic 2)	Page 4
6. Conclusion	Page 4
7. References	Page 4 and 5

1. INTRODUCTION:

The narrative is a personal reflective of my learning process and associated experiential understanding of the subject matter relating to the healthcare and associated social services. The reflective evaluation comprises study on the following four units namely (mentioned as subheadings) under the discussion sections of this chapter. The approach is to provide a general idea about the topic followed by a personal reflective account of the interpretation on the subject.

2. HOW INNOVATION CHANGES THE WORLD (UNIT 1, TOPIC 1)

The concept of innovation tries to successfully integrate technology with the current ongoing healthcare and associated social services may range from managing digital databases for the service users which will facilitate better communication amongst the peers of practitioners who are attending the same service user (Chute and French, 2019). For instance, let us assume that a patient is being attended by two general physicians or a team of general physicians for critical medical conditions the patient is suffering from. Managing a digital “ledger” of the patient records and the date of treatments received by a patient and its corresponding uploads by the respective doctors and care providers can facilitate communication, collaboration and hence care management programmes and monitoring its progress (Scott et al., 2018). In the process, quality assurance of the care assistance and associated management services can be better implemented by integration of innovative practices and technology in health and social care services (National Academies of Sciences, Engineering, and Medicine, 2019).

During study through the e-learning module I have learnt about the innovative practices that are continually changing the face of the healthcare and associated social services. The continuous emphasis on the innovative practices that are continually being integrated in the health and social care services, by our module guide, led me to understand that adopting and adapting to technology has become the need of the hour for most of the trainee care service providers. The sector currently expects that the newer generations of service providers, who are coming to work in the field, must have the necessary technical knowledge

to handle the technologies associated with the maintenance of digital databases of the patients on a real time basis. I believe that would make the process more efficient, creating a more collaborative and competent work environment leading to better quality assurance of the healthcare services in the UK.

3. SEEKING SOLUTIONS (UNIT 2, TOPIC 4)

The concept of creativity plays a critical role in finding unique solutions to the problems that are associated with creating awareness and educating service. For example, the problem of obesity and overweight have posed to be a challenging problem amongst the largest sections of the population residing in the UK these days. The health practitioners have responded by generating awareness campaigns for the population of the UK. Now it is to be noted that the general population do not understand the technical jargons associated with health and social care. Therefore, the awareness campaign is mostly created through creative visualisations, especially through the usage of the mind-map charts and posters depending on the heavy usage of pictographs to generate interest among the population (Launer, 2018). The role of an enterprising mind-set is very much important in any field as much as they are in field or area of job prospects. It can help the practitioners and the organisations to identify and analyse the market gap in terms of quality of the offered care services and devise and develop practices for fulfilling the gap (Greenhalgh, 2018).

The way I see it, I believe generating greater awareness amongst population who are the end users of the services through creative campaign launch would automatically help the populations to ascertain the seriousness of the situation pertaining to a particular health condition. It would enable the service users to directly consult with their GPs and care providers to improve the current state of their lifestyle habits that can have a better impact on their health. On the other end, the enterprising mind-set in care management services have more attachment towards the operation side helping for improving the quality of the services by the service providers and organisations. Although both creativity and enterprising mind-sets are commonly used to improve the quality of offered services, creativity involves wider community/service user engagement which I feel is more appropriate for creating healthier society in the UK.

4. COLLABORATION NOT COMPETITION (UNIT 3, TOPIC 1)

To make a difference, you don't have to form a partnership or engage into a massive super. Sharing ideas, lessons learned, and best practises can be as easy as that. That is sometimes the most effective method to help push the sector ahead.

Collaboration, on the other hand, is about collective progress. If an entire group does not cross the finish line together, there is no winner. Collaboration, in this light, is more than just one person. It's a way of life for some people. Anyone who wants to value collaboration above competition in their workplace, department, or organisation must weave it into their own identity. (classy.org n.d).

The process of mobilisation of support in healthcare and social services is the process of raising the awareness amongst the communities in the UK for the betterment of the health and social care services in the UK. It can be visualised as a self-regulatory mechanism where community engagement is undertaken for establishing a system of checks and balances (Campbell, 2020). Creating social awareness among stakeholder and communities can help the local communities and individuals to come forward and advocate for better community engagement in care sector services and management process in an area. In these aspects, it can be said that stakeholders act as "pressure groups" that can demand for better and more equitable access to healthcare facilities and services across the UK (Gram et al, 2019).

Additionally, there is a process of resource and knowledge mobilisation that operates mostly within an organisational setting associated with healthcare and associated social services in the UK, the mobilisation of such resources effectively helps in overall improvement in the quality of services in the health and social care (Lacey Bryant et al,2018).

Learning about the collaboration engagement critically helped me to understand the roles stakeholders and their engagement and mobilisation can play in access to equitable quality healthcare services by all. It has been well known fact that although the government has made healthcare services, it is not possible for all the government agencies to improve the coverage area of healthcare services across the country.

The local communities in this regard can therefore attract attention of the government and government agencies demanding for improvement in the quality of the care in a particular locality or a region. Additionally, community engagement programmes have additional benefits in terms of raising the awareness about programmes like vaccination and inoculations which has very much become the need of the hour, to protect large sections of the population from the ongoing pandemic. However, in the process it has become necessary to train the workers and the staff for a successful community engagement programme. From what I have perceived, I believe engaging the staff in a community engagement programme must be done in accordance with the community that a staff

represents, thereby helping to remove the cultural barriers that can often act as a barrier in the successful implementation of a care management programme.

5. PERSONAL EVALUATION (UNIT 4, TOPIC 2)

I have been introduced to the concept of reflexivity on a regular basis in the e-learning programme. The concept of reflexivity or reflective learning practices is closely associated with the learning process from one's own work experience through self-monitoring and assessment and continuous evaluation (Allan and Arber, 2018). The process of evaluation gathers information regarding in what ways a health and social care intervention is effective in bringing about the desired outcome of the designed healthcare services. Thus, the process of evaluation is an intricate part of the quality assurance programme of healthcare and associated social services in the UK. The collected information based on the evaluations can effectively help in understanding where the devised methodology of care services and practices lagged to produce the desired outcomes (National Academies of Sciences, Engineering, and Medicine, 2019). Health and social care professionals are constantly actively involved in evaluating the established care management process and, as a result, introducing changes at the time of phased deployment. From the discussions it is evident that the health and social care workers actively engage in the evaluation process to make informed decision-making processes based on the evaluation and assessment programme.

From what I have perceived, evaluation and assessment are critical processes associated with quality assurance of designed and developed health and social care services. Evaluation and assessment programmes can essentially help me to improve the scope of understanding and learning process regarding the applied processes and techniques that are generally followed in the healthcare services. It can help me modify the services as per the requirement of the circumstances, thereby making the services more effective to bring the desired outcomes. At the time of assessment and evaluation process it must be noted, that just by focusing on improving the process may not make the process effective, the process must also incorporate or rather consider the opinions and views of the patients to make the process as much as inclusive as possible (Boivin et al., 2018).

Therefore, from what I have understood, the process of evaluation and assessment is essentially reflective in nature that helps the implementer to understand to what extent a designed healthcare service and management will be effective in bringing about better outcomes.

6. CONCLUSION

The documented narrative is a personal reflective evaluation and account of what I have learned about the course topics through the e-learning module. The practice of reflexivity will empower me to understand how reflexive processes can critically help me in the evaluation and the assessment process that can essentially help me to improve the quality of the services that would enable me to provide a better care management system.

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