

Introduction to Health and Social Care

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INTRODUCTION

Effective communication within health and social care is prominent for delivering greater quality person centred care to service users. It is concerned about exchanging clear information between care providers, individuals, allied staff and other stakeholders to make informed care decision for the patient. Similarly, partnership working is essential where different professionals with distinct discipline works together to deliver holistic care to patient aligning with their specific health needs. Strong communication shapes the robust partnership working while it also encourages staff to maintain accurate records for continuing care delivery and improvising health outcomes of individual. Following report is based on the case of Mrs. Thompson an 84 years old woman living in sheltered house and diagnosed with mild dementia. The purpose of report is to clearly examine this case with clear discussion about the significance of communication, professional practice and collaborative working for ensuring wellbeing of client and delivering informed medical care.

Discussing the significance of effective communication within the context of Mrs Thompson's care

Effective communication allows practitioners to facilitate emotional support to patient and upholds their rights for ensuring their active involvement in care procedure. Transparent, correct and compassionate exchange of information allows all care professionals, individuals their family members to understand the care, needs, treatment and support (Albargi, 2025). In the context of Mrs. Thompson she lives alone and relies on domiciliary care, where mild dementia has been affecting her quality of life, as she is struggling to manage medication. While, increased confusion level is also affecting her to understand medical information accurately. In such context, it is crucial for the service provider to must seek client's consent before making any decision. Equality Act 2010, a legal piece, that protect person from any kind of discrimination and promotes equality for every individual (Ramsey et al, 2022). For Mrs. Thompson as well this legal piece has been applied to treat her as an individual respondent and for ensuring accountability in all the care decisions. According to this act it is crucial for the practitioner to choose right communication method that makes client understood rather than choosing a method

that disadvantages her on the basis of age and ongoing dementia condition. Thereby, prominent adjustments are required to support the client's understanding and ensuring her participation in the care process. For instance: Providing information using visual aids, and facilitating interpreter services if she faces any language barrier and repeating information when required (Almughamisi et al, 2025).

Furthermore, in context of the Shannon Weaver communication model, communication relies on factors like sender, message, channel, receiver and feedback as well as identifying the noise factor that influence communication (Graf, 2024). In case of Mrs Thompson, providers are sender who explains medical procedure to the client, however increased confusion, progressing dementia has been affecting client to fully understand all the instructions. In such visual prompts, interpreter services and informed communication is required to make Mrs Thompson understood and increasing her adherence to medication. Similarly, staff needs to recognise the cultural values of Mrs Thompson by including her carer into a procedure, so that care plan can be made accordingly. This in turns reflect that all the cultural values of client are considered and encouraging their involvement in care discussion. While using teach back approach by allowing Mrs Thompson to discuss all details in her own terms can help in ensuring her ability for self-managing her condition and medications.

Importance of good administrative skills within professional practice within the context of Mrs Thompson's care

Health and social care administrative skills emphasise on managing daily operations and long term facilities, core operations includes governance, staff management, patient safety & quality assurance, accurate record keeping and health systems. The Key task also includes accurate record keeping that comprise of complete communication and medical procedure details facilitated to patient during their hospitalisation to final discharge. As maintaining accurate patient details including their diagnosis, treatment support care continuity (Fuchshuber and Greif, 2022). While inaccurate management can pose risks like medical errors, fragmented care and compromised health outcomes of the patient. In case of Mrs Thompson accurate record keeping is essential due to her medication missed incident and involvement of local council in her case. Thereby, it is crucial to write down all the details about medication missed incident including its date, frequency, observation of increased confusion, key actions taken and any

conversation with other professionals. Likewise, her case of roaming outside in cold weather without appropriate clothing also need to be recorded since it indicates possible signs of progressive dementia and raised safeguarding concerns.

Adherence to Data protection act 2018 & GDPR is extremely crucial for all healthcare professionals to must protect privacy of the patient and prevent harm for them (GOV.UK, 2026). This act guides how healthcare information is being gathered, kept and shared for legal purpose (Bommareddy, Khan and Anand, 2022). Thus, for Mrs Thompson this legal piece is applied in order to gather her information in a lawful and fair manner. At the same time, it is crucial for the practitioners to only collect those information that are relevant to the patient's care. Under principle of this act, information related to client need to be utilised lawfully and transparently as well as kept accurate and up to date. Under NMC code practitioner should also ensure its security by keeping it protected from unlawful access, loss or damage. Thereby, personal details about Mrs Thompson alongside her dementia condition, safeguarding concern, recent medication missed incident need to be record and kept securely from unauthorised access. While, Caldicott principle suggests to destroy the records when it no longer needed, thus applicable to Mrs Thompson's case as well (GOV.UK, 2020).

Furthermore, under 17 section of Health and social care Act 2008, it is foremost for practitioners to maintain detailed records of Mrs Thompson and facilitate her better care in her best interest. While Care quality commission (CQC) also assess professional's adherence to this regulation, thus strengthening security of client's information. Likewise HCPC (health & care professions council) also guides practitioner to maintain accurate records and ensure quality delivery of care (HCPC, 2026). Overall, this can help in delivering safer care to client when information is being shared between respected health professionals. Thus targeted support can help in preventing all risk for the client associated with dementia and ensuring her medication adherence and improvising her quality life.

Collaborative working with other professionals involved in Mrs Thompson's care

Multi-agency working in healthcare can bring unique expertise and knowledge that leads to care delivery which accounts emotional, social, psychological and physical needs of service user. The professionals involved in Mrs Thompson's care are GP, community nurse, domiciliary care worker and other allied healthcare team in providing her support to manage her medication and

reducing confusion triggered by dementia (Peneza, 2026). Collaborative working is essential for managing complex health needs of Mrs Thompson as her recent pneumonia case, medication non-adherence; dementia has been raising safeguarding concern. Thereby, active partnership working is crucial for agreeing on shared care plan that benefits client. For instance, GP can assess client's health and analyse progressive stage of dementia and prescribe medication, while community nurse can facilitate support to client in managing medication and monitoring client's health and reporting concern if found. Likewise, domiciliary and social workers can work together to assess the risk that linked with client's roaming behaviour and facilitate adequate support if needed.

Regular meeting and clear exchange of information through digital communication channels can help professionals to remain on same ground in providing holistic care to Mrs Thompson. As transparency in communication, agreed care goals can enhance care continuity and preventing duplication of efforts. Despite of strength of multiagency work, the challenges might occur in terms of communication breakdown, unresolved individual conflicts, poor roles delegation and deferring priorities (Saporito and Mrad Georgis, 2025). Delay in the exchange of updates on patient's health may pose threat for Mrs Thompson's health and quality life. It is crucial for the health professionals to must initiate work after introducing ground rules for communication as well as clearly delegate roles and responsibilities on the basis of individual team member's strength and specialisation. This can help staff to work in harmony without causing any conflict and sharing real time information that can promote dignity, independence of Mrs Thompson.

CONCLUSION

By summing up, it has been articulated that effective communication is vital in facilitating timely and quality care to patient. From Mrs Thompson's case I have learnt that how strong communication can ensure patient's participation and supporting their health needs. Adherence to legal piece allows for treating service user individually by upholding their all rights and provides their best interest care. Likewise, adherence to ethical principles in information management allows health practitioners to reduce possible harm for service users and ensuring their safeguarding. As, valid consent for sharing information allow practitioners to demonstrate legal adherence which protects them from legal remediation. Further, clear exchange of information shapes multiagency work and helps practitioners to bring new care ideas to fully

meet client's unique health needs. Although challenges arrived in terms of poor communication channel, internal conflicts, undefined roles and responsibilities impact care delivery. However, electronic communication system, regular meeting, clear roles and boundaries can help in addressing challenge.

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