

Programme Name: Certificate of Higher Education Skills for the Workplace (Health and Social Care)

Module: Professional Development within Health and Social Care

Module code: LCHS4009

Assignment Title: Personal Portfolio

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TASK 1 – PERSONAL ACTION PLAN

Introduction

Job Role: Nursing Assistant

The Nursing Assistant (also known as Healthcare Assistant) is a job role that entails assisting registered nurses and other medical practitioners offer the best services to patients in different healthcare institutions, including hospitals, community clinics, and care facilities (Jackson et al., 2024).

The major roles comprise helping patients with personal care, mobility, feeding, vital signs check-up, and emotional support.

Nursing Assistants are an important part of patient comfort, safety, and dignity, as well as effective communication in a healthcare team (Skills for Care, 2021).

The Capabilities I need and Self-Evaluation.

Communication Skills: Nursing Assistants should be able to communicate effectively with patients, families and the health care team.

My placement at a local care home has enhanced my good communication skills as I was able to explain to patients about the care procedures and update the nurses.

Active listening was helpful in making me realize the needs of the patients and responding empathetically (Horvath, 2024).

Empathy and Compassion: This position implies a possibility to comprehend the feelings of the patients and support them.

I worked with aging patients who felt anxious and provided them with some comfort and companionship, which contributed to making them feel better about their comfort and interest in their day-to-day activities.

Collaboration: Healthcare is very cooperative.

I took an active part in multidisciplinary meetings during placement, organized work with nurses, physiotherapists, and other support staff, and patient care plans were observed in an effective way (ALMANSOUR et al., 2024).

Protecting Knowledge: Nursing Assistants should be aware of the indicators of abuse or neglect and report them (Winquist et al., 2024). I have also undertaken safeguarding training and adhered

to organisational procedures, which proves my knowledge of reporting procedures and ethical accountability.

Time Management and Organisation: Multitasking with patients will need prioritisation and effectiveness (Crenshaw, 2021).

During placement, I was able to balance the responsibilities of looking after patients, documentation, and staff support, as well as medical procedures.

Identified Skill Gaps

Although I am a good foundation skills holder, I have pinpointed the following areas of improvement:

High Tech Patient Care: I am not that familiar with care procedures of catheter or wound simple dressing.

These skills should be mastered to make me more competent and be able to assist nurses.

Conflict Resolution: It is difficult to deal with tough patients or relatives.

Bettering my self-confidence regarding the ability to handle conflicts or painful scenarios will help to increase patient satisfaction and interpersonal harmony (Plack and Driscoll, 2024).

Digital Record-Keeping: Contemporary medical facilities are based on eHealth records.

I should also acquire the skills in digital records to make sure that the information about the patients is accurate and timely.

Personal Development Plan (PDP)

Skill Gap	Action Steps	Timeline	Measurable Outcome
Advanced Patient Care Techniques	Attend in-house training sessions, observe and assist nurses, practice under supervision	3 months	Competently perform catheter care and basic wound dressing, confirmed by mentor feedback
Conflict Resolution	Complete an online workshop on	2 months	Demonstrate calm and effective handling

		communication in conflict situations, role-play scenarios		of two simulated conflict situations
Digital Record-Keeping		Enrol in an e-learning module on healthcare IT systems, practice updating patient records during placement	1 month	Accurately complete patient documentation in electronic systems with minimal errors

Interview Preparation

Question: What is your desire in becoming a Nursing Assistant?

Response: I am enthusiastic about the health and well being of patients.

Through my placement, I was extremely happy to provide support to patients through care and comfort, as well as assist nurses with clinical work. I like to work in a team and positively influence the experiences of patients.

Question: “What do you do when faced with difficult situations with the patients?

Response: I treat difficult situations patiently, in an empathetic and listening manner.

One such instance involved a patient who was apprehensive about taking medication, and I was able to help him by explaining the procedure in a soothing tone and giving him an assurance.

This method helped them to ease their anxiety and enabled the care plan to progress without difficulties.

Question: What could you do in case you noticed that a patient is being neglected?

Response: I would adhere to the procedures of reporting my concerns and as soon as possible to the nurse in charge, reporting the incident, documenting the incident correctly, and making sure that the patient was provided with the necessary care and protection.

My guardian training also makes me responsible and ethical in such cases.

TASK 2 – ACADEMIC REPORT: COMMUNICATION SKILLS IN HEALTH AND SOCIAL CARE

Introduction

Communication is an essential quality in health and social care allowing Nursing Assistants to deliver patient-centred care and work efficiently with their colleagues.

It is verbal, non-verbal, as well as written and is a fundamental part of patient safety, comfort, and dignity (Peate, 2024).

Effective communication enhances satisfaction among patients, promotes collaboration, and minimizes mistakes.

This report is a critical analysis of communication, its theory, and how it is applied in the Nursing Assistant job and the potentials of the profession.

Theoretical Communication Knowledge.

The theory and practice of communication are important in effective communication.

Active listening is the main idea, and it is necessary to pay attention to the speaker, hear, comprehend the information he/she says and react to it properly (Vitalaki and Katsarou, 2021).

The method would assist Nursing Assistants to establish trust with patients that would make the patients open up and tell their concerns and needs effectively.

Organised communication systems are also significant.

Arranging the information in a logical and summarised manner is a guarantee of correct reporting among the healthcare group and minimisation of errors (Ştefan et al., 2024).

The non-verbal communication, such as gestures, facial expression and body language, is especially important to patients, who have cognitive impairment or are verbal impaired.

Communication is fluid and needs dynamism.

The healthcare practitioners should adapt to the needs of various patients, their cultures, and their emotional conditions.

Reflective practice also improves communication as it aids practitioners to identify what they can improve on, bias or misconceptions (Davis and Musolino, 2024).

In the absence of this reflection, even seasoned employees can get the cues of patients wrong or be unable to communicate the essential information.

Practical Application

Communication skills were used at all times in placement.

I worked with patients with different levels of ability such as patients with dementia.

A patient denied medication because of anxiety; with empathetic conversation and active listening skills, I was able to describe the process in a relaxed manner and reassure the patient leading to his/her cooperation and a better treatment relationship (Davis and Musolino, 2024).

Teamwork also has to do with communication. Even in the case of handing over shifts, transparent and systematic reports were used to provide all personnel with the correct and succinct information to continue with care (Nasiri et al., 2021).

Watching body language aided in defining patient discomfort or distress and therefore responding to it promptly and improving patient safety and comfort.

Critical Analysis and Areas of Development.

Although the communication skills are good there are hurdles.

It may be a challenge to work with disheartened or violent patients and patience and clarity may be lost, which may consequently lead to ineffectiveness (Ahmad et al., 2025).

Assertiveness and emotional regulation can be improved by taking part in role-play, conflict resolution training, and reflective practice.

Another area of development is digital communication.

Electronic records keeping is crucial in patient safety and coordination.

Enhancing healthcare IT systems expertise will enhance written communication and information exchange that is constant (Tubaishat, 2019).

There should also be cultural competence. Accommodating different language and cultural differences is a way of providing equal care.

The skills that are developed will enhance the level of patient engagement and inclusiveness in healthcare practice (Ahmad et al., 2025).

Conclusion

Nursing Assistant practice centres on communication, which has an impact on patient safety, satisfaction, and quality of care.

Active listening, structured reporting, empathy, and non-verbal awareness can be integrated to enable the practitioners to be responsive to the needs of patients and integrate with colleagues.

Continuous evolution of the strategies of conflict management, virtual communication, and cultural competence is essential to ensure high professional standards to provide patients with patient-centred and inclusive care in any healthcare environment.

TASK 3 – CRITICAL REFLECTION ON COMPONENT 1 PRESENTATION (ERA MODEL)

Introduction

This reflection is a critical assessment of my experience of Component 1 in the LCHS4009 module, regarding my group presentation.

I will then use the ERA model to analyze what I think and feel, how I perform, what I can improve, and what I can do to improve my performance. This will facilitate my career growth and preparation to work in the future in health and social care.

Experience

In Component 1 of the module, I was part of a group presentation in the form of a case study of a patient with a holistic care need. I had to study the evidence-based care strategies, arrange the information in a logical way, and present the section on patient-centred approaches.

There was a necessity of teamwork, time management and translating theoretical knowledge into a practical situation (Younas et al., 2023).

During the process, I had a problem in scheduling group meetings because of schedule differences.

Another worry that I experienced was the fear of standing before other people and fearing to convey myself effectively and deal with the questions posed by the audience. Nonetheless, the experience gave a chance to improve my communication, critical, and collaborative skills in a professional setting.

Reflection

When I looked at my performance, I came up with a number of strengths. I was prepared, which made the presentation properly organised with appropriate examples that have been obtained during placement and in academic materials.

I also ensured eye contact, used simple language and interaction with the audience during delivery which assisted me to deliver important points.

Actively responding to questions and I showed that I understood and was capable of connecting theory with practice.

Nevertheless, it could have been improved in some areas.

Much of the nervousness led to my speeding up some parts and in some cases my explanations might have been shorter. I also had some instances where I remained silent in contributing full during group discussion and thus limiting my contribution in planning the decisions.

My lecturer pointed out that I was very good at communicating and structuring my paper but I should communicate at a slower pace, employ more accurate academic words and engage in group planning in a more assertive way.

This reflection allowed me to realise that self-awareness, preparation, and confidence in professional presentation delivery is important.

It also highlighted the importance of providing links to theory critically and doing collaborative work assertively.

Action

In order to deal with these areas, I have come up with a personal action plan.

The first step I will take is to train myself to be a good public speaker, practicing before my colleagues or recording myself, so that I can watch my speed, pronunciation and body language. It will aid in the minimisation of anxiety and increase in confidence. Secondly, will improve my skills of connecting the practice examples with the theory, by creating explicit links between them prior to presentations, strengthening critical analysis and proving the higher level of understanding (Keykha et al., 2025).

Third, I will become more assertive in group activities by contributing ideas in group project activities and volunteering in group activities.

This will be facilitated by attending communication and teamwork workshops

Lastly, I will take a reflection on every presentation or group work, determine its strengths and weaknesses, and provide the feedback of lecturers and colleagues, which will result in an ongoing improvement process.

The process will enhance my professional competency, which will make me more effective in the future when engaging in health and social care situations (Lee and Chiu, 2022).

Conclusion

All in all, the presentation experience enabled me to acquire the key professional competencies, such as communication, teamwork, and critical thinking.

The ERA model application provided a deep reflection on strengths and improvements to be made.

With the strategies like practice, connecting theory to practice, assertive participation, and constant reflection, I believe that I would be able to enhance the performance of my presentation and professional competence.

References

- Ahmad, S., Bukhari, S.U.P., Din, S.U., Shamim, M., Jawaid, I.A., Rafique, M. and Khan, S.M., 2025. BARRIERS TO EFFECTIVE COMMUNICATION TO ENHANCE PATIENT SAFETY.
- ALMANSOUR, N.S.M., AIGarea, H.F.H., AL GOREA, Y.H.H., ALGOREI, S.H.A., AL HOTTIIA, A.H.M., AISALEM, I.A.H. and Al Mordef, M.S.M., 2024. Interprofessional Collaboration in Emergency Response for Public Health Crisis: The Roles of Nurses, Pharmacists, and Physical Therapists. *Journal of International Crisis and Risk Communication Research*, 7(S8), p.687.
- Crenshaw, D., 2021. *The Myth of Multitasking: How "Doing It All" Gets Nothing Done (Project Management and Time Management Skills)*. Mango Media Inc..
- Davis, C.M. and Musolino, G.M., 2024. *Patient practitioner interaction: An experiential manual for developing the art of health care*. Taylor & Francis.
- Horvath, B., 2024. Skilled Nursing Facility Interventions: Interdisciplinary Collaboration Between Therapists And Certified Nursing Assistants. *Gerontology*.
- Jackson, J., Gadimova, F. and Epko, S., 2024. A nurse by any other name? An international comparison of nomenclature and regulation of healthcare assistants. *International journal of nursing studies advances*, 6, p.100200.
- Keykha, A., Fazlali, B., Behraves, S. and Farahmandpour, Z., 2025. Integrating Artificial Intelligence in Medical Education: A Meta-Synthesis of Potentials and Pitfalls of ChatGPT. *Journal of Advances in Medical Education & Professionalism*, 13(3), p.155.
- Lee, G.B. and Chiu, A.M., 2022. Assessment and feedback methods in competency-based medical education. *Annals of Allergy, Asthma & Immunology*, 128(3), pp.256-262.
- Nasiri, E., Lotfi, M., Mahdavinoor, S.M.M. and Rafiei, M.H., 2021. The impact of a structured handover checklist for intraoperative staff shift changes on effective communication, OR team satisfaction, and patient safety: a pilot study. *Patient safety in surgery*, 15(1), p.25.
- Peate, I., 2024. Elements of care, part 3: communicating. *British Journal of Healthcare Assistants*, 18(3), pp.084-089.
- Plack, M.M. and Driscoll, M., 2024. Communication and Conflict Negotiation. *Teaching and Learning in Physical Therapy: From Classroom to Clinic*.

Ștefan, A.M., Rusu, N.R., Ovreiu, E. and Ciuc, M., 2024. Empowering healthcare: A comprehensive guide to Implementing a robust medical information system—components, benefits, objectives, evaluation criteria, and seamless deployment strategies. *Applied System Innovation*, 7(3), p.51.

Tubaishat, A., 2019. The effect of electronic health records on patient safety: A qualitative exploratory study. *Informatics for Health and Social Care*, 44(1), pp.79-91.

Vitalaki, E. and Katsarou, E., 2021. Active listening: A model for Teachers and Parents to Actively Listen and Act Upon Children's Concerns in Terms of their Perceptions of Quality of Life. *Curriculum*, p.73.

Winqust, A., Burduli, E., Eddy, L.L., Landis, T., Fraser, J. and Barbosa Leiker, C., 2024. Associations between nurse characteristics, institutional characteristics and perceived nurse knowledge and self-efficacy of reporting suspected child abuse and neglect. *Journal of clinical nursing*, 33(7), pp.2662-2673.

Younas, A., Inayat, S. and Masih, S., 2023. Nurses' perceived barriers to the delivery of person-centred care to complex patients: A qualitative study using theoretical domains framework. *Journal of clinical nursing*, 32(3-4), pp.368-381.