DEVELOPING EFFECTIVE COMMUNICATION IN HEALTH AND SOCIAL CARE

R/600/8939

LEVEL 3 UNIT 1

GUIDED LEARNING HOURS: 60
UNIT CREDIT VALUE: 10
DEVELOPING EFFECTIVE COMMUNICATION IN HEALTH AND SOCIAL CARE

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AIM OF THE UNIT

In a world without words or actions, no one would speak, smile, point, text or write. That would be a world without communication. This unit aims to introduce learners to the many different forms of communication and consider what can help or hinder effective communication. Learners will consider a wide range of communication skills and apply their knowledge to situations that could arise within a health and social care context. They will be able to participate in interactions and gain understanding of the importance of communicating effectively in different situations.

PURPOSE OF THE UNIT

Effective communication is vital to working in health and social care. An important part of communication is the giving and receiving of information. This unit will allow learners to develop the skills which underpin effective communication. They will also gain an understanding that these skills need to be adapted to different circumstances, e.g. a nurse trying to take blood from a patient who has a fear of needles needs to use their voice and body language to reassure the patient and control the situation. A social worker writing a report on a child in their care must be accurate, clear and sensitive to the child’s needs.

People who access services do so because they have needs and these have to be expressed by the individual and understood by the practitioner; communication facilitates this. It is not always easy to communicate effectively and factors that inhibit and support communication will also be covered in this unit. Learners will investigate a range of these factors, for example language, environmental conditions, positioning and body language. They will develop an understanding that many of these factors can have a negative impact on communication and that these barriers will need to be overcome in order to communicate effectively. This unit will allow learners to consider a range of possible strategies and aids to facilitate positive communication.

Learners will experience both a one-to-one and group interaction which will allow them the opportunity to hone, assess and reflect on their own communication and interpersonal skills.
# ASSESSMENT AND GRADING CRITERIA

<table>
<thead>
<tr>
<th>Learning Outcome (LO)</th>
<th>The learner will:</th>
<th>The learner can:</th>
<th>Pass</th>
<th>Merit</th>
<th>Distinction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Understand effective communication and interpersonal interaction in health and social care</td>
<td></td>
<td></td>
<td>P1 explain the role of effective communication and interpersonal interaction in a health and social care context</td>
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<tr>
<td>2 Understand factors that influence communication and interpersonal interaction in health and social care environments</td>
<td></td>
<td></td>
<td>P2 discuss theories of communication</td>
<td>M1 assess the usefulness of theories of communication within health and social care environments</td>
<td></td>
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<tr>
<td>3 Understand ways to overcome barriers in a health and social care environment</td>
<td></td>
<td></td>
<td>P3 explain factors that may influence communication and interpersonal interactions in health and social care environments</td>
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<tr>
<td>4 Be able to communicate and interact effectively in a health and social care environment</td>
<td></td>
<td></td>
<td>P4 explain strategies used in health and social care environments to overcome barriers to effective communication and interpersonal interactions</td>
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<td>P5 participate in a one-to-one interaction in a health and social care context</td>
<td>M2 assess own communication and interpersonal skills for a one-to-one and group interaction</td>
<td>D2 summarise ways of improving their own communication and interpersonal skills in future interactions</td>
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<td></td>
<td></td>
<td></td>
<td>P6 participate in a group interaction in a health and social care context</td>
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TEACHING CONTENT

1 Understand effective communication and interpersonal interaction in health and social care
   • Contexts: one-to-one; groups, (e.g. formal; informal, between colleagues, between practitioners and people who use services)
   • Forms of Communication: computerised, written, oral, special methods (e.g. Makaton, British Sign Language, Braille)
   • Types of Interpersonal interaction: speech, language (e.g. first language, dialect, jargon), non-verbal (e.g. posture, facial expression, touch, silence, proximity, reflective listening)
   • Communication variation between cultures (e.g. eye contact, gestures, proximity)
   • Theories of communication: (e.g. Argyle's stages of the communication cycle, Tuckman's stages of group interaction, SOLER).

2 Understand factors that influence communication and interpersonal interaction in health and social care environments
   • Environmental factors, (e.g. setting, noise, seating, lighting, space, time, positioning)
   • Factors (positive and negative) (e.g. language needs/preferences, sensory impairment, disability, personality, self-esteem, anxiety, depression, aggression, submissiveness, assumptions, value and belief systems, jargon, cultural variations, use and abuse of power, effects of alcohol/drugs).

3 Understand ways to overcome barriers in a health and social care environment
   • Communication and interpersonal interaction: possible strategies, (e.g. staff training, assessment of people who use services needs, using preferred method, promoting rights, confidentiality, defusing aggression, assertiveness, appropriate verbal/non-verbal communication, building relationships, appropriate environment, attitude, confidence)
   • Aids to communication: Human (e.g. advocates, interpreters, translators, signers), technological aids (e.g. hearing aids, text phones, minicom, voice activated software, relay systems, loop systems).

4 Be able to communicate and interact effectively in a health and social care environment
   • Contexts: formal; one-to-one; groups; with people using services; with practitioners/colleagues
   • Communication skills: Verbal and non-verbal, (e.g. listening and responding, tone, pace, language, appropriate environment, proximity, clarifying or repeating, questioning, responding to difficult situations, defusing anger)
   • Effectiveness: Group and one-to one situations, (e.g. awareness of needs and preferences, interpersonal skills, attitudes, overcoming barriers, assertiveness).
DELIVERY GUIDANCE

LO1  A starting point for delivering this unit could be to identify the various forms of communication and then allow learners to come up with examples of each across the health and social care sectors. This could be done in pairs and then transferred to an interactive whiteboard for discussion. This is a practical unit which would benefit from learners acting out scenarios through role play. If appropriate, learners could draw upon work placement experience and create scenarios for others to act out. Pro formas could be used to show the types of written communication used within health and social care settings. Learners need to consider the appropriateness of different forms of communication and this could be done by discussing the advantages and disadvantages of each in a number of different situations. Learners need to develop an awareness of their current communication skills. There are numerous websites which suggest activities to allow learners to do this e.g. www.bbc.co.uk/keys skills, www.chalkface.com.

An introductory activity to cultural variations in communication could be the distribution of a prompt sheet which identifies various gestures used in communication. Learners could independently research the interpretations of each gesture/symbol in different parts of the world. The results of this could be fed back in a class discussion which highlights the importance of understanding cultural variations. This could be followed by paired research into different cultures and how their customs, traditions and taboos can influence communication. If practicable a visit from a local spiritual leader could be used to emphasise these cultural variations. Learners would prepare a series of relevant questions that would enhance their understanding. This could lead to a discussion of France’s controversial decision to ban the wearing of a full burkah in public due to its use apparently prohibiting effective communication.

Theories of communication should be approached from a health and social care perspective and rather than spend numerous lessons teaching each theory, it is advisable to focus on key features. Learners may enjoy a quick fire memory-game to remember the stages of the communication cycle and then once remembered they need to apply their understanding to a health or social care situation. Various role plays can be used, e.g. a GP and patient scenario or a job interview as a care assistant in a residential home. When considering different theories of communication learners need to consider if applying theory to practice makes communicating anymore effective? Two role plays could be observed, one which applies theory and one which doesn’t, as a starting point for a discussion about the effectiveness and usefulness of theories of communication. It is recommended that the role play without theory is performed before theories of communication are taught. This could be recorded and revisited when theoretical understanding has been gained.

LO2  Provide learners with a case study which demonstrates poor communication skills and introduces factors which can affect communication. As a group or individually, learners could identify factors from the case study, consider their impact on communication and how they could be overcome. You Tube, facebook, newspapers and TV programmes can all be used to demonstrate how factors affect communication. Role playing poor communication skills/inhibiting factors is always fun and learners can relate to this. It should be noted that factors can affect communication in a positive way as well as negative.

LO3  Learners can often think of ways to overcome certain types of barrier, such as physical barriers; however they may have difficulties with other types, e.g. emotional barriers. Learners could write short scenarios set in health and social care settings that incorporate barriers to communication that can be identified and suggestions made for overcoming these, perhaps through short group presentations. Learners need to consider the effectiveness of methods used to overcome barriers. It may be helpful to invite a guest speaker who could describe methods used in their setting to overcome different barriers. An additional activity might involve watching a recording of ‘The King’s Speech’ and discussing the strategies employed to overcome the King’s speech impediment.

LO4  Ideally all learners will have access to a health or social care placement and they should complete their one to one and group interactions in their placement. If learners cannot access placements however, they could role play both interactions. Consideration needs to be paid to how interactions can be recorded and observation records could be produced as evidence. This would provide the learners with an opportunity to reflect on their use of skills and make suggestions as to how they might improve their communication and interpersonal skills.
SUGGESTED ASSESSMENT SCENARIOS

Assessment is likely to be learning outcome based and written in nature. The use of tables is acceptable, for example, when identifying examples of forms of communication. If evidence is presented in table form this is best supplemented with descriptive assessment. Tables can be useful for recording data however they can restrict learners to pass criteria only. Where role play or case studies are used as the assessment media, evidence should be included eg. written, video, presentation.

Display work or posters may be used as evidence, as can photographic evidence. It is advisable to have all evidence available for the visiting moderator to review. Guest speakers are often used to provide evidence to a group on a certain topic; an example could be a guest speaker who discusses cultural variations in communication. Group work could be used to generate class questions, which would then be analysed independently.

Where learners are able to use real situations or observations from work placement, time and effort should be spent planning a record of observation sheet. Learners need evaluation forms/records of observation forms for themselves as well as another individual. It is best practice to record another individual’s perspective of how an interaction went. Centres may wish to call the record of observation a witness statement, both should be signed and dated and included in the evidence.

P1 – Learners could produce a written report that explains the role of effective communication and then applies this to a range of different scenarios based in health and social care contexts.

D1 – Learners could produce an information leaflet designed for use in the training of new staff in a local health centre. The focus of the leaflet will be on how and why cultural variations can influence communication in the centre.

P2 – Learners could produce a presentation which considers the key features of two different theories of communication. Case studies could be submitted where theories of communication are identified and discussed.

M1 – Learners may use the same examples from P2, but will develop their evidence to assess when theories of communication can improve the effectiveness of communication and when they can hinder it.

P3 – Learners could produce a written document. This could be enhanced by a table which identifies a range of different factors that influence communication and then explains how each achieves this. Alternatively role play demonstrating how factors can influence communication could be recorded. This would need augmentation by either a spoken commentary or written account explaining the influence of each factor.

P4 – Individual presentations could be used to explain various strategies that could be used to overcome barriers to effective communication in a range of health and social care environments. Alternatively learners could take on the role of a ‘communication agony aunt’ addressing various scenarios involving barriers to effective communication supplied in the form of letters on a problem page. Learners need to explain different strategies to overcome these barriers.

P5 and P6 – These criteria require records of participating in two interactions; these can be simulated or have taken place in a health or social care setting. Interactions should have clear aims/purposes and the communication and interpersonal skills they are planning on using should be identified. Learners should then carry out both a one to one and group interaction. To achieve

M2 – Learners need to assess their use of communication and interpersonal skills possibly through the use of observational records and feedback from the participants or witnesses to the interactions carried out for P5 and P6. Learners will assess their strengths and weaknesses and identify targets for improvement.

D2 – Learners will summarise ways of improving their communication and interpersonal skills for future interactions. One way that this could be achieved is by the production of an action plan.
## SUGGESTED ASSIGNMENTS

The table below shows suggested assignments that cover the pass, merit and distinction criteria in the assessment and grading grid. This is for guidance and it is recommended that centres either write their own assignments or adapt any Cambridge Assessment assignments to meet local needs and resources.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Assignment title</th>
<th>Scenario</th>
<th>Assessment</th>
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</thead>
<tbody>
<tr>
<td>P1, D1</td>
<td>Communication in Health and Social Care.</td>
<td>Investigating effective communication in a health and social care environment.</td>
<td>Written report on the role of effective communication. Information leaflet for new staff at a health centre.</td>
</tr>
<tr>
<td>P2, M1</td>
<td>Communication theories… how useful are they?</td>
<td></td>
<td>Presentation on the key features of two theories of communication. Written evidence based on case studies which assesses the application of theories.</td>
</tr>
<tr>
<td>P3</td>
<td>Factors that can influence communication.</td>
<td></td>
<td>Written report. Table identifying factors which affect communication, supplementary explanation of how they affect communication and suggest strategies for overcoming barriers to communication.</td>
</tr>
<tr>
<td>P4</td>
<td>Barriers to communication.</td>
<td></td>
<td>Individual presentations Problem page responses to barriers to communication.</td>
</tr>
<tr>
<td>P5, P6, M2, D2</td>
<td>One to one and group interaction and reflection.</td>
<td></td>
<td>Records and evaluations of both a one-to-one and group interaction. Observational records/witness statement and written evaluation. Action plan on how to achieve better communication skills.</td>
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RESOURCES

Textbooks
Moss B – Communication Skills for Health and Social Care (Sage Ltd, 2007) ISBN 9781412922852
Key Skills Survival Guide: Communication Level 3 (Key Skills Survival Guides); Letts Educational (5 Oct 2000); ISBN-10: 1840854952

Audio/visual
Art of Effective Communication DVD

Journals
Care and Health Magazine
Community Care Magazine
Disability Now
Nursing Times

Websites
www.pavpub.com
www.bbc.co.uk/keyskills
www.chalkface.com
www.hsj.co.uk
www.communitycare.co.uk
MAPPING WITHIN THE QUALIFICATION TO THE OTHER UNITS

Unit 8: Personal and professional development in health and social care
Unit 19: Caring for individuals with additional needs
Unit 25: Support work in social care

LINKS TO NOS

HSC31 Promote effective communication with, for and about individuals
  a – Identify ways to communicate effectively
  c – Support individuals to communicate

HSC33 Reflect on and develop your practice
  a – Reflect on your practice
  b – Take action to enhance your practice

HSC370 Support individuals to communicate using technology
  a – Identify technological communication needs
Staff at the OCR Customer Contact Centre are available to take your call between 8am and 5.30pm, Monday to Friday.
We’re always happy to answer questions and give advice.

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