

Level 2 Health and Social Care: Core

Unit 001 Principles and values of health and social care (adults)

Legislation, national policies and Code of Conduct and Practice

Introduction

Several key principles underpin health and social care services in Wales. These are:

- The individual is at the centre of everything we do.
- Services should be designed around their individual needs.
- Professionals should work together with the individual to meet their needs.
- The well-being and protection of the individual is paramount.
- Services must always promote diversity, independence, choice, empowerment, identity and safety.



How legislation and national policies underpin health and social care and support for individuals

- Legislation and Codes of Practice have been developed to ensure these principles underpin the way services are designed and delivered.
- This legislation and the Codes tell workers how they should support individuals and how services should be planned, and they should underpin everything we do.
- There are several pieces of relevant legislation and Codes to be looked at. The key piece of legislation is the Social Services and Well-being Act 2014.



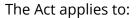
Principles and values of Social Service and Wellbeing (Wales) Act 2014

The Social Services and Well–Being (Wales) Act 2014 changed the way local authority social services and other care services work together in partnership to help and support individuals.

The Act helps ensure that individuals enjoy well-being in every area of their lives, as much as they choose and are able to. The Act brings together and modernises different pieces of existing social care law.

This new legal framework consists of three elements:

- the Act
- the regulations, which provide greater detail about the requirements of the Act
- the codes of practice, which give practical guidance about how it should be implemented in social care settings.



- adults individuals aged 18 or over
- children individuals under the age of 18
- carers adults or children who provide care and support.

The Act is made up of 11 parts, consists of five principles and clearly identifies the individuals the Act affects.

The principles or values of the Act are important as they impact on the way services are provided and how we work with and support individuals.

Activity 1



The Act is built on the following core principles:

- Voice and control, which means putting the individual and their needs at the very centre of their care and support so that they have voice and control over the outcomes that will help meet their needs.
- Prevention and early intervention involves encouraging individuals to ask for help or support when they need it, not when it may be too late.
- Well-being identifies how to support individuals to achieve well-being in every aspect of their lives. This involves all of the relevant services



working together to support an individual's health and well-being, for example.

• Co-production is working with individuals, their family, carers and friends to identify and meet their support needs.

The Social Services and Well-being Act and Advocacy

Individuals have full control when deciding the support they need, and in relation to making
decisions about their care and support they are viewed as an equal partner. Individuals can
use an independent professional advocate to help them participate fully in the assessment,

care and support planning, review and safeguarding processes. Individuals also have a right to an independent professional advocate provided free of charge if they have difficulties in expressing their views, needs, wishes and preferences.

 As a carer, this impacts on your role as care must now be personalised to the individual through collaboration with them, which may involve support for them from an advocate.



 An advocate offers independent support to individuals who might not be heard, to ensure they are taken seriously and that their rights are respected. Advocates also help individuals to access and understand appropriate information and services.

Activity 2

Key legislation

There are also numerous other pieces of legislation which are underpinned by the key principles and values mentioned earlier:

 The Human Rights Act 1998 sets out the fundamental rights and freedoms that everyone in the UK is entitled to. The Act incorporates the rights set out in the European Convention on Human

Rights (ECHR) into domestic British law.

 The UN Convention on the Rights of Persons with Disabilities is an international legal agreement, which exists to protect and promote the human rights of disabled individuals.

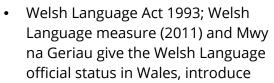
 The UN Principles for Older Persons 1991 consists of 18 principles, which can be grouped under five themes: independence, participation, care, self-fulfilment and dignity. Governments were encouraged to



incorporate them into their national programmes whenever possible.

- Declaration of rights of older people in Wales (2014) sets out the rights of older individuals in Wales.
- The Mental Health Act (1989), Code of Practice for Wales (2008) and the Mental Health (Wales) Measure (2010) place legal duties on local health boards and local authorities about the assessment and treatment of mental health problems and ensures an individual's rights are upheld throughout access to services.
- The Mental Capacity Act 2005 and associated Code of Practice are designed to protect and give back power to vulnerable individuals who may lack capacity to make certain decisions, because of the way their mental health is affected by illness or disability, or the effects of drugs or alcohol.

- Deprivation of Liberty Safeguards (DoLS) are an amendment to the Mental Capacity Act 2005. They apply in England and Wales only. DoLS can only be used if the individual will be deprived
 - of their liberty, or freedom and rights, in a care home or hospital. In other settings the Court of Protection can authorise a deprivation of liberty. Care homes or hospitals must ask a local authority if they can deprive an individual of their liberty and there are six assessments which have to be carried out before a standard authorisation can be given.





- standards to explain how organisations are expected to use the Welsh Language, increase the use of the Welsh language and make it easier for individuals to use it in their everyday lives.
- The Welsh Government Strategic Framework for the Welsh Language in Health and Social Care (2013) is the Welsh Government's commitment to strengthen Welsh language services to individuals accessing health and social care, and their families.

Activity 3

Principles of the Social Services and Well-being (Wales) Act 2014

Putting it into practice

It is important that timely advice and assistance is provided to individuals to prevent their situation from getting worse. Stepping in early to help individuals is crucial as it can reduce or delay the need for longer term care and support.

Sean is 84 years old and lives on his own in a very rural part of Wales. His wife died 27 years ago, and his daughter lives in Scotland. Sean has started to develop sight and hearing loss, so now needs help with all aspects of daily living.

Activity 4

Supporting practice

Individuals have full control when deciding the support they need, and in relation to making decisions about their care and support they are viewed as an equal partner. Individuals can use an independent professional advocate to help them participate fully in the assessment, care and

support planning, review and safeguarding processes. Individuals also have a right to an independent professional advocate provided free of charge if they have difficulties in expressing their views, needs, wishes and preferences.

As a worker, this impacts on your role as care and support must now be personalised to the individual through collaboration with them, which may involve support for them from an advocate.

An advocate offers independent support to individuals who might not be heard, to



access and understand appropriate information and services.

Activity 5

Codes of Practice

- These codes consist of a list of statements describing the standards of professional conduct and practice necessary for employees in health and social care professions in Wales.
- The Codes play a key part in raising awareness of these standards.
 They are intended to be a guide for workers, individuals accessing services and managers of services.
- In relation to individuals receiving care, the Codes will make the individuals aware of how care workers should behave towards them, and also the role of employers in supporting care workers to do their jobs well.
- Employers of care workers are expected to promote the use of the Codes and take account of them in making any decisions about the conduct and practice of staff.



The NHS Wales Code of Conduct for Healthcare Support Workers in Wales

The NHS Wales Code of Conduct for Healthcare Support Workers in Wales describes what is expected from Healthcare Support Workers employed by NHS Wales in relation to the standards of conduct, behaviour and attitude expected when they are at work. The Code applies to all Healthcare Support Workers employed in clinical and non-clinical environments within the NHS and will be used to reference job descriptions.



The Code provides confidence and reassurance through a framework for public

protection incorporating the provision of guidance and support to Healthcare Support Workers about their practice to ensure they understand what standards of conduct employers, colleagues, service users and the public expect them to follow.

The Code sets out standards, so Healthcare Support Workers can be sure what standards they are expected to meet. Healthcare Support Workers should use the Code to assure themselves they are working to the standard and if not then change the way they are working.

Healthcare Support Workers can use the Code to review their practice and identify possible areas for personal development. The Code supports Healthcare Support Workers to fulfil the requirements of their role, behave in the correct way and follow a duty of care and good practice. This is essential to protect service users, public and others from harm and abuse.

The Code of Professional Practice for Social Care is made up of seven sections

As a social care worker, you must:

- 1. Respect the views and wishes and promote the rights and interests of individuals and carers.
- 2. Strive to establish and maintain the trust and confidence of individuals and carers.
- 3. Promote the well-being, voice and control of individuals and carers while supporting them to stay safe.
- 4. Respect the rights of individuals while seeking to ensure that their behaviour does not harm themselves or other individuals.
- 5. Act with integrity and uphold public trust and confidence in the social care profession.
- 6. Be accountable for the quality of your work and take responsibility for maintaining and developing knowledge and skills.
- 7. In addition to sections 1 6, if you are responsible for managing or leading staff, you must embed the Code in their work.



(https://bit.ly/2GsrAm9)

Practice Guidance

The Practice Guidance for Residential Child Care for Workers Registered with Social Care Wales

describes what is expected of workers to support a high-quality service in relation to residential child care.

The guidance can also be used by employers to assess whether they have arrangements in place to ensure a professional and safe service is delivered at all times. The guidance covers child-centred care and support, good residential child care practice, safeguarding individuals, health and safety, professional development, learning culture and contributing to the development of others and contributing to the service, including



raising concerns. The guidance builds on the 'Code of Professional Practice for Health and Social Care', and failure to follow the guidance could put a workers' registration at risk.



(https://bit.ly/2kgmD7s)

Code of Conduct and Professional Practice for Health and Social Care and their impact on the principles and values of health and social care

Social care workers are responsible for making sure that they work to the standards in the Codes of Conduct and Professional Practice. Workers must ensure that their conduct and practice meet the standards, and that no action or omission on their part harms the safety or well-being of individuals.

The Codes of Conduct and Professional Practice provide a criteria to guide the workers' practice and gives clarity about the standards of conduct that they are expected to meet. Workers are encouraged to use this guidance to examine and reflect on their own conduct and practice and to identify areas in which they can improve.



Activity 6

Key elements of a rights-based approach

Introduction

Health and social care settings reflect the diversity of the population. For example, individuals in a care home for older individuals may range in age from 60 to well into their ninth decade. Preferences, such as food and music, for example, will vary from one individual to another, as will attitudes towards staff and fellow individuals. Beliefs will vary, as will political ideas and religious faiths, health status and physical and intellectual ability.

It is key that these needs, wishes and preferences are identified and met, and the legislation, national policies and Code of Conduct and Practice we have already explored do just this.

In relation to the provision of a rights-based approach, underpinning this is the Social Services and Well-Being (Wales) Act 2014. This is an important piece of legislation about how carers should be providing care and support to individuals accessing services in Wales.

In addition, advocacy underpins the principles of the Social Services and Well-Being (Wales) Act and is a valuable way of supporting the voice, choices and well-being of individuals. Advocacy can help individuals access information about services, be



involved in decisions about their lives, explore choices and options, and make their needs and wishes known.

What is a rights based approach?

A rights based approach involves service delivery that places principles and values as central to all aspects of service planning, policy and practice. For example, social care workers are expected to treat each child and young person as an individual, respect and promote their individual views and wishes, and support their right to have control in their lives and be able to make informed choices. It is a way of providing care that is centred around the child or young person, not just in relation to their health needs. Individual centred values and approaches ensure that the rights of individuals are upheld and cover the total care of the child or young person. The child or young person is the centre of their care, so they must be consulted, and their views must always come first.

People's rights

- Choice
- Confidentiality
- Protection
- Equality
- Consultation

We are all different; no two individuals are the same. As an example, it is not correct to say that because two individuals have dementia, they both have the same care and support needs. Individual-centred values ensure a comprehensive understanding of individual needs and the development of appropriate individual care and support plans for all.

Activity 7

How can we provide a rights-based approach?

Often carers will be supporting individuals when they are in a vulnerable position. The quality of care that is received depends on how carers can effectively support and meet the needs of the individual, having a sound knowledge of the individual and what their requirements are.

Knowledge, for example, can help the carer understand why individuals behave in the way they do. A care and support plan, based on an person-centred approach, will help in understanding some of this.



Individual-centred planning involves seeing the individual being supported as the central concern. Carers need to find ways to support the individual, not providing the same for everyone.

Rights-based approaches, involving individual-centred planning, are a way of helping individuals to think about what they want now and in the future. They are about supporting individuals to plan their lives, work towards their goals and get the right support. They are a collection of tools and approaches based upon a set of shared values that can be used to plan with an individual, not for them. Planning should build the individual's circle of support and involve all the individuals who are important in that individual's life.

A care and support plan describes in an easy, accessible way the services and support being provided, and should be put together and agreed with the individual through the process of care planning.

What do you think a care and support plan should include? Think about what you would like people to know about you if you had to go into care. How do you think this should be completed and on what format should it be recorded?

How legislation and national policies underpin a rights-based approach

Legislation and national policies underpinning a rights-based approach

Not supporting an individual to make choices or have their needs met is an injustice and has devastating effects.

Wales has numerous pieces of legislation, rules, regulations, policies, guidance documents and statutory codes of practice in place. All of which promote diversity, ensure equality and end discrimination. These are in place to promote everyone's right to fair and equal treatment, regardless of their differences.

The Social Services and Well-being Act is the key piece of legislation which ensures services work in a person-centred way to support a rights-based approach.



For example, the Human Rights Act 1998 covers many different types of discrimination, including some that are not covered by other discrimination laws. Rights under the Act can be used only against a public authority; for example, the police or a local council, and not a private company. However, court decisions on discrimination usually have to take what the Human Rights Act says into consideration.

To make Britain fairer and strengthen anti-discrimination laws, the Equality Act 2010 provides understandable, practical guidance for employers, service providers and public bodies to ensure that rights to fair treatment are promoted for everyone.

Implementing legislation and national policies in health and social care

All the individuals working in health and social care must demonstrate their ability in putting diversity and equality into practice, ensuring the individual is at the centre of service delivery. By following a rights-based approach, they are challenging discrimination against the individuals using care services, their families and fellow-workers.

The essence of a rights-based approach is that it is unique to, and owned by, the individual being supported. But how do legislation and national policies support this? One example of this is the Mental Capacity Act (MCA) 2005.

It may be that the individual cannot always make decisions for themselves. The Mental Capacity Act 2005 is intended to support such times. It came into effect from 1 April 2007 and covers England and Wales. The Act provides a statutory framework for individuals who may not be able to make



their own decisions because of mental disability. It promotes fair treatment for individuals who may be affected and protects the rights of some of the most vulnerable individuals in society. The Mental Capacity Act 2005 will help individuals to make their own decisions. It will also protect individuals who cannot make their own decisions about some things. This is called lacking capacity.

The Act tells individuals:

- what to do to help someone make their own decisions about something
- how to work out if someone can make their own decisions about something
- what to do if someone cannot make decisions about something sometimes.

Activity 8

How legislation impacts on a rights-based approach in practice

Rights-based approach

Workers must aim to ensure that they provide an inclusive and rights-based approach — in other words that their practice promotes equality and diversity, does not discriminate and shows respect

for beliefs, choices, cultures, values and preferences.

It is important that workers are aware of their own attitudes and how it may affect their work. If, for example, their interactions with individuals are affected because they label or stereotype them, or hold a negative prejudice against them, they are likely to be accused of discrimination. If they make all the choices for the individual, they are not delivering a right-based service.



Workers must keep prejudices to themselves and maintain a positive attitude towards everyone, regardless of their differences. workers should be respectful in their approach and show individuals that they value them for who they are.

Workers need to build a rapport with individuals through a positive working relationship. This will



ensure that all workers who are working with that individual are fully aware of their beliefs, preferences, needs and values. This co-productive approach will ensure that the individual is receiving a consistent approach to their care.

Increasing their understanding of why individuals think and behave as they do will enable workers to support them appropriately in exercising their rights and meeting their needs.

Workers should be able to implement the policies and procedures in practice in order

to meet the needs of individuals, upholding their rights to fair and individualised care and support. By following relevant legislation and codes of practice, a team can work together, alongside other organisations, to ensure that each individual is having their specific needs met.

Activity 9

Advocacy and how it can support a rights-based approach

The role of advocacy

Many individuals do not have the capacity to make their own voices heard. For example, they may be frightened or lack the confidence to speak up for themselves; they may be ill, confused and not able to communicate effectively; and many individuals are just simply not aware of their rights.

Advocates can be valuable in empowering individuals to be able to express themselves whilst being supported or acting on behalf of the individual with their consent.

Advocacy is the process of speaking up about an issue that is important to the individual. This can be either self-advocacy, where the individual speaks on their own behalf; or citizen advocacy, where a volunteer from a local advocacy group speaks on behalf of the individual.

Due to the complexity and sensitivity of some issues, advocates would be used within a professional capacity; for example, a solicitor or welfare rights consultant. This form of advocacy does not replace the likes of citizen advocacy or self-advocacy but works alongside it.



Activity 10

When an advocate can help

Professionals, organisations and even family carers need to recognise the role and work of advocates in independently supporting individuals. An individual may be living in a care or supported setting,

or with their family, and can still avail themselves of an advocate.

In all cases, the relationship is confidential to the individual and their advocate partner. Such partnerships can grow into long-term friendships which give much to supporting and safeguarding individuals and their interests, particularly if they live in a long-term care setting. All of these activities contribute to supporting a rights-based approach by ensuring an individual's voice is heard, irrespective of their communication needs or abilities.



Supporting individuals and their families or carers to make complaints or express concerns

Complaints and concerns

Health and social care settings, like any other workplace, must be able to adapt, ensuring that individuals have an awareness of and access to a robust complaints and concerns system is crucial.

A complaint is an expression of dissatisfaction about employees' actions, lack of actions or the standard of service provided. A complaint could be one of the following:

- action or lack of action by the organisation affecting an individual or group
- an allegation that the organisation has failed to observe proper procedures
- an allegation that there has been an unacceptable delay in dealing with a matter or about how an individual has been treated by a member of staff.



Within the health and social care sector, a complaint is an expression of dissatisfaction that requires an investigation and a response. Concerns are softer, not so accusatory and might suggest how an issue could be improved or resolved.

The benefits of complaints or concerns

Prevention is most definitely better than cure in relation to complaints and concerns. A well-organised setting with sound and effective procedures in place covering a wide range of service delivery and safety expectations will receive fewer complaints and concerns.

Good communication with individuals ensures the information they need is available, and individuals should be aware that they do have the right to complain as they enter the setting and during their time there.



Policies regarding health and safety and care provision will all help the smooth running of a setting. They will also reduce the likelihood of misunderstandings or dissatisfaction leading to complaints or concerns.

Activity 11

Supporting individuals and their families or carers to voice complaints or concerns

It is important that care workers have a thorough understanding of their organisation's complaints procedure and their role in this. On occasion, it might be appropriate for the care worker to assist the service user to initiate a complaint or concern. This is particularly important if the individual has no knowledge of the complaints or concerns procedures, if the individual, their family or carers are disadvantaged by language or disability.

Support is given to try and resolve complaints and concerns at the earliest stage — this could be by offering advocacy or support to the individual if necessary. They will need to provide, if possible, a clear report of the outcome and information on what to do if the individual is not satisfied with the outcome.

Every individual and their family has the right to complain and to be supported to do so. They should not feel uncomfortable in doing so and this should not impact on the care they receive as a result of raising an issue.



Allow time in a confidential area for an individual and/or their family to explain their concern. Write down word for word what the issues are in regards to. Make sure that once this information is forwarded to the relevant person within the organisation, that the complaint or concern is followed up and that all parties are informed of the outcomes.

The importance of 'person-centred approaches'

Introduction

In health and social care, it is vital that individuals have the right care to meet their needs, wishes and preferences. It is important that procedures are followed to ensure that needs are met. Individuals should be at the centre of this process, so they feel that they are actively involved in their own care. Good, effective care planning can ensure the criteria is met. Care and support packages should never be made for the ease or convenience of care workers. This is where person-centred approaches apply placing the individual at the centre of every activity and decision made.

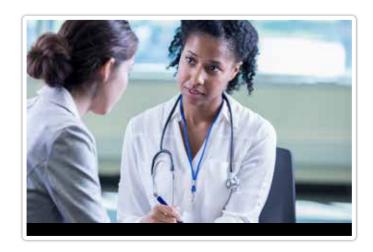


What are person-centred approaches?

Being person-centred is about listening to and learning about what individuals want from their lives and helping individuals to think about what they want now and in the future. Family, friends, professionals and services work together with the individual to make this happen.

Individual-centred approaches ensure that the individual is at the centre of all that happens. They involve doing things that sees the individuals using health and social care services as equal partners in planning, developing and monitoring care to make sure it meets their needs.

It is about considering people's desires, values, family situations, social circumstances and lifestyles, seeing the individual as an individual, and working together to develop appropriate solutions.



Beliefs, values and preferences have to be taken into account when using individual centred approaches when planning to meet an individual's needs.

How to identify the preferences and backgrounds of individuals, what matters to them and the outcomes that they want

When assessing and planning, it is vital that the individual leads the process. Care professionals must remember that the individual is at the foundation of care planning; it is their body, their discomfort, their life and their care. Care planning which is not individual-centred is meaningless and not acceptable. Providing care that health and social care workers think individuals need is not appropriate. Health and social care workers must value an individual's role in this process - this is the best practice. It is essential to empower the individual in their own care.



When establishing the preferences and backgrounds of individuals, it is vital to ask the child or young person what they want and what they consider their needs to be. Leading questions should be avoided, for example: 'Your after school arrangements are fully meeting all your needs, aren't they?' This may lead to agreement when it may not actually be the case. Open questions are preferred to closed questions, so instead of asking 'Are you happy?' the question could be rephrased as 'Tell me about how you feel at the moment.'.

Activity 12

Complete the activity on the handout.

Health and social care workers should meet with individuals face to face. They should make clear that anything discussed will be confidential. This will reassure the individual that it is okay to divulge any necessary information.

Discussions should be in a simple format. Confusing individuals with acronyms, jargon and technical terminology will not help them to lead the assessment. However, workers should avoid patronising individuals by using language that is too simplistic. A balance of clear, detailed information is important.

If anything needs repeating, it should be done patiently and clearly. Care workers should clarify and summarise to ensure that everything is understood as well as to minimise mistakes.

Where possible documents should be in a format the individual understands e.g. pictures, video, written. Workers need to ensure the individual understands these and is given the opportunity to ask any questions that they may have.

Establishing consent and why this is important

Consent involves one individual giving permission to another to do something.

In health and social care settings, this often means that the individual gives consent to take part in an activity, or to be given care or a treatment. It is a legal requirement that consent is established before any intervention or care-giving activity takes place.

In relation to the provision of health and social care services, it is important to remember that:

- It is a legal requirement that consent is established before providing support to an individual.
- Establishing consent is a way that health and social care workers can show they respect the individual.
- The process of establishing consent is a part of the process of developing trust between health and social care workers and the individual.



Consent can be given in a number of ways - this can be through verbal communication, in writing or through actions. The individual might also allow another individual to do something with or to them, perhaps by raising an arm to be supported when dressing, therefore indicating consent. Informed consent is given when the individual understands what they are consenting to.

Meaningful and enjoyable activities and experiences

Individual-centred approaches ensure that everyone has the desire to fulfil their personal potential. It is important to provide a safe, non-judgemental and compassionate place where the individual can be supported to think about what is important to them and make the best decisions.

An individual's well-being includes their sense of hope, confidence and self-esteem, their ability to communicate wants and needs, to socialise and to experience and show pleasure or enjoyment. This can involve the activities and experiences an individual chooses to take part in. To promote an individual's well-being they need to be happy with as many aspects of their life as possible. If the individual thinks that something would help them to feel better, health and social care workers need to be



positive, understanding, empathic and non-judgemental. They should listen to what the individual considers to be important in their lives and help them to make the changes they want, such as being able to join in particular activities or groups for example.

Activity 13

Co-production and voice, choice and control

What is 'co-production'?

Co-production is an approach whereby professionals and individuals work together as equal partners to plan their care, ensuring that they are key decision makers in the process, recognising that both have vital contributions to make in order to improve quality of life for the individual.

Co-production is value-driven and based on the principle that those who use a service are best placed to help design the service.



What is 'voice, choice and control'?

Giving adults voice, choice and control in health and social care is the approach staff in settings use to ensure individuals accessing services get personalised care and support.

Individuals need to have their views and experiences taken into account on an ongoing basis to have 'choice' and 'control' in decisions that affect them; they need to be seen as individuals and be given a 'voice' to express who they are and what they want.

To enable individuals to have voice, choice and control, interpersonal relationships need to be good between individuals, their relatives, carers and health and social care staff, and between the setting and wider health and social care system.

■ Watch this video

(https://www.youtube.com/watch?v=bkpqITvRYiI)

The importance of knowing an individual's preference and background

Understanding an individual's preferences and background

In health and social care, an individual's background is an important factor to consider as being aware of socioeconomic factors can inform practice and individualise the care required.

It is important that individuals are at the centre of the care planning process, so they feel that they are actively involved in their own care. Detailed and effective care planning can ensure all of their needs, wishes and preferences are met, and care packages should never be made without the involvement of the individual concerned.

In relation to health needs and preferences, holistic means seeing the whole individual, not just their physical health, but also their emotional, sexual, social, intellectual, mental



and spiritual health needs and preferences. This information is valuable when creating the care plan.

Traditionally, health has been seen as mostly physical, but increasingly, it is usual, and good practice to consider an individual's holistic health. Only concentrating on physical aspects of care could miss important needs, and as a consequence, as well as not caring for that aspect of their health, the physical side of an individual's health may not improve.

The importance of understanding an individual's background

Being individual-centred is about listening to and learning about what individuals want from their lives, what they did and enjoyed in the past, and helping them to think about what they want now and in the future. The child or young person's experience, history, culture, beliefs, preferences, family, relationships, informal networks and community are all key to establishing a way forward and meeting their needs to enable positive progress. Family, friends, professionals and services need to work together with the individual to make this happen.



Behaving towards people with dignity and respect

What does 'behaving towards individuals with dignity and respect' involve and why this is central to the role of the health and social care worker?

Individuals who access health and social care services place their trust and confidence in health and social care workers and expect to be protected.

Workers should always treat individuals who use services in the way they would want to be treated themselves. This applies to every part of the workforce and in all settings.

We all expect to be treated with dignity and respect, and individuals accessing health and social care services are no different.

Behaving with dignity and respect towards individuals involves respecting their views, their choices and decisions, not making assumptions about how they want to be treated and working with care and compassion.

Behaving towards individuals with dignity and respect ensures individuals who receive care and support are able to make choices



about the care they receive. This includes decisions about their everyday care needs. If individuals cannot make choices, or are not supported to make choices, their care needs are not going to be met. Health and social workers must ensure they behave towards individuals with dignity and respect to ensure individuals feel valued, regarded as individuals with their own specific needs and can trust that their needs will be identified, listened to and met.

Ways of working that support personcentred approaches

Person-centred approaches

Person-centred approaches are the guiding principles that help to put the interests of the individual receiving care or support at the centre of everything we do. They include individuality, independence, privacy, partnership, choice, dignity, respect and rights.

Individual-centred approaches means working in partnership with the individual to plan for their care and support. The individual is at the centre of the care planning process and should be in control of all choices and decisions made about their lives. The values of compassion, dignity and respect are important when involving individuals in their own care. Decisions should not be made by health and social care workers alone - the individual needs to be seen as an equal partner in their care.



Individual centred planning is about discovering and acting upon what is important to the individual and what matters most to them in their lives.

Activity 14

Complete the activity on the handout.

The individual should be able to decide what care and support they need. By working with the individual to identify their strengths and abilities, they can make their own decisions. For example, an individual may want to make their own decisions about the activities they are able and want to participate in.

The individual has as much control as possible over the choices they make. For example, an individual will be supported to try to use the walking frame.

The care plan is needs-led not service or staff led. This means that support is identified to meet the specific needs of the individual to make their life better, and not around what is already available or what is easier for staff. For example, the diet planned is what is best for the individual, not what is already chosen by others.

Active participation

What is active participation?

Active participation involves enabling individuals to be included in planning their own care and in having a greater say in how they live their lives, in ways that matter to them.

Active participation recognises an individual's right to participate in the activities and functions of everyday life as independently as possible. In doing this, the individual is an active partner in their own care and support, rather than receiving the care and support others think they need and want. Key benefits to the individual as an active partner in their own care or support include physical, psychological, social aspects and improved well-being.



How can we provide a rights-based approach?

Often carers will be supporting individuals when they are in a vulnerable position. The quality of care that can be provided will be improved if carers have knowledge of the whole individual, not just the current circumstances. For example, knowledge can help to develop a better understanding as to why individuals behave in the way they do.

Individual centred planning involves seeing the individual being supported as the central concern. Carers need to find ways to care and support for each individual in a way which is specific to their needs.

A rights-based approach involving individual centred planning is a way of helping individuals to think about what they want now and in the future. It is about supporting individuals to plan their lives, work towards their goals and get the right support. It is a collection of tools and approaches based



upon a set of shared values that can be used to plan with an individual, not for them. Planning should build the individual's circle of support and involve all the individuals who are important in their life.

Activity 15

How person-centred approaches are used to support active participation and inclusion

How are person-centred approaches used to support active participation and inclusion?

Individual centred thinking and planning tools enable health and social care workers to take a creative approach to problem-solving, ensuring the best possible support and care is given on a consistent and appropriate level.

When supporting individuals, it is vital that the individual is involved in any decision making and planning in relation to their lives and their care needs. Health and social care workers must remember that the individual is at the foundation of care planning and of all aspects of their daily lives. It is their body, their life and their care. Care planning and practice which is not individual centred is not supportive of active participation or inclusive. Health and social care workers must value an individual's role in this process - doing this is best practice. It is essential to



empowering individuals in their own care and to ensuring they feel included and involved at every stage. Individuals are then active participants in their own lives, in their care and in decision making.

Activity 16

The purpose of personal plans

What are personal plans?

Personal plans set out how the care of an individual will be provided. They are based on assessment information and care and support plans and will cover personal wishes, aspirations and care and

support needs of the individual. The care and support plan is written by a social worker and from this the personal plans are developed by the health and social care workers involved with the day to day care of the individual.

The role of the individual in their personal care and support planning has long been recognised as important; it is prioritised as best practice and has been developing as a way forward for all future care and support planning.



A personal plan identifies an individual's care needs, the types of services they will receive to meet those needs and who will provide the services and when.

However, since then the idea that individuals requiring care should be involved in every stage of the planning process has evolved. This process needs to be a continuous cycle, as needs can change. A personal plan meeting an individual's holistic needs when implemented may not be meet the requirements six months later.

In relation to health, holistic means seeing the whole individual, not just their physical health, but also their emotional, sexual, social, intellectual, mental and spiritual health. When we care for someone, we need to consider all these needs, which can be interlinked.

Activity 17

Equality, diversity, inclusion and discrimination

Introduction

Promoting equality and diversity is about identifying the practical steps health and social care workers can take in daily activities to ensure individuals are able to make decisions about their own lives.

Health and social care workers must promote equality and diversity in all aspects of their job role, challenging any practice they think does not reinforce this approach.

Through promoting equality and diversity, health and social care workers must ensure an inclusive approach, adapting their approach to meet the needs of individuals and treating each with fairness and dignity.



What is equality?

In the health and social care sector an understanding of the terms equality, diversity, inclusion and discrimination is vital to ensure service delivery is inclusive and non-discriminatory.

Equality involves treating individuals fairly, regardless of their differences, by ensuring that they have access to the same life opportunities as everyone else, meaning that they have equal opportunities.

Life opportunities include:

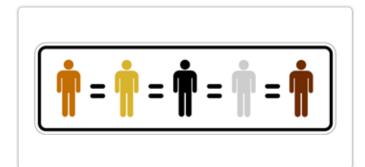
- housing warmth and shelter are basic human needs
- education and employment
- transport
- health and social care
- the ability to purchase goods and services.



What is diversity?

Diversity means variety. For example, every high street or shopping centre has a diverse selection of shops, restaurants, banks and bars. Even football teams have a diversity of roles, including full back,

goalkeeper, centre forward and winger. We live in a diverse society, where individuals vary in many ways. These diversities can be age, sex, sexual orientation, physical characteristics such as height, weight and skin colour, ability, personal experiences and personal attributes, such as beliefs, values and preferences.



Health and social care settings reflect the diversity of the population. Every individual

will have their own experiences and may come from a variety of different countries. An individual's preference for food and music for example, will vary from one to another.

Activity 18

What is inclusion?

Having our individual differences acknowledged and understood helps us to develop a sense of belonging, or inclusion; and that disadvantaging individuals because they are different in some way leads to their becoming excluded.

Inclusion is about accepting everyone, regardless of their differences. It is also about being understanding and tolerant of differences and providing help and support where appropriate.

Any organisation or institution, including local authorities, health and social care service providers, educational establishments, the police service, voluntary organisations and workplaces that supports and promotes inclusion must demonstrate that it values everything about the individuals involved within it. Inclusion brings about a sense of well-being and of confidence in one's own identity and abilities.



What is discrimination?

Discrimination means treating individuals differently or negatively without having a good reason for doing so. The law states that everyone should be treated as favourably as everyone else and that an

individual must not be discriminated against because of a personal characteristic such as religion, gender, age or race.

Discrimination can include:

- not offering a job to someone who meets all the criteria
- identifying an individual for redundancy and not others
- paying less to one individual than another with no good reason.

There are two forms of discrimination, direct and indirect. Direct discrimination



occurs when someone is intentionally treated unfairly, for example harassment on the basis of skin colour or religion. Indirect discrimination occurs when rules or guidelines meant to apply to everyone unintentionally affect one group of individuals more than others. For example, a company policy requiring everyone to work night shifts indirectly discriminates against single parents or individuals who care for elderly relatives, and menus that fail to offer a selection of food indirectly discriminates against individuals with specific dietary needs or preferences.

What are 'protected characteristics'?

The Equality Act 2010 replaced the Disability Discrimination Act 1995, as well as a range of other discrimination laws.

The Equality Act 2010 protects individuals from unfair treatment by bringing together antidiscrimination laws that have been in use over the last 40 years to make it easier for individuals to understand their rights and responsibilities and challenge discrimination.

The Equality Act 2010 introduced the term "protected characteristics" to refer to groups that are protected under the Act. The nine groups protected under the Act are:

- Age
- Disability
- · Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- · Sexual orientation.

Activity 19

How person-centred approaches promotes equality, diversity and inclusion

Person-centred approaches involve the attitudes and approaches taken to ensure that individuals are not excluded or isolated from any service, treatment or activity. It means supporting diversity by accepting individual's differences and promoting equality by ensuring equal opportunities for all.

Inclusive practice is best practice. Health and social care workers can demonstrate inclusive practice by working in ways that recognise, respect, value and make the most of all aspects of diversity. Having a good



understanding and awareness of and responding sensitively to an individual's diverse needs supports them in developing a sense of belonging, well-being and confidence in their identity and abilities.

The impact of not promoting equality, diversity and inclusion

A prejudice is an attitude or way of thinking based on an unfounded, unreasonable pre-judgement of an individual, particular group of individuals or situation, rather than on a factual assessment. This approach does not promote equality, diversity and inclusion.

Inclusive practice involves understanding the disastrous impact that discrimination, inequality and social exclusion can have on an individual's physical and mental health. Having such an understanding ensures appropriate, personalised care and support, thereby enabling an individual to develop self-respect and maintain a valued role in society.

Because individuals who fail to support diversity or promote equality are often not aware of their attitudes and the impact of their behaviour, inclusive practice involves reflecting on and challenging one's own



prejudices, behaviours and work practices. It also involves challenging those of colleagues and other service providers, with a view to adapting ways of thinking and working and to changing services to build on good practice and to better support diversity and promote equality.

Cultural, religious and linguistic backgrounds

Legally, and morally, everyone is entitled access to services which do not discriminate on the grounds of religion, ethnic origin, linguistic background, culture, gender, disability or sexual orientation. This means that services will recognise and respect particular differences and meet their particular needs rather than individuals all receiving the same service.

Being able to understand individual needs, preferences and values helps to establish a positive and respectful partnership.

It is illegal to discriminate or offer a poorer quality service to individuals belonging to the following groups, who are protected by legislation: race, disability, gender, sexual orientation, religion and belief.

Culture has many positive aspects, it gives a pattern and predictability to life which makes individuals feel settled and secure. It gives individuals a sense of history and of their roots and is important in forming a positive identity. It can help all of us gain knowledge and appreciation of musical, visual and culinary arts.



Holding special events to mark cultural or religious occasions or learning new words in another language are both ways of increasing value and respect for the diverse range of backgrounds children and young individuals may have.

Language and the ability to communicate well are an important part of an individual's identity and their self-esteem. If individuals or carers speak English as a second language, they will need an interpreter or translator to enable them to voice their views and needs. Where individuals and carers communicate in a different language, information must be translated into the language they are used to.

Identifying discriminatory practice

Discriminatory practice, or practice not supportive of quality, diversity and inclusion, takes place in a variety of settings.

For example:

- within schools or colleges, where learners may not be given support and encouragement if it's assumed that their disability or lack of interest affects their ability to learn and achieve
- in the workplace, when individuals are persecuted on the basis of their skin colour or sexual preference
- in housing, when landlords refuse
 to let their property to someone because of their refugee status or ethnic background and in
 health and social care, when individuals are denied access to care on the basis of where they
 live, known as the postcode lottery.



Activity 20

Challenging discriminatory practice

Health and social care workers have a responsibility to provide a high standard of care, to protect the rights and promote the interests of the individuals they work with. Anything else would be neglect. Talking to individuals about discrimination does not ensure that they will change their mindset and, as a consequence, their behaviour. The existence of legislation, policies and procedures and Codes of Practice does not guarantee that individuals using services receive fair treatment and that their rights are upheld.

Health and social care workers must try to demonstrate and model good practice at all times. In addition to leading by example, they should be prepared to support the equality and rights of individuals they work with by speaking up on their behalf. Many individuals don't have the ability to make their own voices heard, for example they may be frightened or lack the confidence to speak up for themselves; they may be ill, confused, not able to communicate effectively; and many individuals are just simply not aware of their rights.



Health and social care workers should be prepared to talk to their manager, or senior, about the behaviour of others if it fails to promote equality and rights or is discriminatory. Health and social care workers should be open to feedback about their own work practices, acting on this feedback if necessary.

Activity 21

Positive risk-taking and the importance of being able to take positive risks on the well-being of individuals

Introduction



Supporting positive risk-taking is key to the implementation of individual-centred planning and approaches, which are aimed at increasing inclusion and promoting people's participation in their care and service delivery.

The value of positive risk-taking to individuals

Responsible and responsive services aim to find ways of balancing their duties as employers with supporting individuals to live the lives that are suitable for them.

Positive risk-taking is about individuals taking control of their own lives by weighing up the potential benefits and harms of exercising one choice of action over another. Positive risk-taking is not ignoring any potential risks. Risk is a part of everyone's everyday life, and everyone has the right to take risks.



Individuals must be given the support

they need to take the risks they want and to make informed choices. New experiences and greater community involvement potentially involve individuals taking risks that offer opportunities for the development of independence, confidence, well-being, voice and autonomy.

Activity 22

Rights that individuals have to make choices and take risks

Making choices and taking risks

Individuals should be given the support they need to take the risks they want and to make informed choices. This supports their development and promotes a sense of achievement and self-esteem.

Providing real choice and control for individuals accessing health and social care means enabling individuals to take the risks they choose. Everyone has the right to take risks and make choices but if an individual has a more limited understanding of the risks involved in an activity they wish to participate in, they must be supported to make informed decisions.

When we look at risks, we should do so in relation to individuals' strengths, abilities and support networks. Everyone should have the right to make choices about their



lives, so it is important to work out whether a risk is significant, and whether it is likely to happen.

Health and social care settings must be able to demonstrate that a risk-assessing process, a process of thinking things through properly, involving the individuals and others who know them, has taken place. This may or may not result in a formal written risk assessment.

Balancing rights, risks and responsibilities

How balancing rights, risks and responsibilities supports person-centred approaches

Everyone is assumed to have capacity unless proven otherwise (Mental Capacity Act, April 2005). Everyone is able to be involved in decision-making, whether they are deemed to have capacity or not.

The following are occasions when a risk assessment should be completed:

- when planning activities, outings and events
- · when planning and purchasing new facilities
- · when new work practices are introduced
- when an individual develops a special need, or where there is a significant change to their existing needs.

In addition, there should be a system for regularly reviewing the risk assessments. No risk assessment should be written without a review date, monthly, quarterly, six monthly or annually, depending upon the need. This practice ensures an individual has full control, responsibility and voice over decisions affecting them, utilising good practice in the form of individual-centred approaches.

A risk assessment is carried out, then the individual is informed and guided in weighing up the risk with the benefit,



or drawbacks, from undertaking the identified activity. Health and social care workers support individuals to balance their rights, the risks and their responsibilities.

Activity 23

The considerations needed when supporting individuals to take positive risks

What to think about when supporting individuals to take positive risks

These days everyone is encouraged to travel, take part in leisure and sporting activities, go to college, develop careers and have families. These are all activities that do not just happen by chance, individuals have to take risks to achieve their goals.

For many individuals taking risks is a part of everyday life. However, individuals with a disability, mental health illness and older individuals for example, are not always encouraged to take risks. This might be because of their perceived limitations or fear that they or others might be harmed. Changes in society's attitude towards disability, social care and health issues now means that individuals are being encouraged to increase their independence in their daily activities and decisions about the services they receive. The focus is now more on enhancing individuals' abilities rather than



concentrating on their disabilities and the things they cannot do.

Minimising risk

Risk is often linked to danger, loss, threat, damage or injury. However, regardless of these potentially negative characteristics, risk-taking can have positive benefits for individuals.

Risk can be reduced by the support of others, but, in promoting independence, responsibility for taking risks must be a balance between safeguarding an individual from harm and enabling them

to lead a more independent life where they effectively manage risks themselves. A balance has to be achieved between the wishes of individuals to do everyday activities between the duty of care of services and to individuals accessing services, and the legal duties of statutory services.

As well as thinking about the dangers associated with risk, the benefits of risk-taking have to be identified. This should involve everyone affected,





Activity 24

Best interest decisions

What are best interest decisions?

The best interest decision principle in the Mental Capacity Act 2005 states that any act or decision made on behalf of an adult lacking capacity must be in the individual's best interests. This can cover financial, health and social care decisions.

The individual making the decision is known as the decision-maker and is likely to be the person caring for or supporting the individual, the doctor or another member of the healthcare staff responsible for carrying out the particular treatment or procedure, or a lasting power of attorney (LPA) or Court of Protection deputy.

It is still important to involve the individual in the decision as much as possible, and try to find out what their views and wishes are, including those they had before they lost



capacity to make the decision, and try to involve the individual in all meetings where decisions are being made about them.

Relationship-centred working

Introduction



Best practice in any work setting is underpinned by effective working relationships, an ability to follow agreed ways of working and an ability to work in partnership with others.

Effective work relationships

In health and social care settings, effective work relationships are based on professionalism and

principles of care, which require health and social care workers to respect and promote the rights of everyone they work with.

Relationship centred working is a personalised, partnership approach of forming and maintaining important relationships, as well as recognising the importance of these relationships in delivering effective and safe care and support. This includes team members, colleagues, other professionals, the individuals who need care and support and everyone who is important to them. Their families, friends and advocates, for



example, are further supported by relationship centred working.

The relationship centred approach recognises the importance of the interpersonal and intrapersonal relationships that exist between the individual and others around them. The relationship forms the context within which care and support takes place.

Activity 25

The importance of developing a positive relationship with individuals, their families and carers

The importance of developing positive relationships

Developing a positive relationship with individuals, their families and carers in health and social care settings is important. This requires input from team members, colleagues and other professionals who are all stakeholders in meeting the care and support needs of individuals, their families and their carers. Partnership working through the development of positive relationships ensures a best practice holistic approach to care and support needs.



Positive relationships are based on trust,

which is key to ensuring individuals are safeguarded and receive the care and support they need and request. If a relationship is not positive, individuals will not feel able to communicate effectively with staff and others, and not able to voice their needs, concerns or preferences.

Professional boundaries and how to balance these with relationship-centred working

Professional boundaries

Relationships are probably the most complicated area of our lives. We start to form relationships when we are born. Effective work relationships are based on professional boundaries, which means that when carers support individuals with health and care needs, they must:

- show respect for their beliefs, opinions, life experiences and social, cultural and ethnic backgrounds
- deliver services based around their wishes, expectations and preferences
- support their rights to dignity, choice, privacy, independence, confidentiality, equality and fair treatment
- protect them from harm whilst supporting their right to take risks
- · communicate using the individual's preferred method
- · support them in such a way that meets their specific needs
- remember they are professionals not 'friends' so must act in a professional manner at all times.

Balancing these boundaries with the need for relationship-centred working is important in order to achieve effective service delivery. If an individual does not feel valued and included, they will not be willing to express their needs, wishes and concerns.

Types of unacceptable practices that may occur within relationships

What are unacceptable practices?

If health and social care workers want to ensure that safe and effective services are delivered, it is important to be observant and question the things they feel uncomfortable or unsafe with.

Good practice in health and social care involves staff working in a way that puts the needs of individuals they are supporting first so that they receive dignified and safe care.

Unacceptable practice involves the individual not receiving appropriate care and treatment and that they feel they are being failed by the system.

Another example of unacceptable practice is when individuals are put at risk and denied services that they are entitled to, being unfairly treated and /or discriminated against and not supported to meet their needs. It could involve taking advantage of individuals for financial gain, or asking them to undertake duties that they are not trained to do.



Unacceptable practices would include:

- sexual contact with an individual using the service
- causing physical harm or injury to individuals
- making aggressive or insulting comments, gestures or suggestions
- seeking information on personal history where it is neither necessary nor relevant
- · watching an individual undress where it is unnecessary
- · sharing own private or intimate information where it is unnecessary
- · inappropriate touching, hugging and caressing
- concealing information about individuals from colleagues, for example, not completing records, colluding with criminal acts
- acceptance of gifts and hospitality in return for better treatment
- spreading rumours or hearsay about an individual or others close to them
- misusing an individual's money or property
- encouraging individuals to become dependent or reliant for the worker's own gain
- giving special privileges for 'favourite individuals'; for example spending excessive time with someone, becoming over involved, or using influence to benefit one individual more so than others
- providing forms of care that will not achieve the planned outcome
- providing specialist advice or counselling where the worker is not qualified to do this
- failing to provide agreed care and support for or rejecting an individual; for example, due to negative feeling about an individual
- · trying to impose own religious, moral or political beliefs on an individual
- failing to promote dignity and respect
- any practices specifically prohibited in relevant legislation, statutory regulations, standards and guidance.

Activity 26

The importance of effective communication for the well-being of individuals

Introduction



Health and social care workers help individuals understand the support available to meet their needs. They do this by ensuring that the information the individual needs is accessible. Exchanging information is important in order to develop an understanding of the needs of an individual, to support individuals requiring the care and improve the quality of service provision.

Why is clear and effective communication important?

When communicating in health and social care, if the information exchanged is inaccurate, mistakes can be made. For example, an individual could be prescribed the wrong medication if the GP did not know they were allergic to it. If information is not shared appropriately, individuals may not feel supported and workers will not be able to carry out their job roles as effectively as they could if information was maintained.

Health and social care workers will form many different relationships in their job role — some will be formal and others informal. Two-way communication is needed for these relationships and to establish the boundaries of the relationship. This will also help to ensure that everyone involved

understands the purpose of the relationship and what they are aiming to achieve.

The relationships between workers and individuals accessing services, and between colleagues, have an impact on the ability to provide effective care and support. Respect for each other can be developed through the use of good communication. Getting to know individuals by talking and listening to them will enable carers to develop an understanding and awareness which will lead to stronger relationships in the long term.



Positive relationships are developed between workers and individuals when they communicate effectively, and trust is established. In order to maintain effective support and achieve success, each individual involved in a relationship should be clear about what their responsibilities are and what the other individual's expectations are.

Activity 27

Key features of effective communication

Features of effective communication

Effective communication means more than just passing on information, it means involving or engaging the other individual or individuals with whom you are interacting.

Verbal communication is an important method of communication between carers and individuals. Through regular conversations ideas can be exchanged and decisions can be made through a process

of speaking and listening. Communication is therefore a two-way process. Ideas can be exchanged and decisions made there and then. If there is any confusion about what has been said, this can be clarified at the time so that everyone knows and understands exactly what has happened or is going to happen in the future.

Individuals will be able to find out about the care or support they need or will be needing in the future. Instructions can be given to other health and social care workers so that they know what their duties are. In addition



activities can be carried out and problems solved, using an appropriate method of communication for the individual. Co-production relies upon effective communication within teams.

Activity 28

Skills that are needed to communicate effectively

How to communicate effectively

Communicating is a two-way process where each person is trying to understand and interpret, or make sense of, what the other person is saying.

Within health and social care practice we sometimes need to adapt our method of communication to meet the needs of the individual we care for. We need to ensure we speak clearly and prevent using jargon or terminology that may be difficult for the individual to understand.

Active listening helps to maximise the communication interaction. It is important to show that workers are listening to the individual, and that they have heard and understood what has been said. Using



reassuring smiles and eye contact ensures that individuals understand that workers are interested in what is being said.

Carers should use open body language and using gestures can also be helpful. Showing interest in what is being said encourages individuals to communicate more and can improve the level of detail they are prepared to give. Communication should not be rushed, as this may make an individual feel that they are not important, or that there is little respect for them.

Activity 29

How to find out an individual's communication and language needs, wishes and preferences

Communication and language needs, wishes and preferences

Health and social care workers are encouraged to use active listening techniques in order to maximise the communication process and identify an individual's communication and language needs, wishes and preferences.

Only about ten per cent of our communication is actually spoken, and through this two-way process of communication, health and social care workers are able to work with individuals and their families in order to ascertain what their needs are and what can be put in place to support them.

It is important that during this process that the individual is allowed to speak freely and not overly questioned as this can be overwhelming. Health and social care workers need to adapt their communication



styles and techniques in order to ascertain information without putting the individuals under stress.

When aiming to discover how an individual wishes to communicate, it is important to choose the right moment and the right place. If something needs to be discussed in private with an individual, it is vital to ensure that the choice of venue is private and that no one feels uncomfortable about the possibility of being overheard.

Whilst friends and family can be helpful in this process, sometimes advocacy services are requested to help.

Activity 30

Potential barriers to effective communication and ways to address these

Barriers to good communication

Whichever way we choose to communicate, we must try to ensure that individuals who are receiving information can fully understand it and respond. But there may be times when a message is misinterpreted because barriers to the communication process have not been addressed. These barriers might include:

- environmental
- language
- · sensory loss
- cultural.

At times, communication barriers can be created when individuals misunderstand messages. For example, it can be easy to misinterpret a letter, telephone call, text message or email, because these types of communication don't contain any body



language to support and reinforce them. Being able to communicate face to face can provide visual clues of what information is being communicated.

Environmental barriers

A health and social care environment can be noisy and distracting sometimes. It is important that health and social care workers know this and work to reduce any background noise to a minimum. It is also important that the worker ensures that the care environment is easily accessible, and that the placement of the furniture encourages individuals to interact with each other.

Arrangements should be made to have quieter spaces to promote effective communication when necessary. It is



also important that the worker ensures that the environment is freely accessible. This will not only encourage conversation between individuals but will also enable them to socialise.

Language and cultural barriers

Successful communication is dependent on how well we listen and respond to others.

Language and cultural behaviours that may hinder the communication process:

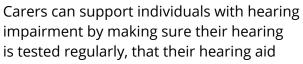
- if an individual dominates the communication process, communicating becomes a one-way process and responses from individuals are hindered
- if an individual talks too much about themselves, then the topic or focus of the communication changes
- swearing may be powerful at times, but it does not usually appeal to others
- using jargon: people often use words that belong exclusively to their area of expertise
- using patronising or condescending words, tone or behaviour will make individuals and their families feel angry and defensive
- using threats, implied or explicit to persuade an individual into doing something they don't want to do
- being callous, insensitive or unaware of own feelings and the feelings of others.

Activity 31

Complete the activity on the handout.

Sensory impairment

Health and social care workers can support individuals who have visual impairment by making sure that their eyesight is tested regularly, that their spectacles are clean and worn properly, and that their possessions are kept in the same, familiar place. An individual could also learn the correct way to guide and assist a partially sighted person while they are walking and find out what visual aids are available.





is clean and worn properly, and that the battery is not flat. A carer can also learn the correct way to replace a hearing aid battery.

Overcoming barriers to communication

Some individuals may have difficulty communicating because of poor eyesight or hearing.

As a health and social care worker, it is important to make sure the physical environment is quiet, well lit, warm and comfortable. It is also important to know and understand how children and young

people need to communicate and use a form of their own preferred communication. If appropriate, the individual may wish to use communication aids or human aids such as advocates, interpreters, translators and signers.

Health and social care workers should speak clearly, use appropriate body language and actively listen to show that they are interested and are trying to understand what they are being told. It is also important that they check that the individual understands them correctly, and that they can confirm



that the message has been understood by asking the individual to relay back what was said.

Workers need to become familiar with the needs of individuals who have different cultural beliefs. They need to ensure that they are well-informed of cultural practices and also how to support an individual to communicate in their preferred language, making every effort to provide resources and adapt communication methods to meet individual needs.

Activity 32

Complete the activity on the handout.

The importance of recognising and supporting Welsh language and culture

Introduction



In order to deliver a service which meets people's individual needs and respects their diversity services must be able to support Welsh language and culture by being able to communicate with people whose first language is Welsh.

Recent legislation regarding the Welsh language and developments in language policy in Wales required health and social care providers to ensure that they have appropriate and adequate staffing arrangements in place to provide bilingual Welsh and English services for people who use their services.

Welsh language and culture

It is vital that health and social care staff have good communication skills. Effective communication can make sure that carers have a detailed understanding of individual's needs, so they can provide a high quality and effective service to individuals. Communicating in the individual's language of choice is an important factor to consider when planning and providing care and support.

In order to deliver a service which meets people's individual needs and respects their diversity, services must be able to support Welsh language and culture by being able to communicate with people whose first language is Welsh.

Recognising that the ability to speak Welsh is a skill of its own, which should be valued and used in a positive manner in the workplace will ensure that it is seen as a professional skill. In the health and social care sector it is a communication skill that is essential for some jobs and desirable for others. In



many instances, as referenced in the **More than Just Words** strategy, it's a vital skill for working with individuals and families.

Legislation and national strategies for Welsh language

Legislation and national strategies

The Welsh Language (Wales) Measure 2011 established the post of Welsh Language Commissioner. Two principles underpin the Welsh Language Commissioner's work:

- in Wales, the Welsh language should be treated no less favourably than the English language
- individuals in Wales should be able to live their lives through the medium of the Welsh language if they wish to.

The Welsh Language Act 1993, Welsh Language measure (2011) and Mwy na Geiriau/More Than Just Words introduce standards to explain how organisations are expected to use the Welsh Language. The aim of the legislation is to increase the use of the Welsh language and make it easier for individuals to be supported to speak Welsh in their everyday lives.

The Welsh Government Strategic Framework for the Welsh Language in Health and Social Care (2013) is the Welsh Government's commitment to strengthen Welsh language services to individuals accessing health and social care, and their families.





(https://bit.ly/2Xp3z9n)

Principles of Mwy na Geiriau / More than Just Words

What is Mwy na Geiriau / More than Just Words?

Mwy na Geiriau / More than Just Words requires health and social care providers to ensure that they have staff with the necessary language skills to care for and support Welsh speaking individuals who may often be vulnerable.

It is no longer correct for organisations to assume that English is the chosen language when providing services. When providing services to individuals who usually speak Welsh, providers should assume

that they would prefer to speak Welsh when accessing services.

Mwy na Geiriau / More than Just Words states that Welsh speakers should not be required to request a service in Welsh, but the service should be provided in the language normally used by the individual. This could be in Welsh, English, or both. This reflects the principle of the 'Active Offer' now advocated in health, social services and social care, as outlined in the Welsh Government's strategic framework for the Welsh Language. An 'Active Offer' means a



service is provided in Welsh without someone having to ask for it.

Activity 33

Complete the activity on the handout.

The Active Offer

What is the Active Offer?

The aim of 'Mwy na Geiriau/More than Just Words: A Strategic Framework for Promoting the Welsh Language in Health, Social Services and Social Care' was to ensure that organisations recognised that language is an essential part of care provision and that individuals who need services in Welsh get offered them. This is called the 'Active Offer'.

An Active Offer means a service will be provided in Welsh without someone having to ask for it. It is the responsibility of everyone who provides health and social care services for individuals and their families across Wales to deliver the Active Offer. For example, implementing a key worker system ensures 'named' staff members are 'matched' to individuals who are Welsh-speaking or signage in the service setting supports the orientation of Welsh-speaking users. In addition, Welsh language books, newspapers and other resources are,



or can be made, available in a health and social care setting for children and adults who speak Welsh.

Activity 34

Complete the activity on the handout.

Positive approaches and restrictive practices

Introduction

Behaviours which challenge services always happen for a reason and might be the only way an individual is able to communicate. This behaviour can happen for different reasons, which are specific to the individual.

Individuals who display or are at risk of displaying behaviours which could be challenging might need care and support which involves positive behavioural support and some form of restrictive practice or intervention. It is vitally important that it is person-centred, meets an individual's needs with dignity and respect, and minimises the risks to the individual being cared for and the individual carrying out the physical intervention.



What are 'positive approaches'?

Developing good relationships is essential, and positive approaches should be used at all times. They are essential when an individual is stressed, distressed, frightened, anxious or angry and at risk of behaving in such a way that is challenging to their safety and / or the safety of others.

Positive approaches are based upon the principles of person-centred care:

- · getting to know an individual
- respecting and valuing their histories and backgrounds, and understanding:
 - their likes and dislikes
 - their skills and abilities
 - their preferred communication style and support structures
- understanding the impact of their environment upon them and using this to identify ways to support individuals consistently in every aspect of the care they receive.

Positive approaches involve working with an individual and their support systems to:

- try to understand what they are feeling and why they are responding in the way they are
- where possible, undertake any required changes and intervene at an early stage to try and prevent difficult situations at all
- understand what needs to be planned and put into place in order to support the individual to manage distressed and angry feelings in a way that reduces the need for behaviour that challenges any restrictions.



What are restrictive practices?



Restrictive practices are a wide range of activities that restrict an individual's ability to do what they want to do without some form of intervention or encourages them to do things that they don't want to do. They can be very obvious or very subtle. They should be understood as part of continuum, from limiting choice, to reactive response to an incident or an emergency, or if an individual is going to seriously harm themselves or others.

Underlying causes that may impact upon behaviour of individuals

What influences an individual's behaviour?

Think of some reasons a person may be upset or distressed which could affect their behaviour.

There are many factors which help to explain why individuals behave differently even when apparently in the same situation and seem to be having the same experiences, for example personal or environmental factors.

Underlying causes could include:

- · chronic or acute pain
- infection or other physical pain
- sensory loss
- an acquired brain injury or other neurological condition
- communication difficulties
- environment
- fear and anxiety
- unhappiness
- boredom
- loneliness
- unmet needs
- demands
- change
- transitions
- · recent significant events such as death of a family member
- past events or experiences
- abuse or trauma
- bullying
- over-controlling care
- being ignored.

Positive approaches that can be used to reduce restrictive practices and promote positive behaviour

Positive approaches

When working with an individual with a particular syndrome, disability or condition, it is important to have a full understanding of the possible effect on behaviour. For example, a person with autism and a learning disability may present behaviour that their family members and support workers find difficult to understand and that they believe to be challenging. A greater understanding of the individual will enable workers to be better equipped to know what to do and how to prevent specific responses on other occasions.

It is easier to understand an individual's behaviour if workers have a better understanding of their experiences. This may include considering how having a particular syndrome, disability or condition has affected their communication, social interactions and sensory awareness.

What happens in the environment around the individual is often under the control of the individuals supporting them. For example, if an individual finds being with many other individuals in a small room difficult, then the impact of this can be reduced simply by ensuring that the individual does not spend time in confined spaces with lots of individuals.

Communication breakdown may contribute to challenging behaviour, so it is important to understand individual's approach to communication and work to better understand what they are trying to say or indicate.

Activity 35

Complete the activity on the handout.

Changes that occur in the course of an individual's life as a result of significant life events or transitions

Introduction



The term 'transition' describes the process of change, planning, preparing and moving from, for example, children's health care to adult health care, or from children's mental health services to adult's mental health services. Transition is a gradual process of change, which gives everyone time to ensure that individuals and their families are prepared and feel ready to make the change.

Significant life events or transitions

Changes that take place as a result of significant life events or transitions can include improved health and well-being as a result of a retirement, or reduced independence as a result of becoming a carer.

Significant life events include important changes in an individual's life both positive and negative. For individuals with some conditions there may be changes and disruption to their routine; for others they may be onset of a deteriorating condition



such as sensory loss or dementia; for others they may be a crisis affecting them. Transitions or change could include individuals moving into or out of the service provision, births, deaths, marriage, employment, redundancy, retirement, transferring between years in schools or colleges, transferring between education establishments, physical changes such as onset of puberty, moving into adulthood or becoming a carer.

Factors that make changes either positive or negative

What can make change positive or negative?

Change brought about by significant life events or transitions can be both positive and negative. For example, an individual may move into a residential setting in order to meet their changing care support needs. This can be positive as the individual will get the appropriate support, but these changes can also be seen as negative due to a potential loss of independence, loss of their home and some of their belongings in order to meet certain regulatory requirements e.g. fire regulations.

Transition can be a time of celebration, or a time of great anxiety and worry, change and challenges for individuals. It is a time when individuals are considering and making decisions about their career, their continuing education, their social life and where they will live. This is no different for young individuals except that the options available to them may not be so readily available and putting in place plans for the future can be more challenging.

The support in place can make these changes positive or negative, for example resources may be accessed for a new role as a carer, or there may be increased funds due to a new or first job.

The support available during the change can vary greatly. An individual's understanding of the reasons for change can support them throughout.

The impact of own attitude and behaviour on individuals and carers

Introduction



We all have different beliefs, values and life experiences, but when supporting individuals in the health and social care sector, it is important that these factors do not impact on the practice through personal attitude and behaviour.

What are beliefs, values and life experiences?

Apart from differences in age, sex and gender, physical characteristics, ability, experiences and personal attributes, individuals also differ in respect of their diet, religious beliefs and faith and communication needs and preferences.

Throughout life, beliefs, values and life experiences develop.

As children, individuals are dependent on close family and carers as they direct and shape their thoughts and behaviour. They also encourage and reward those that meet cultural customs, traditions and expectations in relation to manners and respect.

Growing up, individuals become increasingly exposed to society. Preferences, attitudes, values and beliefs develop as a result of new experiences and the influence of factors such as role models, peer groups, education, religious institutions and the media. The personal attributes developed throughout



life promote the development of identity and the way individuals want themselves to be seen. This is what makes an individual who they are.

Activity 36

Complete the activity on the handout.

Personal attitude and behaviour

Working with and getting to know a diverse range of individuals such as those accessing services, their friends and family, colleagues and other professionals, enables health and social care workers to develop their knowledge and understanding of different ways of thinking and living and the reasons for different beliefs, values and behaviours. As a consequence, tolerance of and respect for others develop, both which are important when meeting individual needs and preferences. Having their differences acknowledged and understood helps individuals to develop a sense of belonging,



increasing their self-esteem and improving their well-being.

As a result, workers can become more open-minded to new experiences, opportunities and challenges, and are able to develop new relationships.

Activity 37

Complete the activity on the handout.

While a health and social care worker might not agree with the attitudes and behaviours of the individuals they work with, nor share their preferences, inclusive work practice involves respecting and promoting:

- the right to freedom of thought and religion
- the right to freedom to express their beliefs as they wish
- the right to freedom of conscience, i.e. to personal values and a sense of right and wrong
- respecting, promoting and responding to personal preferences.

Practice which doesn't demonstrate inclusive practice, for example, denying someone the opportunity to worship in the way that their religion dictates or to choose what to eat or wear, is oppression. Oppressive behaviour denies individuals their freedoms and is a form of abuse.

Activity 38

Complete the activity on the handout.

Handout

Activity 1



(https://www.youtube.com/watch?v=a2KiTnsv5ZM)

What does the Act mean for the individuals we support?

Enter answer here		

Activity 2

Putting it into practice - The Act and your role

You have just started working in the health and social care sector. Explain the key points of the Social Services and Well–Being (Wales) Act 2014 as if you were telling an individual that you are supporting.

Enter answer here

■ Watch this video

(https://www.youtube.com/watch?v=Uuldq_ftQY8)

- Identify the rights the Act supports and promotes.
- Write a short summary of how the Act does this.

Enter ans	swer here
Activi	ty 4
1. Wha	at is the first thing Sean needs help with?
Enter ans	swer here
2. How	ocould timely advice and support help Sean?
Enter ans	swer here

In Wales, the Code of Practice for Social Care Employers (Employers' Code) sets the standards for employers. Practice guidance gives registered workers guidance related to their role. Other codes include the NHS Wales Code of Conduct for Healthcare Support Workers in Wales, and the Code of Practice for NHS Wales Employers and practice guidance such as the Practice Guidance for Residential Child Care for Workers Registered with the Social Care Wales.

Visit the link below and make a note of 4 requirements for workers explained in the Code.

Code of Professional Practice for Social Care: https://bit.ly/2v4cP2m

Enter answer here	

Activity 6

Social care workers should be supported and encouraged to follow codes of conduct and professional practice. Which of the statements below can help social care workers to follow codes of conduct and professional practice?

Manager support	
Training	
Longer lunch breaks	
Regular team meetings	
Only working shifts with friends	
Being very friendly with individuals accessing services	

What things do you like to do in your spare time? Compare this with the things your best friend or partner likes to do. Do you see a difference in your interests?

You wouldn't want to have to do everything the same as your partner so it is important to look at individual differences in a rights-based approach.

Enter answer here	

Activity 8

How do other legislation and national policies underpin a rights-based approach?

Have a look at one of the following and make notes on the impact you think it has on following a rights-based approach in health and social care.

- Declaration of rights of older people in Wales (2014)
- Welsh Language measure (2011) and Mwy na Geiriau
- Framework for the Welsh Language in Health and Social Care (2013)

Enter answer here	

	ry to show how you put them into practice.
Enter answer here	
Activity 10	
Think about when an advoca your findings.	ate would be used and what they can do to help someone. Make notes on
Enter answer here	

Complaints or concerns are to raise dissatisfaction in a service. This will benefit the individual as it may highlight an area that a carer was not aware of and can now make changes to accommodate them.

Reflect upon a time when you complained about a service or product you received.

- How did you go about this?
- What was the outcome?

Enter answer here...

- Were you happy with the outcome?
- What does this tell us about how to deal with complaints?

Activity 12		
What could be the impact o	on individuals if person-centred approaches are not imple	mented?
Enter answer here		

	nere		
Actvity 1	4		
vould you feel if	t to you? Is this di you were both tre not considered?		
Enter answer h	nere		

Why is it important to know what an individual's history, preferences, wishes and needs are in order

Research care plans on the internet and compare them.

What are the differences, and which do you think offers more choices for individuals?

Which do you think supports	a rights-based approach most effectively?
Enter answer here	
Actvity 16	
Explain how the assessment individual's active participation	and planning process or documentation can be adapted to maximise an n, inclusion and control of it.
Enter answer here	

Consider an individual you know and, with their permission, describe their needs holistically.
Enter answer here
Activity 18 Think about your family, friends and colleagues. In what ways do they demonstrate diversity?
Enter answer here

Talk to individuals and research the media, for example the press, TV and radio, fo	r instances of
where there is a belief that rights have been breached.	

Describe the rights that have been breached and the legislation that has been contravened.

nter answer here	

Activity 20

Imagine that you are different in one of the ways that make individuals liable to experience unfair and unjust treatment. Consider for example that English is not your first language, or that you are from another country. Describe how being discriminated against might affect you.

Enter answer here	

hink about any training courses you've attended and the books and manuals you've read that we imed at improving your work practice.	re
low did your practice or thinking change as a result?	
Enter answer here	
Activity 22	
Activity 22 low can risk-taking be a positive thing?	
low can risk-taking be a positive thing?	
low can risk-taking be a positive thing? hink of some examples to illustrate this.	
low can risk-taking be a positive thing? hink of some examples to illustrate this.	
low can risk-taking be a positive thing? hink of some examples to illustrate this.	
low can risk-taking be a positive thing? hink of some examples to illustrate this.	
low can risk-taking be a positive thing? hink of some examples to illustrate this.	

What are the basic steps involved in carrying out a risk assessment?

Draw up a simple risk assessment form.

Activity 24

Using the risk assessment form you have developed, carry out a short risk assessment of a hazard you have identified in your workplace, or out in the community. Record your findings.

Enter answer here		

Think about the personal relationships you have experienced during your life.

- 1. Why did the person become more than an acquaintance?
- 2. What sort of personal relationship did they become?
- 3. Which of them have survived?
- 4. Why do you think this is?

Enter answer here	

Activity 26

Which of these activities is considered as an acceptable practice?

Telling an individual about personal religious views	
Safe moving and handling activities	
Telling your friends details about what you do at work	
Referring an individual to a counsellor	

Enter answer here	
Activity 28 A colleague has just returned from leave and is not up to speed with what has been going on. are updated very quickly, due to lack of time, and proceed to carry on with their duties.	They
Describe two examples of how ineffective communication may affect individuals.	
Enter answer here	

important?	wer here	when speaking will	tri marviduais dira v	
	different types of communic	cation methods tha	at could be used wi	th people with all
	ods could be used?			
Enter ans	wer here			

How did you feel?	
What changes did you make to your method of communication?	
Enter answer here	
Activity 32	
Mark has limited communication as he has a hearing impairment.	
mark has infliced confindingation as he has a ricaring impairment.	
What approaches can you use to communicate with Mark?	

Think about a time when you were on holiday or speaking to a person whose first language was not

Give two reasons why you think it is important that services are provided using the Welsh language.
Enter answer here
Activity 34
How does the 'Active Offer' improve services for individuals?
Enter answer here

	n you identify any possible factors that may contribute to them using behaviour that is difficult for dividuals to understand and manage or which may cause harm to themselves or other individuals?
E	nter answer here

Think about an individual that you have supported in the past or are supporting now.

Think about two health and social care settings such as a residential setting or a day care centre for individuals with learning disabilities.

1. In what ways might the individuals attending each setting be different from one another?
Enter answer here
2. Why is it important that workers' own attitude and behaviour is positive towards the beliefs, values and life experiences of the individuals?
Enter answer here

what have they been and who and what are they now?		
Enter answer here		
2. How would you describe yourself now in terms of beliefs, values and preferences?		
Enter answer here		
3. How would you like others to see you?		
Enter answer here		
4. What cultural customs, traditions and expectations have been handed on to you by your		
family? Which of them have you abandoned or rejected? Think about why this was.		
Enter answer here		

oreferences and cultural background. In other words, that you are developing inclusive work oractices, and that your attitude and behaviour demonstrates respect for these individual differences		
Enter answer here		

Think about your practice and how you could improve it. Monitor improvements in your practice by checking with individuals you support that you are showing respect for their beliefs, values,

Answers

Activity 3

Suggested response:

- legally protects individuals from discrimination in the workplace
- legally protects in wider society
- replaces previous anti-discrimination laws with one single Act
- · makes the law easier to understand
- strengthens protection in some situations
- protects individuals from discrimination, harassment and victimisation.

Activity 4

Suggested response:

- 1. His sensory loss. This will promote independence and increase Sean's confidence and his ability to carry out activities of daily living.
- 2. It would decrease his feelings of isolation and anxiety in relation to his ability to live on his own. Regular support would enable him to remain living independently.

Activity 5

Manager support	✓
Training	~
Longer lunch breaks	
Regular team meetings	~
Only working shifts with friends	
Being very friendly with individuals accessing services	

Suggested response:

Declaration of rights of older people in Wales (2014) – aims to help older individuals understand their rights more effectively and how they relate to current equality and human rights laws in Wales. Identifies how older individuals can be supported.

Welsh Language measure (2011) and Mwy na Geriau – identifies provision in relation to the official status of the Welsh language. Established the office of Welsh Language Commissioner. Commissioner's aim is to promote and facilitate the use of the Welsh language, working towards ensuring that the Welsh language is treated no less favourably than the English language.

Framework for the Welsh Language in Health and Social Care (2013) – outlines the approach to improve services for those who need or choose to receive their care in Welsh.

Activity 9

Suggested response

- use clear communication
- · find out about individual's needs, wishes and preferences
- encourage independence
- address the individual using their preferred name
- offer choice as much as possible
- provide positive feedback.

Activity 10

Suggested response

If an individual finds it difficult to understand their care and support or finds it hard to speak up, there are individuals who can act as a spokesperson for them. They make sure the individual is heard and are given an advocate. Advocates can, for example, help an individual:

- understand the care and support process
- talk about how they feel about their care
- make decisions
- challenge decisions about their care and support if they do not agree with them
- stand up for an individual's rights.

Suggested response

The individual does not:

- receive the care and support they want and need
- make the choices they should be involved in
- · live the life they should be living
- flourish, grow and develop as they should.

Activity 13

Suggested response

- to meet needs, wishes and preferences
- to acknowledge the individual's history
- · to identify activities which may interest them
- to encourage communication and interaction.

Activity 15

Suggested response

Look for:

- · clear guidance
- clear language
- · involvement with the individual
- headings which meet the needs of individuals
- space for review and amendment.

Actvity 16

Suggested response:

- clear terminology
- use of symbols/pictures
- level of involvement to be appropriate to their ability
- use of preferred communication methods
- access to venues
- use of interpreters, advocates.

Suggested response:

You might feel angry, threatened, anxious, your self-esteem and confidence may be lowered.

Activity 21

Suggested response:

Practice included new ways of working, involved considering more aspects of service delivery to meet needs and safer ways of working.

Actvity 22

Suggested response:

When we think about taking risks, we think of danger, fear and uncertainty. But risk-taking can also have many positive outcomes. For example, if the risk pays off, an individual with a disability might gain a huge confidence boost, and a sense of satisfaction which far outweighs the initial risk, or an individual can develop skills they did not know they had.

Activity 25

Suggested response

- 1. This might be due to becoming friends, change to relationship due to work, socialising.
- 2. Friends, neighbours, customers.
- 3. This may be all of them, some of them or none of them.
- 4. Moving away, change of interests, issues/problems.

Actvity 26

Telling a child or young person about personal religious views	
Safe moving and handling activities	~
Telling your friends details about what you do at work	
Referring a child or young person to a counsellor	~

Suggested response

- to interact
- to express thoughts and feelings
- · to express pain
- to express happiness/sadness
- to make friends
- to exchange views.

Activity 28

Suggested response

- needs might not be identified and met
- · errors to treatment or service delivery can occur if information is not accurate
- could lead to misunderstanding, loss of confidence, the wrong treatment or care being given
- inaccurate or incorrect information being given or shared, leading to anxiety and stress.

Activity 29

Suggested response

- · listening skills
- eye contact
- time
- · use of questioning
- · active listening.

Activity 30

Suggested response:

Written, verbal, pictures, videos, braille, computer, objects of reference e.g. pointing to a teapot to mean would you like tea.

Suggested response:

Speak clearly, slowly, distinctly, but naturally, without shouting or exaggerating mouth movement, face Mark directly, say Mark's name first to gain his attention, keep your hands away from your face so Mark can see what you are saying.

Activity 33

Suggested responses:

- to promote inclusion and involvement
- to promote independence
- · to acknowledge language and culture
- · to ensure services are understood by all
- to meet the needs of the Welsh speakers.

Activity 34

Suggested responses:

- provision of better outcomes
- user lead
- needs led
- inclusion
- provision of Welsh medium without having to request it.

Activity 35

Suggested response:

- · a means of communication
- frustration
- anxiety
- pain
- unmet needs
- loss
- · transition.

Suggested response:

- 1. Their needs, abilities, wishes and preferences will be different. Each of them might have different values, morals and beliefs such as their daily routine, how they prefer to be addressed e.g Mr, Mrs or by their first name, their eating habits etc.
- 2. To support positive interaction, good quality service delivery and to encourage individuals to communicate and interact.

Activity 37

Suggested response:

- This might include family, friends, carers, colleagues, school friends; the same might apply now or your social network might have changed and now include people with different views and ideals.
- 2. Beliefs, values and preferences may be more focussed as we grow up, may be influenced by our family, friends etc.
- 3. Often we would like others to see us as caring, with good values and belief systems.
- 4. This can include religious, social or cultural customs, traditions and expectations, for example. You might not want to attend religious ceremonies any more, for example. Or you might choose not to eat meat any more, but your family does.

Activity 38

Suggested response:

Changes or improvements could include increasing your knowledge about specific aspects of service delivery. This could be diabetes, autism or cultural aspects. Individuals could give feedback that you are more understanding, or more aware of their individual needs.