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Reflective Report: Applying Principles of Health and Social Care in Practice as a Health Care Assistant.....	3
Introduction.....	3
Task 1 – Importance of Principles of Health and Social Care.....	3
Person-centred care.....	3
Task 2 – Practical Examples in a Care Home Setting.....	4
Real-world example in a care home setting.....	4
Person-centred care in action.....	5
After adapting the routine:.....	5
Partnership working in practice.....	5
Ethics in decision-making.....	5
Actions taken:.....	5
How policies and guidelines support practice.....	5
.....	7
Conclusion.....	8
Reference List.....	9

Reflective Report: Applying Principles of Health and Social Care in Practice as a Health Care Assistant

Introduction

Health and social care practice in the UK is guided by a core of professional principles that have the aim to ensure people receive safe, effective and caring support. This reflective report explores the importance of these principles in the UK context, provides real practice examples, and critically reflects on how they influence my professional development. The discussion links theory, legislation and policy to real experiences in order to demonstrate how high-quality care can be achieved. (Department of Health and Social Care, 2022)

Task 1 – Importance of Principles of Health and Social Care

Person-centred care

Person-centered care allows the individual at the centre of the care planning decisions. The focus will be on addressing the person's needs medically and also their emotional, spiritual, cultural and social needs.

This method has been heavily impacted by Abraham Maslow's hierarchy of needs; his hierarchy emphasizes that an individual requires a sense of belonging, dignity and self-esteem before they can receive adequate physical care.

The NHS also provides a number of ways for older adults living in care-homes to demonstrate the importance of person-centered care, including:

- respecting personal routines
- supporting independence
- promoting choices and autonomy
- maintaining dignity through the process of receiving personal care

When individuals are given the opportunity to express themselves and have their concerns heard, they become more engaged in the care provided to them and experience better overall well-being.

partnership-working

partnership-working refers to the collaborative efforts made by health/social care professionals, families and service-users. Due to the complexities involved in providing health and social care, it would be unrealistic to expect one professional to provide all the necessary support. The benefits of partnership-working include:

improved sharing of relevant information

participation in multi-disciplinary team meetings enhances opportunities for family members to participate in the care-planning process collaborative working practices with nurses, g.p.'s and social workers through effective communication among professionals, care becomes more coordinated and safer for the individual being cared-for.

ethical practice

ethical principles direct health/social care professionals to make decisions that are in the best interest of those using their services. Some of the main ethical principles used within the provision of health and social care include:

- autonomy (choice)
- beneficence (promotion of well-being)
- non-maleficence (prevention of harm)
- justice (fairness/equality)

ethics are especially important when supporting individuals who may lack capacity or experience communication barriers.

legislation/policy supporting ethics

There are many pieces of UK legislation that support the above principles. examples include: wellbeing/safeguarding/personalized care etc.

The new health and care act 2022 aims to promote integration among different healthcare services. Together these legislative frameworks ensure that person-centred care is required rather than optional.

Task 2 – Practical Examples in a Care Home Setting

Real-world example in a care home setting

One of the elderly residents with dementia that I worked with at my place of work was (no real name used). She was a distressed individual who experienced much anxiety around personal care tasks.

Person-centred care in action

We've not done the routine lately & have taken care plans & discussed with relatives re her wishes. She would like a female carer, the morning routine is a priority over the evening routine.

After adapting the routine:

- The resident became calmer.
- Cooperation improved.
- Distress is reduced.

Sharing personal history, interests, and preferences can contribute to increased wellbeing.

Partnership working in practice

The multidisciplinary team worked together:

- GP reviewed medication.
- The family shared personal history.
- Care staff updated the care plan.
- Nurses monitored behaviour changes.

Team working and fully integrated approach to ensure best care and prevent hospitalization.

Ethics in decision-making

He occasionally refused or delayed taking prescribed or over the counter medication and on occasion attempted to go out of the house with it. The main challenge to staff was to ensure his safety and well-being whilst containing his desire to express his right to decide to take or not take his medication as he chose.

Actions taken:

- The staff explained the medication calmly.
- Encouraged but not forced.

- Documented refusal appropriately.

Patients rights were respected throughout.

How policies and guidelines support practice

UK policies help professionals apply these principles:

- Safeguarding policies protect vulnerable adults.
- Equality policies ensure fair treatment.
- Duty of care means that health professionals must act in the service user's best interests.

How these concepts improve patient care

Applying these principles resulted in:

- Reduced anxiety and behavioural distress
- Better communication with family
- Improved quality of life
- Safer care planning

This demonstrates how theory directly improves real-life practice.

A Long Look at Professional Values and Problems in Practice

My previous role as a Health Care Assistant has provided me with many scenarios whereby I am able to relate health and social care models to specific situations and issues. One of the major problems I have encountered in my role is trying to meet the demands of the role whilst providing quality care and adhering to health and social care models. Many of these problems are encountered within busy environments where there is a lack of staff or sufficient time to provide person centred care. However, as noted by the Care Quality Commission, quality of care is always the priority and the focus should be on enabling individuals to have dignity and have their needs met.

On busy shifts it is important that person centred care continues to be delivered. This is achieved through good time management and prioritising. For instance, whilst handling the mediation of the patients, I make time to speak to the residents clearly for them to

understand the choices i am making and also consider their choices.giving residents the ability to make choices is essential in making the environment safer for everyone else.for example when choosing their drinks at mealtimes, giving the choice helps make them feel more in control and maintains their dignity.This is being kind and respectful as directed by the NHS. (NHS England, 2019)

As mentioned previously, there are some unique challenges to doing this work. There are challenges to having an appropriate conversation with someone with cognitive impairments, and challenges even when people are working together on a task and not fully aware of each other's contributions. I have learned so much about patience, understanding and silent communication. I have also worked on being able to read the needs of the person receiving care through eye contact, calm spoken words and body language.

Inevitably, as nurses we come across some ethical dilemmas. Recently I have come across a dilemma that raises the question of respecting a service user's right to choice and also their decision making in relation to their support while at the same time recognising the nurse's duty of care towards that person.the national institute for health and care excellence (NICE) gives guidance to help people with learning disabilities. The mental health act 1983 is being used to help anyone detained in medium to low secure environments.and support them to be as independent as possible.Supporting individuals to make decisions and choices, making written decisions with them wherever possible. Taking care or protective action when there is a risk of harm to self or others. (NICE, 2018)

I have also been reflecting on the area of Safeguarding, the Care Act 2014 clearly states that all care workers have a role and a duty to Safeguard individuals who are vulnerable and at risk of abuse or neglect. As an HCA I am beginning to identify the signs of possible abuse (e.g. injuries, change of behaviour or any other unusual indicators) and pass on any concerns I may have to others. My main aim as a Health Care Assistant is to do no harm to patients i.e. Non-maleficence. (Care Act, 2014)

My experience at this voluntary organisation has also helped me gain understanding of equality and inclusion as the organisation serves a diverse population.The people in the community hail from different cultures,backgrounds and faith.

We value and recognise peoples differences and the diverse ways in which people can demonstrate care.At our Care Home we have provided a variety of meals to cater for individual medical and nutritional needs as well as providing food and preparing occasions of

cultural significance. We have also supported residents in their observance of individual faiths. As individuals we endeavour to ensure that all people are entitled to equal treatment, to be treated with dignity and respect, and to have fair access to opportunities and services which meet their individual needs.

I have many experiences and memories that I will carry with me for life. As I reflect on my time at Health and Social Care I can see how these have contributed to the learning that I know I am capable of doing as a Health Care Assistant. As the field of health and social care changes continually, with new situations and circumstances arising every day, the best methods of practice are also changing continually. As HCA's it is up to us to continually improve our skills and practice. This can be achieved through our training, reflecting on our practice, following the policies, procedures and guidelines set in place by the department.

The complexity and challenges in this environment of constant change have pushed me to become a stronger nurse able to handle the variety of scenarios on a day to day basis and to solve intricate problems to best serve my patients. The issues have driven me back to the basics of health and given me the opportunity to grow in my position and to take on a leadership role in order to help improve the standard of care.

More Thoughts on Professional Development and Communication

One of the key skills that I have learned as a Health Care Assistant is communication. Communication with the residents / service users and their families and the multidisciplinary team on a daily basis is a major part of my role as a HCA. Good communication is key to safe and consistent delivery of care and helps to develop trust and good relationships with residents/service users and their families. Effective communication is an important part of caring/compassionate care and helps care professionals to rationalise an individual's needs and deliver care in an appropriate and person centred way.

I attempt to use both no-verbal and verbal methods of communication on an everyday basis. When working with individuals suffering from dementia, I try to utilise clear speech, maintain strong eye contact and use hand and facial gestures. I also attempt to use simple language, reiterate what I have said on occasions and reassure people to reduce confusion.

and anxiety. I am trying to incorporate these elements into my personal practice and create a space where I can deliver a 'person centred' approach of care.

It is important to document the communication with the resident so that they continue to receive the quality of care that they need and other professionals can see from their records that the resident's needs and changes to these needs have been discussed and understood. As part of safe care delivery, the Care Quality Commission expects to see records which are clear and accurate. I record the conversation with the resident as soon as possible after whilst the conversation is fresh in my memory and include any issues/concerns arising from the conversation.

Feedback is a crucial part of my professional development. I value the constructive feedback I get from my more experienced colleagues which helps me to fortify what I am doing well and also what I am not doing so well. I also continually reflect on my own practice and try to learn from the successes and mistakes that I make in order to provide quality care in the future.

Good communication is important to good teamwork, safe delivery of patient care and quality health care. As I am trying to develop my clinical skills as a Health Care Assistant, I would like to be more confident and competent in communicating with other members of the health care team and with patients/service users.

Conclusion

Health and social care in the UK is about person centred practice, effective partnership working and doing the right things. Ensuring the help that people receive is safe, effective and relevant is key to supporting them in the best possible way. I have been continuing to work on my practice and learning through reflection. Below outlines the rules to follow in relation to the quality of the support that is provided. This includes the rules for the organisation's rules, guidelines and standards for best practice and support. Any further information on these would be gratefully received.

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