Everybody communicates; the ways in which people communicate make us uniquely human. Without communication you would feel lonely, isolated and unable to function as an individual or as a member of a team.

This unit discusses communication which may be verbal (words) and non-verbal (body language, gestures, touch, eye contact and pictures). Verbal and non-verbal communication methods work together, to help people make sense of what they are hearing, seeing and feeling.

This unit also discusses difficulties with communication, confidentiality and data protection. These may present particular challenges or considerations in the adult health and social care setting.

On completion of this unit you should:

- understand why communication is important in adult social care settings
- understand how to meet the communication and language needs, wishes and preferences of an individual
- understand how to reduce barriers to communication
- understand confidentiality in adult social care settings.
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1.1 The importance of communication in adult social care settings

Health and social care is fundamentally about people, so effective interpersonal communication is vital in providing care services. Communication takes place:

- with people who use services in order to assess their needs and plan their care
- within teams and organisations so that information about individuals also the skills of each of your colleagues can be shared and used effectively
- with other care providers to avoid gaps and duplication in care, and to learn from their observations.

Some of the individuals may have difficulties with communication and need special assistance.

What is communication?

Communication starts with an intended message being sent (‘transmitted’ or ‘projected’) from the source. Once it reaches the destination it will have been changed because of ‘noise’ and the interpretation or perception of the receiver. Feedback is an essential part of the communication process and can also be affected by ‘noise’ (see the diagram opposite).

Senses are your body’s physiological abilities that allow you to perceive the world around you. People have five senses:

- sight
- hearing
- touch
- smell
- taste.

Take a few moments to consider how each of the five senses helps in receiving information from another person.
You mainly use the senses of sight, hearing and touch to communicate, and occasionally the other two – smell and taste. Remember that communication is listening (receiving) as well as talking (sending). Effective communication is the sharing of meaningful information between two or more people, with the goal of the receiver understanding the sender’s intended message. The person who receives the message sends feedback so that the sender knows whether the message has been received and understood. The original sender of the information is responsible for recognising and understanding that feedback, and acting on it. For example, if the message wasn’t understood at first, they might have to send it again, perhaps in a different way.

Why do people communicate?

Try to imagine what it would be to spend a day without communication – no conversation; no TV or radio; no reading; no computer; no phone calls or texts; no hugs. People naturally interact with each other: they benefit from and enjoy communicating. This is true whether you are an introvert (quiet and private) or extrovert (life and soul of the party).

Now try to imagine how you would do your job without communicating with individuals and your team. Can you imagine all the mistakes and repeated work that would result? Most of your job would be impossible!
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So, you can see how people communicate for work and pleasure, to make things happen, to keep up with what's happening and to learn and understand.

Communication Studies draws on sociology, psychology, anthropology (what it is to be human), biology, political science and economics, as well as literary studies, linguistics (human language) and semiotics (signs and codes). It relates to other disciplines too, including organisational development, languages, philosophy, history, mathematics and computer science. So there are many areas in which you can learn more!

Mary, who has dementia, has fallen and broken her hip. She has been accompanied to hospital by a care worker from the residential care home where she lives.

1. List three things that the people involved in Mary’s care need to share with hospital staff to make sure she receives the best possible support.
2. What could happen if the people involved in Mary’s care don’t communicate effectively with each other and with her?

How does effective communication help in the workplace?

Think about a time when something went wrong at work. Perhaps one of the team made a mistake or someone complained. It is likely that it happened because of a problem with communication. What did you and your colleagues learn from what happened?

Organisations have rules about communications that cover both verbal communication (such as how to answer the telephone) and written communication (such as what to include in letters sent by the organisation). These rules will be described in policies, guidelines and standards. Make sure that you are familiar with

Verbal communication
When a message is delivered by being spoken.

Key Term
them. Following the rules ensures that everyone keeps to the law and shows a professional and reliable image to the public.

Most organisations seek and use feedback from the people who use their services. As a team member this may mean asking questions like ‘Was everything OK for you today?’ or ‘Is there anything else I can do for you?’

Sometimes a letter from an individual – either giving praise or complaining – can be useful for exploring what works well and what could be improved.

Health and social care organisations may use surveys and support groups to obtain feedback.

Communication/feedback – Coventry CC
Customer feedback informs development of social care from front line delivery to inspection standards. It is all about the journey of the individual and the quality of service they have received. Staff as well as organisations need to reflect on customer feedback to ensure they use this information to evaluate and design their delivery and training.

What can you learn by watching how people communicate?

You need to watch the person you are communicating with in order to find out whether they have understood what is going on. They might reply by speaking to you but you also need to look at their body language and facial expressions.

Some colleagues may be particularly skilled at having ‘sensitive’ conversations with individuals. These skills need to be learnt and may include developing empathy with the person, or stepping ‘into their shoes’, by using similar language, gestures and possibly touch. Spend some time with experienced colleagues to observe these skills.
1.2 Meeting the communication and language needs, wishes and preferences of an individual

Everyone has their own preferred ways of communicating and their own particular language needs. Think about how you like to communicate:

- Do you prefer to talk or text?
- Do you prefer to book a holiday at a travel agent or online?
- If you are lost, do you prefer to be given directions or look at a map?
- What languages are spoken in your area?
- What languages do you speak?

At the first contact with an individual, you should assess their needs and preferences for communication and agree how this will be done.

Some people may need you to adapt your approach to meet their specific needs. For example, you may need to organise support such as arranging for a translation into another language, or signing.

People from different backgrounds and traditions are likely to use some different verbal expressions and gestures, for example, for greetings and in paying respect. By showing that you understand these, you are likely to be able to build a positive relationship with the person.

People who may need particular arrangements include anyone:

- who does not speak English as their first language
- with hearing difficulties
- with sight loss
- with learning difficulties

Dementia
A condition affecting the brain. People with dementia often have memory problems and there may be changes in the way the person experiences their surroundings; they will need extra support with communication.

Key Term
with emotional challenges or distractions, or mental health problems

with memory loss, including dementia.

Communication and language needs of individuals

Everyone is different; so you need to understand the preferences of those using your services and try to use their preferred methods of communication. Communicating in different ways makes it easier for people to understand the message you are trying to get across. People tend to have a preference for either hearing or seeing information; although a combination often works best of all. For example, consider the following.

If you describe the directions to a place while showing the route on a map, the person is less likely to get lost. This is because you are communicating in a way that meets both hearing and seeing preferences.

Many people are not confident readers. Did you know that the average reading age in the UK is about that of a seven year old? So use short sentences and straightforward expressions for written communication, supported by pictures or diagrams.

Many people speak English as a second language, and some individuals may have very limited English. Maybe English is a second language for you or a colleague.

Communication methods

Maybe you have had the opportunity in the classroom to consider some of the ways in which people communicate, for example:

- talking and listening – face to face, group lectures and debate
- writing and reading – emails, leaflets, plans, records
- gestures, facial expressions, body language
- diagrams, pictures, charts, maps
- Braille, sign language and Makaton

Braille 
A system widely used by blind people to read and write. Each character consists of up to six raised dots arranged in a rectangle.

Sign language 
Uses visual sign patterns to convey meaning by combining hand shapes, and movement of the hands, arms or body, and facial expressions. British Sign Language (BSL) is the preferred sign language in the UK.

Makaton
A system of signs and symbols to help communication. It supports the spoken word by using the signs and symbols in spoken word order.

Key Term
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Pick one or two activities from the list below that you’ve not tried before and have a go!

Read a poem or listen to a piece of music with a friend, then debate the writer’s mood.

Talk with your manager or the organisation’s complaints department to learn how complaints are dealt with and used for improvement.

Make notes about how using a shared diary for your team could ease communication – and then try sharing your work diary with your colleagues.

If you are a ‘texter’, talk on the phone instead for a day and reflect on what you learnt.

Play a game of ‘charades’ with your friends or family and notice who finds it easiest / most difficult. Why might that be?

Communication is an essential skill for those in leadership roles. There are times when a leader will simply tell you what to do, for instance if there is an urgent situation. At other times leaders may need to coach you in order to get you to ‘buy in’ to a change; or will delegate responsibility for a task.

Your questions answered

When should I seek advice about communication?

Make sure you know about the various communication methods used by your team. For example:

- Standards for care records – completed at the time care was provided; accurate and complete; containing fact, not opinion.

- Using technology – find out what to do if the computer or phone system is temporarily unavailable.

- If you are away from your workplace and have personal information with you – find out what you should do to keep it safe.

- If things go wrong – make sure you know who to contact for advice, and how to report incidents and complaints.

- Sometimes people over-react to bad news or frustrating circumstances. Many organisations have a ‘zero tolerance’ policy regarding physical or verbal violence. Report any instances to your manager, who will provide advice and support. You will also have the chance to learn how to calm situations down through working with and observing experienced colleagues.
As a health and social care worker you are a leader some of the time. Find a convenient time to talk with your manager or mentor about your ideas for how you could communicate in a leadership role.

### 1.3 Reducing barriers to communication

#### What are the barriers to communication?

Reflect on the times you have found communication difficult and why this happened. You may find it useful to discuss this with a colleague.

1. Were there loud sounds around you, such as music, conversation or machinery?
2. Did the person have difficulty reading?
3. Was one of you thinking about something else or in a hurry?
4. If the subject was technical, was one person using words that the other person couldn’t understand?
5. Did one person have difficulty in speaking or hearing?

Barriers to communication are distractions or ‘noise’ that interfere with sending and receiving a message. Review the diagram of two-way communication on page 2 of this unit.

There are four types of noise or distraction:

- **physical or external noise** – distractions in the environment such as cold rooms, unusual sounds and sights
- **physiological noise** – biological factors such as anxiety, feeling unwell, in pain, tired or hungry, a person’s disabilities, and the effects of alcohol or drugs
- **psychological noise** – preconceptions and assumptions, such as a lack of confidence or believing that someone from a different country cannot speak English well
- **semantic noise** – using words that are confusing such as jargon, technical expressions and abbreviations.

Discuss the following statement with a colleague: ‘If it’s not written down it didn’t happen.’

Find out what speech, language and advocacy services are available for people using your organisation’s services.

What leaflets about your services are provided in other languages and Braille?

How does your organisation communicate with its clients who use sign language?

Research some charities and organisations that can support people in your setting, such as the Stroke Association and the Royal National Institute for Deaf People (RNID).
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When you communicate with an individual you should notice how the person responds to your message. Remember that you can pick up signals from their body language as well as how they reply to you. It is important to do this so that you know the person has perceived your message in the way you intended it, and that they have understood what you have said. If an individual perceives or interprets your message differently to what you intended, they may not take the actions that you are expecting. This in turn could affect the successful outcome of the care. If necessary you could repeat the information in a different way to overcome the barrier that has led to the misunderstanding. Particularly relevant examples of this is for health promotion such as quitting smoking, or where the person is managing a long-term condition and needs to take medication correctly. Remember to consider how your reactions could be perceived by the other person.

Beechvale House is a community social care setting. It provides a number of services, including:

- English language classes for asylum seekers who originate from non-English speaking countries
- A drop-in centre for children with moderate learning difficulties
- A luncheon club service for older people and people with sensory impairments and physical disabilities
- Self-help groups for people who have had a stroke or have dementia or mental health problems.

The staff at Beechvale House are very busy. They have little time to sit with the individuals and build relationships.

Suggest five barriers to communication that people might experience at Beechvale House and say how you would help overcome them.

**Stroke** A stroke is caused by a blockage in a blood vessel or a bleed into the brain. This damages part of the brain and the function associated with that part. Strokes affect people in different ways, depending on the part of the brain that is affected and the extent of the damage. Recovery from a stroke depends partly on the speed at which the condition is recognised and first treatment is given.

**Key Term**
How can you reduce and overcome barriers to communication?

Go back through the list of times when you may have found communication difficult and think about how to deal with these.

Here are some ideas:

1. Always check the other person’s understanding of the information you have given them by asking questions or encouraging them to repeat what you have told them. If this is difficult for them to do, think about how else they can show they have understood. Getting this feedback will help you to communicate in a different way if you need to.

2. If the environment is noisy, move away from the noise or close the window; ask if you can turn off the TV.

3. If there are reading difficulties, you’ll need to recognise this and assess the person’s literacy. Offer help in filling out forms and explain written information.

4. Consider using technical aids such as computer software, or human aids such as translators or interpreters.

5. If the person is finding it difficult to concentrate, ask if there is a better time to have the conversation. If it is important to have the conversation now, keep it brief and straightforward; check that the other person has understood what you have said and encourage them to ask questions.

6. Avoid jargon and **acronyms**; provide enough explanation about a technical subject for the other person to understand; consider using some written information with diagrams. Replace acronyms by using the words in full if you can.

7. For people with reading difficulties, consider describing medication by its colour and shape rather than by name.

8. If someone is distracted, back up what you have said in writing and explain how to follow it up.

**Acronym** A word formed by the first letters of other words, for example GP (general practitioner).
1.4 Confidentiality in adult social care settings

What is confidentiality?

Typically, communication between a person and a professional such as a doctor or lawyer is private or ‘privileged’, and may not be discussed or passed on to others. The ‘need to know’ principle underpins confidentiality and information security. In adult health and social care settings, individuals’ records are considered to be confidential. Records should be kept securely and only shared within the team or with another professional where that person needs to know that information, for example, where that knowledge is essential to providing care. Before passing on any confidential information, ask yourself, ‘Does this person really need to know this?’

How does confidentiality affect people in the workplace?

Health and social care organisations have rules about handling personal information, whether it is written or spoken. This is known as information governance. You must make sure that you are familiar with the policies and guidelines in your organisation and department.

Here are some practical tips that describe how to maintain confidentiality in your day-to-day communication within your work setting:

- Make sure that you know who you are speaking with on the phone.
- Keep written information about individuals secure, for instance in a locked cabinet.
- Make sure that you understand and keep to the rules in your workplace about keeping electronic communication about individuals safe.

Confidentiality The process of recognizing certain information as sensitive, keeping it secure and only sharing it with those who need to know in order to provide care and support.

Key Term

The Data Protection Act (1998) protects people’s rights to keep their personal data (that is, information about them) private. Anyone holding personal data about living people in the UK must normally comply with the Act.

did you know?

The Data Protection Act (1998) protects people’s rights to keep their personal data (that is, information about them) private. Anyone holding personal data about living people in the UK must normally comply with the Act.
Never discuss individuals outside your work, even without using their name. If you need to talk about your work with a colleague away from the workplace, make sure that you cannot be overheard.

Individuals have a right to privacy, so make sure you gain their consent if you need to discuss their circumstances or care with family members.

The Data Protection Act

1. Personal data shall be processed fairly and lawfully and, in particular, shall not be processed unless –
   (a) at least one of the conditions in Schedule 2 is met, and
   (b) in the case of sensitive personal data, at least one of the conditions in Schedule 3 is also met.

2. Personal data shall be obtained only for one or more specified and lawful purposes, and shall not be further processed in any manner incompatible with that purpose or those purposes.

3. Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed.

4. Personal data shall be accurate and, where necessary, kept up to date.

5. Personal data processed for any purpose or purposes shall not be kept for longer than is necessary for that purpose or those purposes.

6. Personal data shall be processed in accordance with the rights of data subjects under this Act.

7. Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data.

8. Personal data shall not be transferred to a country or territory outside the European Economic Area unless that country or territory ensures an adequate level of protection for the rights and freedoms of data subjects in relation to the processing of personal data.

The Data Protection Act has eight principles for protecting information.
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Your questions answered

When should confidential information be shared?

There are important exceptions to confidentiality, such as where it conflicts with the duty to warn of a hazard or to protect clients from harm. Examples include:

- suicidal behaviour
- statements indicating plans to kill another person
- abuse of children and vulnerable adults.

If the practitioner or clinician has reasonable suspicion, they are responsible for warning intended victims, and will be protected from prosecution.

How and when should I seek advice regarding confidentiality?

There will be times when you need to seek advice and support about how to maintain confidentiality in health and social care work settings. For example, you may be asked for information by others in authority such as the police, other government agencies or the person’s GP. There are also occasions where you may need to proactively pass on information, such as to warn of a hazard or to protect someone from harm.

You should ask advice as soon as possible from a senior colleague or your manager if you are asked to, or think you should, share confidential information.

You should avoid discussing your concerns with anyone else in order to protect the confidentiality of the person’s information.

Health and social care settings often have to communicate with other organisations such as care homes, voluntary organisations, hospitals and doctors. Make sure you understand what information you are expected to share, and with whom you should share it.

Your own and colleagues’ personal information will be held confidentially by the Human Resources department. You must not share a colleague’s personal information with anyone else without their permission.

Explain what you would do if you were asked for a team member’s personal phone number?

find out!
Quick Quiz

1 Which three senses do you mainly use to communicate?
   a. Hearing, sight and touch
   b. Touch, smell and taste
   c. Smell, hearing and taste
   d. Taste, hearing and touch

2 Which of the following is not an example of ‘the media’?
   a. Television
   b. Website
   c. An advertisement
   d. A bank account

3 Which of the following actions would you not use to assist communication with a person who has hearing difficulties?
   a. Speak clearly without shouting
   b. Find them a translator
   c. Ask if they prefer to use writing or symbols
   d. Face the person so that they can lip read

4 Which of the following correctly describes semantic noise?
   a. Somebody shouting at you
   b. The words you use, especially if they are complicated or full of jargon
   c. Somebody not listening to what you’re saying
   d. How conversations sound to people with hearing disabilities

5 If you think somebody doesn’t understand what you’re saying, what should you do?
   a. Ask your manager to talk to them
   b. Repeat the information until they nod
   c. Come back later
   d. Check their understanding and then give them the information in a different way

6 What is the average reading age in the UK?
   a. 10 years  c. 4 years
   b. 7 years  d. 14 years

7 Which of the following is a justifiable reason for sharing information?
   a. The person has told you that they enjoy watching ‘adult’ films.
   b. The person has told you that they want to self-harm.
   c. The person has told you that they are taking part in a political demonstration.
   d. The person has told you that they are worried about being made redundant.

8 Which of the following examples describes an appropriate use of the ‘need to know’ principle about information?
   a. ‘This information would be useful to a journalist.’
   b. ‘My friend would find this interesting.’
   c. ‘If my team leader knew that the client has an appointment tomorrow at the same time as their meeting, they would avoid a wasted journey.’
   d. ‘If the client told me their PIN number I could get their partner to do their banking for them.’

9 Which of the following is not one of the key principles of data protection?
   a. Personal data shall be accurate and, where necessary, kept up to date.
   b. Personal information may be sent anywhere in the world, whenever this is necessary.
   c. Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed.
   d. Personal data processed for any purpose or purposes shall not be kept for longer than is necessary for that purpose or those purposes.

10 When is the best time to make a record of the care you provided?
    a. At the time of, or immediately after, providing the care
    b. At the end of your shift
    c. In response to a complaint
    d. In preparation for a court case