

Student/ teacher
booklet

UNIT 1

DEVELOPING EFFECTIVE
COMMUNICATION IN HEALTH
AND SOCIAL CARE

UNIT 1 - DEVELOPING EFFECTIVE COMMUNICATION IN HEALTH AND SOCIAL CARE

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. Learners will discover that there are different forms of communication, each with their own advantages and disadvantages. They will realise that for some individuals conventional forms of communication are inappropriate and so the learner will have the opportunity to explore special forms of communication such as Braille or Makaton.

This unit will equip learners with knowledge and understanding of a number of communication theories, for example Egan's SOLER theory, which may be used to enhance their own use of communication. They will also gain an appreciation of the usefulness of such theories in the health and social care sectors.

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

Learning Outcome - The learner will:	Assessment Criteria - The learner can:	Merit	Distinction
1 Understand effective communication and interpersonal interaction in health and social care	1P Explain the role of effective communication and interpersonal interaction in a health and social care context		1D Analyse how cultural variations can influence communication
	2P Discuss theories of communication	1M Assess the usefulness of theories of communication within health and social care environments	
2 Understand factors that influence communication and interpersonal interaction in health and social care environments	3P Explain factors that may influence communication and interpersonal interactions in health and social care environments		
3 Understand ways to overcome barriers in a health and social care environment	4P Explain strategies used in health and social care environments to overcome barriers to effective communication and interpersonal interactions		
4 Be able to communicate and interact effectively in a health and social care environment	5P Participate in a one-to-one interaction in a health and social care context	2M Assess own communication and interpersonal skills for a one-to-one and group interaction.	2D Summarise ways of improving their own communication and interpersonal skills in future interactions.
	6P Participate in a group interaction in a health and social care context		

LO.1: Understand Effective Communication and Interpersonal Interaction in**Health and Social Care****Task 1 (P1) *APPROX 7 PAGES FOR P1***

Title: Explain the role of effective communication and interpersonal interaction in a health and social care context

1. Introduction

Write an introduction to explain why effective communication is important in all health, social care and early year's settings. (pg 53 Nationals) *Approx ¼ page*

2. The Purpose of Communication

Approx 1 – 1 ½ pages

State what the purpose of Communication is:

- To give information
- To obtain information
- To exchange ideas

(Give examples for each that are relevant to H&SC and Early Years settings)

Explain that the context of the communication will be varied it could be: one to one interactions or group meetings. And they are: formal, informal, between colleagues, practitioners, professionals, people that use the service, with differing language skills, ages, disabilities

3. Methods of Communication

Approx 3 - 4 pages

State what the 4 different methods are.

- Oral Communication
- Written Communication
- Computerised Communication
- Special Methods

Using sub headings for each of the methods explain in more detail how each is used in a care setting, using relevant examples.

*Show an understanding of the **advantages** and **disadvantages** of each method.*

4. Interpersonal skills involved in an interaction.

When communicating in any interaction you should be aware of:

Verbal considerations - Language/speech (e.g. first language, dialect, jargon) (pg 10 BTEC level 2 txt bk)

Approx 2 pages

Non verbal considerations (e.g. posture, facial expressions, touch, silence, proximity, reflective listening, prompting (pg 6 BTEC 2, pg 19 Level 2 BTEC, pg 79 OCR Nationals)

Write a paragraph using examples to show the examiner your understanding of what each means.

Subheadings for EACH consideration. E.g. Posture etc.

Approx 2 pages

D1 Cultural Diversity and Communication in Care Settings APPROX 3 PAGES D1

(pg 82/83 OCR Nationals)

1. Introduction

Write an introduction on how communication varies between cultures and give examples in care settings of how this may impact successful communication. Include the following: *Approx 3 / 4 page*

- Eye contact *Approx 3 / 4 page*
- Touch *Approx 3 / 4 page*
- Gesture *Approx 3 / 4 page*
- Proximity *Approx 3 / 4 page*

You should ANALYSE how communication varies between cultures...

- Paragraph 1 – **What is it** and why is it important for effective communication (content from P1) e.g. Eye content
- Paragraph 2 – **ISSUES** that could arise
- *e.g. Africa and Latin American people= strong eye contact*
- *Chinese and Japanese culture = look away and find strong contact confrontational*
- **Give Example:** *THEREFORE, the Latin American man would be trying to “show interest”, however, the Chinese person would feel it was aggressive and confrontational.*

How to AVOID this happening e.g. GP would read the body language of the patient. GP could send written information or speak over the telephone so that the patient did not have to attend the surgery.

(Remember to write in full sentences) ... Aim for 2 examples per non-verbal consideration

2. Theories of Communication (P2) **APPROX 24 PAGES FOR P2**

(pg 60-64 AS Folens, pg85 -87 AS Heineman)

- The Communication Cycle (Argle's)
- S.O.L.A.R (Egan)
- Tuckmans – group interaction

Create a **power point presentation** that you are able to deliver explaining the above theories (choose 2) of Communication.

Include examples of how knowledge of the theory will help a practitioner to be a more effective communicator. **(M1)**

Sources of information

(Look at the case studies in the

As Folens Text book

AS Heineman

Level 2 BTEC

OCR Nationals Text book

www.bbc/keyskills www.chalkface.com

CASE STUDIES SHOULD BE USED AS EXAMPLES

POSITIVE AND NEGATIVE ASPECTS

INCLUDE BIBLIOGRAPHY

LO.2 Understand factors that influence communication and interpersonal interaction in Health and Social Care Environments

P3 *Approx 8 pages for P3*

Title: Explain factors that may influence communication and interpersonal interactions in health and social care environments

1. Environments

Show that you understand how the following factors may have an impact **positive** or **negative** on effective communication. Give examples in different health, social care and early years settings.

Environmental Factors: (pg 62 -70 Nationals, pg 49 - 53 Folen's)

- Settings/ where the meeting takes place
- noise
- seating/ positioning
- lighting
- space
- Allowing sufficient time

Approx 1 / 2 page for each

Other factors

Choose a minimum of 6 from the list below and explain how these factors would also affect communication, using examples from health, social care and early year's settings.

- Language needs
- Sensory impairment
- Disability
- Personality
- Self- esteem
- Depression
- Aggression
- Submissiveness
- Making assumptions/ own beliefs
- Jargon
- Cultural variations
- Abuse of power
- Effects of alcohol/drugs

***Approx 1 / 2 page – 1 page
for each***

LO3: Understand Ways to Overcome Barriers in Health and Social Care Environments**(P4) *Approx 8 pages for P4***

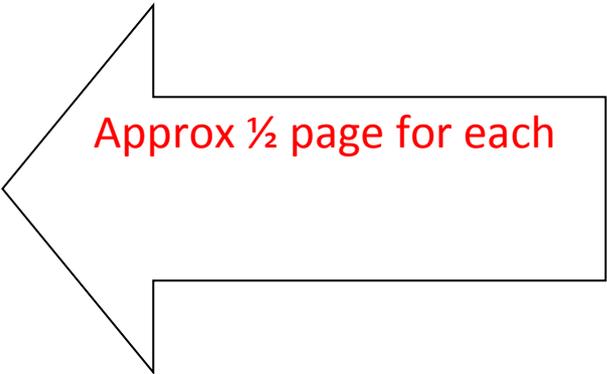
Title: Explain strategies used in health and social care environments to overcome barriers to effective communication and interpersonal interactions

Introduction –

Those who work in the health and social care industry and those who are clients of health and social care services know that there are multiple barriers which effect communication and interpersonal interaction. Listed below are a number of ways to overcome the barrier to effective communication and interpersonal interaction.....

There are many different ways that some of the barrier to communication can be overcome:

- Staff training
- Assessment of people's needs
- Using a preferred method of communication
- Promoting rights
- Confidentiality
- Defusing aggression
- Assertiveness
- Appropriate verbal/non verbal communication
- Building relationships
- Environment



Approx ½ page for each

Write a few lines to describe each of the points above (Level 3 BTEC pg 29-33)

Copy the case study then for your portfolio's write with as much detail as you can to show your knowledge on how to overcome communication barriers.

APPROX 1 PAGE FOR EACH TO SHOW KNOWLEDGE

Case Studies 1 –

A care worker is talking to a young child who is obviously upset and distressed. The worker is sitting at one end of a table and the child at the other. The care worker is speaking in a normal tone and trying to comfort the child without much success.

- Identify the each barrier to effective communication in this case study.
- E.g. Elise is upset
- The distance between the teacher and Elise, with the table between them.
- The teacher speaking in a “normal tone”

How to over come the barrier.

- To remove this **barrier** the teacher also needs to take away the **distance**.
 - Therefore the teacher should remove the **space** between them and sit closer to the child.
 - If they have a strong enough relationship the teacher could **comfort** Elise.
 - However if they don't know each other well enough he must not invade her **personal space** as this may make her feel uncomfortable and **more distressed**.
 - **Positive facial expressions** to reassure Elise. E.g. head nodding , smiling
 - **A mono-tone voice** is neither intimidating or reassuring, it comes across as the teacher not caring either way. They should be soft and gentle in their approach and once Elise is calming down they should become more up beat and positive/ enthusiastic in their tone to make her feel happier and more positive herself.
 - Could rest a hand on Elise's back or leg if they have the relationship where the teacher can have close proximity. This gives reassurance and comfort.
 - **Reflective listening** – ask questions show interest
 - Environment (classroom not appropriate if noisy and full of children. She may feel judged, intimidated and embarrassed).
 - She could be taken to the teachers office or a quiet place. However, the teacher should try and ensure that the door stays ajar so that Elise doesn't feel intimidated etc and that teachers can freely walk past and see there is a conversation happening, just not listen to what is occurring.
 - The teacher will have learnt these techniques from her staff training.
- State how they could be overcome to make the communication more effective.

Case Study 2 – hearing/ day centre

Jack is attending a day centre for older people. He cannot hear very well even though he has a hearing aid. Due to Jack not being able to hear very well he is isolating himself from his peers and staff members and does not wish to take part in the activities.

- What barriers will prevent Jack from joining in with activities and how could they be overcome?

Barriers

- Jack cannot hear very well and therefore has a hearing aid
- Jack isolated himself from others and does not wish to take part

How to overcome the barrier

- Struggles to hear what is going on within the setting due to hearing.
- Therefore has given up and is isolating himself
- He couldn't hear the instructions so it is very important that the care workers explain things clearly and slowly to him.
- They must show him respect.
- Ensure they are facing him squarely
- Sit him closely to the front so he can lip read if necessary
- Those communicating should be aware of their facial expressions
- Why should they not place Jack at the back of the room?
- Visual instructions would be useful
- Keep checking that Jack understands with one to one communication.
- If Jack feels valued and respected in his care home by the carers he will be more inclined to join in rather than isolating himself.

Case Study 3 – language / nursery

Danuta is Polish and attends a local nursery, she speaks very little English. Danuta's parents speak no English at all, this means that those who work at the nursery struggle to explain information and to exchange information.

- What could you do to help Danuta communicate with the other children?
- Her parents also have very little English, how would you make them feel valued and involved with the nursery.

Danuta's barriers

Danuta speaks very little English.

Danuta's parents speak no English and struggle to exchange information.

- **Language barrier:** prevents communication between Danuta and the children and care workers but also between the care workers and Danuta's parents
- The nursery workers should explain to them all in **simple English** and use hand gestures to convey the information. E.g. **nod the head and thumbs up.**
- Show Danuta **objects and pictures.** Get her to repeat the name of the object.
- This will help her to understand her friends and socialise.
- **Her speech may be delayed** due to not understanding the language
- She may get **confused** because of learning 2 languages

- Difficult for the nursery workers to **communicate with the parents** about her progress or concerns
- **Assess the family's needs** – they can't speak English. **Write letters** and translate them in to Polish so that they understand. This would be using Danuta's parent's preferred method of communication.
- Although expensive, **a translator** would overcome the barrier by acting as an interpreter for both the nursery staff and the parents. This would ensure any worries, questions or concerns by both parties are discussed.
- Nursery staff would have learnt this from staff training.

Case Study 4 - **Mobility/ school**

Grace is confined to a wheelchair as she is paralysed from the waist down wards in a swimming accident. She is the parent of one of the children at your school and will be coming in to find out about her son's progress.

- What considerations must you take before Grace comes to the school?

Barriers

- Confined to a wheelchair

Overcome

- **Lacks mobility** which creates a **physical barrier**
- Difficult when the mum needs to attend her daughter's school due to access for Grace's wheelchair. The doors may not be wide enough. She cannot drive so transport may be an issue. She struggles to get on the bus by herself.
- All schools should provide access for wheel chair users ensuring there are ramps and that doors are wide enough for them.
- Need to ensure that the space is wide enough and large enough to **accommodate** Grace's wheelchair. Parents evenings can mean a lot of people and a small amount of space with chairs and tables crammed in close together.
- Ensure **building is accessible**
- Similarly, speak to Grace over the phone to inform her of her daughter's progress.
- Teachers would have been informed how to deal with individuals with disabilities **within staff training** so will know how to prepare for Grace's appointment.
- **Parents evenings** should be held on the ground floor so that Grace is acknowledged and respected.
- Teacher must understand not to tower over Grace to make her feel intimidated.
- The teacher could do a home visit – this shows appreciation and support for Grace and her daughter.
- Grace may feel intimidated in a room full of people so this will ease the intimidation and can be less formal.
- **Reflective listening** – a steady amount of eye contact to show interest and understanding between both people.

Case Study 5 – cultural/ elderly care home

Malik is from a different culture and follows that culture's beliefs. **Malik is in a care home.** Some of the care workers show a lack of respect for Malik's belief and culture in their communication **with him.** **Malik also suffers from dementia so sometimes does not understand that his needs and rights are being neglected.**

- How will this affect their relationship with him?
- What should be done about it by the care home manager?

Barriers

- Malik is from an Asian culture
- Suffers from dementia
- Care workers show Malik a lack of respect when communicating with him.

Overcome

- All play a big role in Malik's communication with the care workers.
- **Cultural views and beliefs** – ensure they have a key worker working with him who understands his beliefs and values
- **Make eye contact** - Malik does not make eye contact as a sign of respect but they may see it as rude or that he isn't listening.
- Care workers should ensure they are **aware of his views** and do not try and change these or push any Christian views on to him, even without realising. This may be singing hymns with the other residents at "song hour"
- He may feel **abused and neglected** if they do not respect his religion.
- **Praying** – Malik could be given his own room to pray in, or privacy to do so in his bedroom. This ensures his needs are being catered for. If they do not support his needs for praying then they are abusing his rights. They must not discriminate and they should treat him equally.
- There will be a **lack of trust** if Malik's needs are not met as he will not feel supported and catered for.
- **Reflective listening and active listening** – both understand how the other feels and what is going on.

L04: Be Able to Communicate and Interact Effectively in a Health and Social Care Environment.**(P5) APPROX 8 PAGES FOR P5****Task**

You have been asked to plan and give a practical demonstration of effective communication skills with a group and with a service user on a one to one basis.

- a) Write a brief introduction to explain what communication is and why we communicate in H&SC settings. – to give info/ obtain info/exchange ideas e.g..... *Approx 1 / 4 page*
- b) Explain the 3 stages of communication and provide example of some of the skills you would use in each stage. (*First contact – main contact – winding down*) *remember e.gs Approx 1 page*
- c) Write up your scenario *Approx 1 / 4 page*

Scenario *EXAMPLE OF A SCENARIO*

Erin is 4 years of age. She attends, Squirrels Playgroup' for three mornings a week. She is an only child. Her Mum who is a single parent brings her to playgroup because she needs to go to work, and believes that Erin needs to socialise with other children. Each morning she arrives, Erin clings to her Mum and cries for her not to leave her. Erin's Mum also finds this upsetting but she drops Erin off quickly at the playgroup and leaves her crying. Erin remains very upset after her Mum leaves her and is quiet and tends to play alone until her Mum collects her.

You are the nursery manager and you want to resolve these problems as it is impacting on Erin's experience at the playgroup, her learning and is emotionally very upsetting for her.

One to One interaction.

You arrange a meeting with Erin's Mum to discuss the plan you have developed to help support Erin settle into the nursery. Erin's, Mum agrees to meet with you at the end of playgroup whilst Erin is being looked after by a nursery nurse.

Task

Write up your Task scenario ***APPROX 3-4 PAGES FOR h)***

d) Describe how you plan for the meeting. This must include:

- i. Where you intend to hold the meeting and why,
- ii. The time of day that you are planning to arrange the meeting for and why?
- iii. What is the purpose of the meeting
- iv. Draw the room layout with an explanation of why you have chosen this layout
- v. Describe the factors that may inhibit your communication and how you plan to overcome them
- vi. Describe the possible barriers to your communication and explain how you plan to overcome them

e) The 1:1 interaction : Initial contact

(Approx 1 page transcript) (Approx ½ - 1 page overview)

Write out your transcript of the 'initial' part of meeting, who said what? What skills did you use to communicate? Where these skills effective; explain how you know.

How did the service user react?

Which skills were not effective why do you think this?

Use pieces of your transcript to support your views.

f) The main interaction:

(Approx 2-3 page transcript) (Approx ½ - 1 page overview)

Write out your transcript of the 'main' part of meeting, who said what?

What skills did you use to communicate?

Where these skills effective; explain how you know.

How did the service user react?

Which skills were not effective why do you think this?

Use pieces of your transcript to support your views.

g) The 'winding up' end of the communication

(Approx 1 page transcript) (Approx ½ - 1 page overview)

Write out your transcript of the end of the meeting, who said what? What skills did you use to communicate?

Where these skills effective; explain how you know.

How did the service user react?

Which skills were not effective why do you think this?

Use pieces of your transcript to support your views

P5 Summary of layout.

1. Introduction
2. Stages of communication
3. One to one communication (taken from P1)
4. Title: One to One interaction
5. Scenario
6. Description i-vi
7. Initial contact
 - transcript
 - outcome
8. Main interaction
 - transcript
 - outcome
9. winding down
 - transcript
 - outcome

P5 Approx 8 pages

LO4: Be Able to Communicate and Interact Effectively in a Health and Social Care Environment.**One to one Scenario example**

-James is 10 years old and is in his last year at the local primary school, Bourton – on – the – water Primary School.

-The school has become more aware of his bad behaviour over the past couple of weeks.

- Certain members of staff believe that his bad behaviour is a way to reach out and get attention due to him not having as many friends as the majority of the other children within class.

- They also believe it is due to the friends that James associates with and potentially that they are a bad influence on him.

- All members of staff in the school have noticed that before James' bad behaviour occurs he has an angry outburst, which leads to an inappropriate behaviour such as throwing objects across the classroom and shouting at both the teachers and the children.

- Due to these angry outbursts, violence has taken place and other children have been hurt.

- James' mum is unaware to the majority of the outbursts apart from the ones which have ended in violence.

- The staff within the school have become aware that James' outbursts take place an hour before lunchtime and his behaviour calms down 10 mins before his mum picks him up.

h) Describe how you plan for the meeting. This must include:**vii. Where you intend to hold the meeting, and who you are meeting and why.**

- e.g. I am James' class teacher. I have organised a meeting with his mum, Kelly, to inform her of James' behaviour as well as to discuss and help organise a plan to benefit James within school.

- I am also going to speak about whether there is any correlation between his behaviour at school and at home and whether it differs.

- James will also be at this meeting as I feel he is old enough, now in Year 6, to be able to discuss his behaviour and reasons behind it.

- I will hold the meeting on the school grounds, in my office. James has been here before to calm down. It is a formal environment, however, because James has been here before he should not feel uncomfortable during the conversation.*

viii. The time of day that you are planning to arrange the meeting for and why?

- **The meeting will be held straight after school at 3.30pm on Thursday.***
- Today is Monday, so it will give Kelly time to assess her son's behaviour at home and think about a plan of action from her side. I will do the same from a school perspective.*
- We are holding it straight after school as this is convenient for Kelly as she has to pick up her older children from the secondary school at 5pm. This will give her time to get to them and not encroach on her evening. She will feel valued that we are aware of her family's needs and are holding the meeting at a convenient time for her.*
- Ultimately, the aim is to come up with a mutually agreeing plan where all parties are happy.*

- The aim is for James to feel positive about his school life, valued, and that Kelly feels supported by the school and vice versa.
- However, if James' behaviour does not improve it will be suggested to Kelly that he sees a counsellor and/ or anger management classes arranged by the GP or CYPS. If he is unable to improve his behaviour he will have fixed term exclusions and, ultimately, a permanent exclusion.
- This would mean that Kelly would have to find him another school. This is not ideal as the next closest school is a 30 minute drive away. This would not be convenient given that Kelly also has to drop off and pick her older children up from school on a daily basis.

ix. Draw the room layout with an explanation of why you have chosen this layout

- An example of the office lay out is shown below.
- We are in my office so that the conversation can be formal and also that no one is going to walk in. Therefore it can be a private conversation.
- I will, however, make Kelly aware that I will be sharing necessary info with my colleagues at the staff meeting so that they are aware of our strategies and any insight in to James behaviour.
- We will be sat on the comfy sofas so it is a relaxed environment.
- Kelly and I will be sat opposite each other to ensure that the meeting is formal, however, to prevent the feeling of intimidation there is a coffee table between us.
- This creates a barrier which enables the people within the conversation to feel more relaxed.
- Tea and Coffee
- biscuits

x. Describe the factors that may inhibit your group communication and how you plan to overcome them

Factors to consider when organising the meeting:

- Noise
- Seating
- Lighting
- Time

Noise

- Out of the way from the classrooms and the main hall way so it is quiet.
- Holding it after school will mean that the majority of children will have been collected and it will only be teachers within the school doing marking. There will be an after school club, however, these children are kept in the main Hall which is not near my classroom.
- Therefore, noise should not inhibit our meeting and we will be able to communicate with very little noise disturbing our interaction.

Seating

- We will be sat on the sofas so that Kelly feels valued, comfortable and not intimidated.
- Although Kelly is sat opposite me, it will be still be a comfortable environment.
- There is also a table between the two sofas which maintain tea, coffee and biscuits. This will make Kelly feel warm and welcomed.
- The seating should enable us to apply the SOLER principles throughout the conversation.

Lighting

Time

- I will ensure that I do not rush Kelly so that she feels valued and appreciated.

- However, if she starts to conclude the conversation I will know that she is needing to swiftly finish the conversation.
- I will reinforce that she is welcome to email or phone me after the meeting if she has any more concerns or questions.

xi. Describe the possible barriers to your group communication and explain how you plan to overcome them

Barriers

Use your table in the book to help you with barriers. Discuss all the barriers that may occur with Kelly.

- Due to James being Kelly's youngest child she may feel obliged to **protect him** and therefore become **defensive**. Parents have recently **split up** so she may feel that is the reason behind James' behaviour. The school were not aware of this so were unaware that a change in circumstances and upheaval at home could be the reason.
- I must ensure that I remain **assertive yet approachable** from a teaching perspective so she understands the severity of James' actions. I will also let her know that I understand there are other factors to consider and that I am positive her can "turn it around"
- I will also give Kelly ALL the facts/ incidents that have occurred so that she has a full picture of what has been occurring.
- Kelly may be **embarrassed** about James' behaviour as she has never previously had any behavioural issues with her children.
- I have ensured she comes up with a **plan prior to the meeting** so that she is prepared and does not feel that she needs to be submissive to my ideas.
- I will ensure, prior to the meeting, when I phone Kelly (**initial contact**) that the aim is for the meeting to have a positive outcome rather than just informing her of all the negative behaviour James has been showing.
- **Collecting her other children** – I will reassure Kelly that she may leave whenever she needs to to collect her children. The plan prior to the meeting will also ensure that it will be smoother and quicker.
- **Technology**: I will ensure my computer is logged off and my phone is off so that there will be no distractions. I will inform SLT (senior Leadership Team) and the Head's PA (Personal Assistant) that if they need to phone my phone in the office it should only be in an emergency as I am in a meeting with a parent.
- **Kelly may be depressed** – this is due to her recent split with James' father. They are about to start going through a divorce. Therefore, Kelly may not be very forthcoming in the conversation or want to talk about James' home life because it is too painful for both of them. James may also not want to speak about it in case he upsets his mother.
- I will ensure that I will keep as much information as I can **confidential** and just use the term "At home difficulties". This will help us to form a rapport and show that I have **empathy** for the situation. I will reinforce the fact that all staff have **staff training** to inform them of how to deal with such situations and information.
- Staff members walking past the office may make her feel uncomfortable, especially if they keep going back and forth. I will reiterate the fact that they know to be discreet and will not be listening. WE have had staff training. I will also place a note on the door saying "**meeting in progress**".
- I will take notes to ensure communication is exchanged effectively. However I will ensure that Kelly approves this. I will also suggest that she makes notes in case she needs to refer back to anything within our meeting. It should show Kelly that I am taking her views and information seriously and make her feel valued. She will also know that I have been listening intently and am interested.

APPROX 3-4 PAGES FOR d)

(P6) APPROX 7 PAGES FOR P6**A Group Interaction. EXAMPLE OF A SCENARIO**

You are the nursery manager. You arrange a meeting of the playgroup team to discuss how you can address the issues that Erin is experiencing. You want to develop a plan that supports Erin by helping her to settle into the group without crying when her mum leaves her and that helps Erin to join in playgroup activities. You understand that Erin's mum also gets upset so helping Erin to settle in and join in the playgroup will also resolve her Mums' anxiety.

Task**i) The group interaction : Initial contact**

(Approx 1 page transcript) (Approx ½ - 1 page overview)

- Write out your transcript of the 'initial' part of meeting, who said what? What skills did you use to communicate? Where these skills effective; explain how you know.
- How did the group members react.
- Which skills were not effective why do you think this?
- Use pieces of your transcript to support your views.

j) The main interaction:

(Approx 2 pages transcript) (Approx ½ - 1 page overview)

- Write out your transcript of the 'main' part of meeting, who said what? What skills did you use to communicate?
- Where these skills effective; explain how you know.
- How did the group members react?
- Which skills were not effective why do you think this?
- Use pieces of your transcript to support your views.

k) The 'winding down' end of the communication

(Approx 1 page transcript) (Approx ½ - 1 page overview)

- Write out your transcript of the end of the meeting, who said what?
- What skills did you use to communicate?
- Where these skills effective; explain how you know.
- How did the group members react?
- Which skills were not effective why do you think this?
- Use pieces of your transcript to support your views

Layout – 1:1 interaction

Initial contact: Phone call

Mrs Thomas: Hello, this is Mrs Lewis phoning from Bourton on the water Primary School. Am I speaking to Mrs Smith?

Mrs Smith: Hello, yes you are.

Etc etc etc

Thursday 3.30pm. At School.

Mrs Thomas: “”

- *Smiling, whilst holding the door open with one hand and shaking Miss Smith’s hand with the other. Gives Miss Smith a visitors badge**

Mrs Smith: Hello, and thank you for inviting me in to discuss James’ behaviour. Please call me Kelly.

This is Kelly clarifying she is aware of the situation and also informing me of using her first name will make us both feel more comfortable and relaxed.

.....

Overview of initial contact

- Throughout this part of the transcript, it was noticeable that there was a lot of non-verbal communication used, especially more in this section of the transcript.
- **Gesture** – I used a handshake to greet her and a smile. This made it feel relaxed and helped to start building a rapport.
- **Eye contact** – I used eye contact whilst smiling to help with the rapport and show I was valuing her presence.
- **Atmosphere** – made it welcoming by offering her tea and biscuits
- **Preferred name** – I asked how she would like to be referred to as so that she felt as comfortable and relaxed as possible under the circumstances.

The main interaction....

Mrs Thomas: “”

Mrs Smith:

Overview of main interaction

- Throughout this part of the transcript there was an equal amount of both non-verbal and verbal communication used. I also maintained a tone that was calm and neutral when suggesting ideas to Kelly as well as keeping my voice calm when she began to raise her voice due to becoming defensive about James’ behaviour.
- Due to me doing this it kept the environment calm and comfortable.
- My tone of voice also represented to both James and Kelly, that I wasn’t angry about his behaviour because I knew we could overcome the issue and come up with a solution.

The winding-up end of the communication**Mrs Thomas: “”****Mrs Smith:****Overview of the winding-up interaction**

- The conclusion of the conversation is the winding – up stage. This uses both verbal and non-verbal.
- We both used the gesture of smiling to convey positivity and thanks for the conversation.
- Shook each other’s hands to show respect and thanks in a formal manner.
- I offered Kelly the opportunity to offer any more questions as this is one of the key points in this stage of the interaction – to make sure everything is clarified.
- Due to me carrying out both verbal and non-verbal actions meant that Kelly and I had built a working rapport, and means that it should hopefully be easier for us to communicate in the future.

M2: Assess own communication and interpersonal skills for a one to one and group interaction**APPROX 4-5 PAGES FOR M2**

Open/ closed questions

Tone

Pace

Eye contact

Body Language

Clarifying

Summarising

Paraphrasing

Empathising

Verbal considerations –

Language and the way you speak for example if English is not the first language, whether there are any dialect issues, be aware of using jargon) *pg 10 BTEC level 3 txt bk*

Non verbal considerations –

Posture, facial expressions, touch, silence, proximity, reflective listening, prompting (*pg 10 BTEC 3 pg 79 OCR Nationals*)

Examples of supporting care values in a care setting

M2 example**One to one interaction*****I PLAYED THE ROLE OF Mrs Thomas***

-When completing my one to one interaction I realised that I used a good amount of both non-verbal and verbal communication.

-This was beneficial because if I had of just used **non-verbal communication** it is likely that information would not have been exchanged clearly and would have **not made sense**.

-If we had only just **verbal communication** then we would not have used gestures such as smiles and hand shakes. This could have meant Kelly felt I was rude and had no interest in helping James' behaviour. It would have made me seem far less personable.

-Eye contact was useful as it showed I was engaged. If not I may have looked disengaged and completely uninterested.

- Examples of non verbal considerations I used.....

Examples of verbal considerations I used.....

- Role play – seemed more informal than if it was real as it wasn't actually real life.

- More stunted and did not flow as well as a real conversation as it was staged.

- If it was real life it would have been more natural and there would have been flow from reflective listening etc.

- Communication cycle – I had to use this to inform me how to word a conversation with an adult, as an adult. Of course, I had to ensure that I didn't use any jargon as a teenager as this would not be appropriate.

- I watched my teachers to see their mannerisms and how they acted. They were my role models for the conversation.

Group interaction.

- I should have used more verbal skills
- I used a good amount of non verbal throughout. – shaking hands, eye contact , smiling with colleagues.
- They therefore felt valued and welcome
- Tone of voice – stayed the same in order to keep the meeting semi - formal.
- Beverages were available to make colleagues more engaged and feel comfortable.
- I was able to use as many as the skills as possible which I had used throughout the Unit.
- Clarified information.
- I tried to include everyone within the meeting so not to feel left out.
- I told people to come and find me or email me if they had any questions but I should have asked them there and then if they had any questions. I may have looked in a rush and rude in the winding up phase.

One to one and group

- I used open/ closed questioning.
- Open questions allow for greater depth of conversation rather than simple yes / no answers.
- Closed questions were useful in the winding up phase “Do you have any more questions, Kelly?” “No. Thanks, I have all the information I need”
- Eye contact used a lot but not too much as can be seen as intimidating or threatening.
- Clarification.

D2: Summarise ways of improving your own communication and interpersonal skills in the future

Give a detailed paragraph of **how much you have learned** by completing this unit and **how that will impact on further interactions** you may have in the work place, interviews, general interactions with friends etc.

- Give details from information throughout the unit!
- It has made me think about how I communicate and who I am communicating with. I have felt about how to communicate with my friends in comparison to my grandparents who have dementia and hearing difficulties.
- I would have just used Jargon and been looking at my phone when talking to my grandparents (not really showing any interest), however, now I know that I need to have more care in my communication with them – look at them when speaking to them etc, speak clearly etc. I reflect back to the SOLER theory.
- It will help with job interviews and general communication with colleagues in a professional setting.

APPROX 1-2 PAGES FOR D2

RESOURCES

Textbooks

Barett S (editor) – *Communication Relationships and Care* (Routledge, 2004) ISBN 9781412922852

Collins S – *Effective Communication* (Jessica Kingsley, 2009) ISBN 9781843109273

Nolan Y – *NVQ/SVQ Level 3 Health and Social Care Candidate Handbook*, 2nd Edition (Heinemann, 2008)

ISBN 9780435466992

Mamen M – *Understanding Non-Verbal Learning Disability* (Jessica Kingsley, 2007)

ISBN 9781843105930

Moss B – *Communication Skills for Health and Social Care* (Sage Ltd, 2007) ISBN 9781412922852

Stretch B, Whitehouse M – *BTEC National Health and Social Care Book 1* (Heinemann, 2007)

ISBN 9780435499150

Stretch B and Whitehouse M – *BTEC Level 3 Nationals in Health and Social Care Student Book 1* (Pearson,

2010) ISBN 9781846907663

Thompson N – *People Skills* (Palgrave MacMillan, 2009) ISBN 9780230221123

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

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

ISBN 9780435402396

Journals

Care and Health Magazine

Community Care Magazine

Disability Now

Nursing Times