



OCR LEVEL 2 CAMBRIDGE TECHNICAL

CERTIFICATE/DIPLOMA IN

HEALTH AND SOCIAL CARE

COMMUNICATION IN HEALTH AND SOCIAL CARE

H/600/6872

LEVEL 2 UNIT 1

GUIDED LEARNING HOURS: 30

UNIT CREDIT VALUE: 5



COMMUNICATION IN HEALTH AND SOCIAL CARE

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AIM OF THE UNIT

Communication can be defined as the act of conveying thoughts or information. Learners will discover why being able to communicate well is essential to a successful career in health and social care. Communication is an essential skill and yet there are many examples of it going horribly wrong. Why? In this unit learners will consider the factors which can enhance or inhibit communication and those which can pose a barrier to effective communication. This unit aims to equip the learner with knowledge and understanding of communication, so that they can apply theory to practice effectively within a health and social care environment. Learners will investigate a range of technological aids which can be used in health and social care environments.

PURPOSE OF THE UNIT

There are many different ways of communicating and learners will be introduced to these, for example verbal and written. Learners will consider why communication is so important and which forms of communication are most appropriate in which situation, e.g. a GP may use verbal communication to gain information about a patient's symptoms but use written communication when prescribing medication. An understanding of the communication cycle is important when developing communication skills and learners will have the opportunity to put this into practice. All interactions between individuals may be influenced by a wide range of factors e.g. environmental factors such as noise or an emotional factor such as fear. Learners will explore a wide range of factors and consider the influence each may have on communication and how each may be overcome. Learners will have the opportunity to participate in both a one-to-one and a group interaction, where they will be able to put into practice the different communication skills they have learnt during the unit. Learners will need to assess their communication skills and analyse the impact of factors on each interaction.

ASSESSMENT AND GRADING CRITERIA

Learning Outcome (LO) The learner will:	Pass The assessment criteria are the pass requirements for this unit. The learner can:	Merit To achieve a merit the evidence must show that, in addition to the pass criteria, the learner is able to:	Distinction To achieve a distinction the evidence must show that, in addition to the pass and merit criteria, the learner is able to:
1 Know different forms of communication	P1 identify different forms of communication	M1 describe technological aids to communication used in health and social care environments	
Understand barriers to effective communication	P2 explain barriers to effective communication within a health and social care environment	M2 assess effectiveness of own communication skills in each interaction	D1 analyse the factors which enhanced and inhibited communication in each interaction
3 Be able to communicate effectively	P3 take part in an effective one-to-one interaction		
	P4 take part in an effective group interaction		

TEACHING CONTENT

The unit content describes what has to be taught to ensure that learners are able to access the highest grade.

Anything which follows an i.e. details what must be taught as part of that area of content.

Anything which follows an e.g. is illustrative, it should be noted that where e.g. is used, learners must know and be able to apply relevant examples to their work though these do not need to be the same ones specified in the unit content.

1 Know different forms of communication

- Communication contexts: (e.g. one-to-one, groups, formal, informal; with people who use services, colleagues, managers)
- Forms of communication (e.g. verbal, non-verbal, special methods, written; technological aids, e.g. pagers, video conferencing, skype, text phones, voice output communication aids, augmentative and alternative communication devices (AAC's), writing and typing aids)
- Technological aids (eg. pagers, video conferencing, Skype, text phones, voice output communication aids, augmentative and alternative communication devices (AAC's), writing and typing aids).

2 Understand barriers to effective communication

- Stages of the communication cycle: ideas occur, message coded, message sent, message received, message decoded, message understood
- Factors that affect communication: (e.g. sensory deprivation, language; jargon, slang, dialect, use of acronyms, cultural differences, emotional factors, disability, health issues, environmental factors, interpretation of message, humour, behaviour; aggression, assertiveness, location, time).

3 Be able to communicate effectively

 Skills for effective communication: (e.g. active listening; body language; facial expressions; eye contact; use of appropriate language; tone; pace; proximity; clarifying or repeating).

DELIVERY GUIDANCE

LO1 A class mind map using the interactive whiteboard to highlight the many ways of communicating with people is always a good starting point for this unit. When ideas dry up, tutors can introduce role-play in order to extend ideas further. Learners could be actively involved in identifying on the whiteboard how ways of communicating fit within the different forms e.g. an email is a way of communicating and it fits within both written forms of communication and technological forms. This will generate class discussion as often the ways of communicating fit within two/three forms of communication. To appreciate why communication is so important and the different contexts in which we communicate, clips from TV programmes and You Tube can be shown and followed up with class discussion. Learners could be placed in pairs and given a set of laminated cards, each identifying a way of communicating e.g. talking, smiling, touching, instant messaging. They could group the ways of communicating into the different forms of communication. This could be extended by giving each pair a different scenario and asking them to identify and describe the most appropriate ways of communication for that scenario.

LO2 There are many internet sites dedicated to explaining the communication cycle and its six stages could be independently researched by learners. A class game could be played where a learner calls out an individual's name followed by a number which represents a stage in the communication cycle and then that individual has five seconds to recall the stage or is eliminated. If the learner successfully recalls the stage then they select the next class member to play. The game speeds up as it progresses and ends when all but one learner is eliminated. Developing on from this activity, learners could be provided with transcripts of a conversation and put into groups to engage in a conversation, putting into practice the communication cycle. To facilitate the teaching of factors which can affect communication, a case study could be provided based on a scenario within a health and social care environment e.g. a resident of a care home trying to explain to a care worker that they feel unwell. The room may be noisy due to the television being on loud, the care worker may be rushing due to lack of staff/they are overworked, the resident may be agitated due to being in pain or frustrated, the poor communication skills of the care worker may include poor eye contact and inappropriate pace of speech. The learner then has to identify each factor, describe what impact each has on communication, the effects of the factor on the

resident and suggest ways of overcoming each. Learners could be encouraged to write a case study based on their work experiences and observations, which incorporates factors. Alternatively learners could role play scenarios where the focus is on factors which affect communication and this could be followed up with class discussion on how each factor can influence communication.

LO3 Practicing communication skills can be great fun in a classroom. Providing a group of learners with the same sentence and asking each to say it in a different way, can help to introduce tone, pitch, volume and pace of speech. Working in pairs, ask one learner to attach an undisclosed named character to their forehead. Using closed questions only, they then begin to ask their partner a series of questions, in an attempt to work out who they are. Again in pairs, learners could be placed back to back and provide one with a simple drawing and the other with a blank piece of paper and a pencil. Observations may be made by the tutor/peers, as the learner with the drawing describes what they can see, whilst the other learner follows the verbal instructions to draw a replica picture. Learners may enjoy seeing the results of this activity and analysing why differences occur. To encourage the use of effective body language, each member of the group could be provided with a named emotion e.g. fear, shock, surprise and then asked to express that emotion with their body language and facial expression. Learners can realise just how much we communicate without the spoken word. In order to prepare learners for their assessment, they could be given the opportunity to practice both a one to one and group interaction. This could be filmed and played back to allow learners to reflect on their skills and suggest improvements.

GUIDANCE ON ASSESSING THE SUGGESTED TASKS

P1 Learners could produce a display or a poster which identifies the different forms of communication. They could be encouraged to use pictorial evidence and suggest different ways of communicating, for example lip reading is a form of non verbal communication.

M1 Learners could produce a leaflet to be used when training new members of staff, which highlights different situations, requiring technological aids to communication, that may arise in health and social care environments. The leaflet could describe how and why different types of technological aids could be used

P2 Learners need to explain barriers to effective communication within a health and social care environment. Learners could use their work experience placement and explain potential barriers they have seen/witnessed. Alternatively learners could watch a clip of a TV programme such as Holby City and describe potential barriers to effective communication. This evidence could be presented as a table, alongside a written explanation of each barrier. Barriers to effective communication are those factors which can have a negative affect on communication and are identified in the unit content.

P3 and P4 require learners to take part in a one to one and a group interaction. It is expected that for each interaction, learners will provide evidence that each was carried out. This evidence may be written records, identifying who was involved, the content of the interaction and when and where the interaction took place, including a signed witness statement. Visual evidence of both interactions may be recorded and used as evidence. Learners must ensure that participants are aware of the use of the information being collected and that confidentiality is maintained at all times. If learners cannot use a work experience placement, then role play with peers or staff may be used. M2 requires the learner to assess the communication skills they used in both interactions, they will need to reflect on their performance and assess their strengths and weaknesses. Evidence of this is likely to be written; however, it could be presented as a reflective diary. When planning both interactions it is recommended that learners design a feedback sheet to record their communication skills so that they can collect evidence for a reflective diary. The learner could record their own thoughts on a feedback sheet and ask a peer/tutor/

member of staff to record their observations on another. Collectively both feedback sheets will facilitate learners in assessing the communication skills they have used in each of the interactions. D1 is an extension of P2, P3 and P4; learners are required to analyse the factors which influenced both the interactions. Factors can influence communication in either a positive (enhance) or a negative (inhibit) way and learners must relate all factors to their interactions. Supplementing this evidence could be a drawing of the area where each interaction took place, as this may help the learner to explain factors such as positioning and layout of the room. This could aid learners when analysing environmental factors. Written records should also be submitted and these could be supplemented with photographic evidence.

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.

Criteria	Assignment title	Scenario	Assessment
M1	Communication in Health and Social Care.	Investigating effective communication in a health and social care environment.	Display or poster on types of communication Information leaflet for new staff on technological aids in communication.
P2	Barriers to communication.		Written evidence based on work experience/TV programme which explains barriers to effective communication.
P3, P4, M2, D1	Practical: one-to one and group interaction and reflection.		Written records of planning each interaction. Record of observation sheets. Reflective report/ diary on communication skills. Written records of analysis of factors which affected each interaction.

RESOURCES

Textbooks

Asbridge L, Lavers S, Moonie N, Scott J – *BTEC First Health and Social Care, Revised Edition* (Heinemann,

2008) ISBN 9780435500269

Fisher A – *GCSE Health and Social Care* (Folens, 2009) ISBN 9781850084372

Nolan Y – *NVQ/SVQ Level 2 Health and Social Care Candidate Handbook* (Heinemann, 2005)

ISBN 9780435466985

Rasheed E, Hetherington A and Wyatt L – *BTEC First Health and Social Care* (Hodder Education, 2008) ISBN 9780340971574

DVD

The power of communication DVD, produced by Communication Matters

World of Work Health and Social Care DVD and Learning Resource File (Heinemann, 2008) ISBN 9780435402396

Journals

Care and Health Magazine (PSSRU Publications)

Community Care Magazine (Reed Business Information)

Disability Now (Disability Now)

Nursing Times (Emap)

Websites

www.abilitynet.org.uk

www.bcodp.org.uk British Council for Disabled People **www.britishsignlanguage.com** Basic signs (British sign language)

www.dh.gov.uk Department of Health
www.makaton.org.uk The Makaton Charity
www.nhs.uk National Health Service
www.rnib.org.uk Royal National Institute of Blind People
www.rnid.org.uk The Royal National Institute for Deaf
People

www.skillsforcare.org.uk Sector Skills Council for Care www.skillsforhealth.org.uk Sector Skills Council for Health www.socialworkandcare.co.uk Social care careers information

MAPPING WITHIN THE QUALIFICATION TO THE OTHER UNITS

Unit 3: Individual Needs in the Health and Social Care Sector

Unit 5: Vocational Experience in a Health or Social Care Setting

Unit 6: Cultural Diversity in Health and Social Care

LINKS TO NOS

HSC21 Communicate with and complete records for individuals

- a Work with individuals and others to identify the best forms of communication
- b Listen and respond to individuals' questions and
- c Communicate with individuals
- d Access and update records and reports

HSC23 Develop your knowledge and practice

- a Evaluate your work
- b Use new and improved skills and knowledge in your work

HSC24 Ensure your own actions support the care, protection and well-being of individuals

- a Relate to and support individuals in the way they choose
- b Treat people with respect and dignity
- c Assist in the protection of others



CONTACT US

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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