

NVQL3-L4 / ITQ3

Skills Modules for the Care Sector

- **A series of generic Skills Workshops to help work-based learners make the transition from NVQ L3 to L4**
- **Designed to be delivered in an action-learning context**
- **With accompanying ITQ modules to L2**

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NVQL3-L4 / ITQ3 Skills Modules for the Care Sector

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Session Components

All of these components may be indicated in any of the sessions, not necessarily in this order.

- **Introduction** – about the session
- **Freethink** / prompted activity – focusing on the specific skill being addressed in the Module, its application and context
- **Discussion from SCENARIO/S** – pairs or group activity: Does this situation ever arise in your workplace – or could it? What are the skills needed to deal with it – which person needs what skills?
- **HANDOUT** (where supplied) – for discussion and tasks
- **Modelling** (Tutor / students demonstrate skill)
- **Role Play from SCENARIO/S**: Ideally in threes (using Observer), or in pairs if numbers insufficient. Have a 5 minute conversation ‘in role’, then 5 mins feedback (order: Observer last. NB recap feedback skills beforehand). Swop round if time.
- **Debrief** – full group. What was that like? Would it have been a difficult conversation to have in real life? Observers: what did you see happening well? What would you like to have seen done / said differently?

If session is linked to ITQ, then IT training component introduced here

- **INDIVIDUAL TASK** – discussion
- **Action Planning** – learner commits to working on aspect of the Skill-set. Tutor should help to contextualise, for individual learners. Use **Learning Journal template** to capture understanding and action points
- **ASSIGNMENT** – These are tailored as far as possible to the learner in their workplace. **Input and feedback from Employers sought here.**

NB these sessions are designed to be delivered as much by **facilitation** as by **direct teaching**.

In a work-based learning environment, the learner is already carrying out or encountering many of the activities listed here.

The tutor’s role is to help them **identify and name the skills involved, fill in gaps and make the skills transferable**. The knowledge and experience may already be present, but not a sense of its broader application.

The Employer’s role is to **reality-check the learning, and place it in context** for the learner.

ROLES for Action Learning Sets

MANOR PARK RESIDENTIAL CARE HOME

(A Residential Care Home for older clients, with accommodation for 34 residents)

Lynn – Care Assistant

Lynn is a local mother and grandmother who left school with no qualifications. She worked as a school dinner-lady and then a crossing warden while her children were school-age, and for a few years after that. She has worked at Manor Park residential care home for 11 years, where she is now a Senior Care Worker. She also cared for her own elderly mother, who lived on her own after Lynn's father's death until she died herself a few years ago.

Lynn is an experienced carer who is now being encouraged to train to become a manager.

Natalya – Care Assistant

Natalya is from Poland, and came to the UK with her boyfriend, who has found work in the building trade. Natalya is 26 and attended an ESOL (English For Speakers Of Other Languages) course at the local college. She replied to an advertisement a few months ago for a Care Assistant at Manor Park. Natalya had no previous experience as a carer.

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Sarah Simmons - Manager

Sarah was recruited from a previous Care Manager's job when Manor Park opened a new wing, three years ago. She is an experienced manager with Registered Manager Award (RMA) NVQ Level 4.

She is one of two Care Managers at Manor Park. She has overall responsibility for Training and Development.

Mrs Atkins – Service User at Manor Park

Mrs Alice Atkins, in her mid-70s, has a Social Services-funded place at Manor Park. She suffers from mild dementia. Mrs Atkins and her husband lost their son 15 years ago, when he was in his early 30s. He is buried in a local cemetery, which they like to visit together. Their daughters both visit regularly.

Mrs Atkins' husband lives close by and visits every day. Their two grown-up daughters both live further away with their families, and visit every few weeks or so.

THE CLARE CENTRE HOSPICE

(An 18-bed In-patient Unit, Hospice at Home and Family Support Service)

Marcus – Volunteer Care Assistant

Marcus is 33 years old and a former teacher. He is looking at a career change after nursing his partner through a terminal illness. He has not decided whether to go for a nursing qualification or a broader-based one in health and care. He is volunteering for a year at the Clare Centre hospice, where his partner received palliative care during the last stages of his illness, to gain work experience in a healthcare environment.

Janice Baker – Head of Care Services

Janice, Marcus's manager, is a trained nurse who manages both the paid nursing staff and the voluntary care staff at the hospice.

Valerie Jenkins – Lead Counsellor

Valerie has just become Head of the Clare Centre's counselling service. Valerie was a volunteer counsellor at the Clare Centre hospice for several years, while she completed her counselling qualification. She will now be responsible for managing **Sue, Secretary to the Lead Counsellor**, who is also new in post, and two volunteers.

Sue has no direct experience of the care setting. She is a single mum with two school-age children

Sue has taken this part-time post because it offers flexible working hours which help with her childcare arrangements.

Simon Feltham, Service User

Simon Feltham, 46, has recently entered the Clare Centre hospice with advanced cancer. He has had both chemotherapy and radiotherapy but is now receiving palliative care and help with pain management.

Simon's partner Roz tries to visit every day, and other friends and family members often drop by.

Patricia and Graham Gray, Service Users

Patricia Gray is a 62-year-old woman who has recently been diagnosed with lung cancer. She and her husband Graham are both very shocked at the news. They have just contacted the Clare Centre wanting to know about treatment options and what to expect.

Other Agencies: Social Services, Doctors, Consultants, other medical professionals. The District Nurse, Community Psychiatric Nurse, Opticians, Dentists and Chiropodists. CQC Inspectors.

MODULE 0		MODULE 0
INTRODUCTION		ITQ Tasks and Evidence
<p>Content:</p> <ul style="list-style-type: none"> ● Generic Skills Training – Methods and starting points. What are we hoping to achieve? Introducing the materials. ● Group Agreements (confidentiality, participation, all contributions valued, peer support and feedback etc) ● Study, learning and group skills ● Introducing the Learning Cycle, and Action Learning ● Self Assessment and Peer feedback 	<p>Associated paperwork</p> <p>Learning journal (<i>See Template in Module T.0 Tutor Notes</i>)</p>	<p>Operate a computer L1</p> <p>Task 1a Create a checklist in Word™ for colleagues to show how to set up and connect a computer and printer, including:</p> <ul style="list-style-type: none"> ● checking connections ● turning on the PC ready for use ● how to change sound volume or date/time settings. <p>Incorporate a simple risk assessment on the work area around the computer, and note the findings.</p> <p>Task 2 – Create a short report in Word™ on the different types of storage media, and how to save to and retrieve files from these locations</p>
<p>Relates to NVQ in Leadership and Management for Care Services (LMC) - NVQ Number 3078</p> <p>Links to LMC A1.1, self-management and self-development</p>	<p>Associated IT skills</p> <p>Keyboard skills</p> <p>Create a simple Word™ document: start an electronic learning journal</p> <p><i>(for format, see Template in Module 0 Tutor Notes)</i></p>	

MODULE 0 – Introduction

TUTOR NOTES

- Generic Skills Training – Methods and Starting points. What are we hoping to achieve?

Objective: to enable work-based learners in the Health and Social Care sector, currently at NVQ L3, to make the transition to L4 through a combination of self-managed learning, employer involvement and tutorial and peer support.

Introduce the **materials** (including the Roles for Role Play) and **working style** (See Tutor Notes – Session Components)

- **Group Agreements** (confidentiality, participation, all contributions valued, peer support and feedback etc)

Involve the group in a discussion about what else is important (trust, safety, humour, tact, sensitivity etc) among a group of people who have to work together

- **Study, learning and group skills**

Involve the group in a discussion about what they need to put in place for themselves, to make good use of these training modules. Where and when people are going to study and carry out their work-based assignments; what are the usual obstacles? How can you tackle them? Time-management, communication skills, confidence, and asking questions.

- Introducing the **Learning Cycle, and Action Learning**

Kolb's Learning Cycle - simple form. Learning through Experiencing > Watching > Reflecting / Thinking about the Learning > Experimenting / Innovating > Putting into Practice (= back to Experiencing), and so forth. People start at different places in the cycle. Encourage the group to think of examples from their own situations, of different ways of learning – read the instructions, copy someone else, sit in a classroom, etc

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Continued/ MODULE 0 – Introduction, TUTOR NOTES

Action Learning – ‘Learning by Doing’ – and then using Peer, Tutor and Employer feedback to assess results.

Simple format for a discussion-based Action Learning session:

WHY?	WHAT?	HOW?	WHAT ACTIONS DO I NEED TO TAKE, BY WHEN?
<i>e.g. Why is this subject important? Why do I need to know this? Or, why are things done this way?</i>	<i>e.g. What new information am I getting here? What’s the purpose of this? What do I feel I have learnt? What else do I need to know or find out, now?</i>	<i>e.g. How do we do this, where I work? How do I find out what I need to know? How do I put this into practice? How will I know when I’ve got this right?</i>	<i>What steps do I need to take to consolidate this learning, or put it into practice? Who will assess me / give me feedback? Who do I need to contact? By when?</i>

NB this is replicated below in the Learning Journal Template (below), to make it easier for learners to capture their own learning.

- **Self Assessment and Peer feedback**

Basic rules of FAST feedback (to self and others): see Self-Assessment / Feedback Checklist, below

In role-play, where numbers permit, use threes – two ‘roles’ and an observer. Ask the observer to give their feedback first.

Module 0 Activity 1: Self-Assessment / Feedback Checklist

A. Self-Assessment

Questions for learners to **ask themselves**: if

1 = “I don’t really think I have this skill”, (eg, Clear Communication)

2 = “I think I know how to do this”, and

3 = “I think I have this skill and use it a lot”,

How would I score myself on this skill? – Why? Can you think of situations when you have used these skills, or could have?

B. Feedback

Following group discussion or role-plays, practice giving each other feedback on what you have observed.

Try and make a ‘**praise sandwich**’ – start and finish with the good things you saw, sandwich any criticism in the middle.

Don’t forget the feedback should be **F.A.S.T.** – **Focused** (on one thing that could be changed, or that you saw happening well), offered by **Agreement** (“are you OK with getting some feedback from me?”), **Specific** – give examples of what you saw, and **Timely** – make sure it’s private, and at an appropriate moment.

Module 0 Activity 2: setting up a Learning Journal

Learning Journals can be useful for reflecting upon learning and recording progress in building skills. It helps teach self-analysis, and gives an objective sense of progress. It is helpful to record actual examples of successful or unsuccessful practice.

Activity: Set up a simple Word™ Document with the following headings (see next page) or use pages of an A4 notebook, drawn up in the same format, if not using IT. It is important to file these pages together, as they represent a record of ongoing progress.

This is the learner’s own record of progress – it is a personal tool. It is not for handing in.

MODULE 0 HANDOUT – TEMPLATE FOR A LEARNING JOURNAL PAGE

(The space below is for the Learner’s own notes)

DATE:	MODULE NUMBER / SUBJECT:		
WHY? <i>eg. Why is this subject important? Why do I need to know this? Or, why are things done this way?</i>	WHAT? <i>eg. What new information am I getting here? What’s the purpose of this? What do I feel I have learnt? What else do I need to know or find out, now?</i>	HOW? <i>eg. How do we do this, where I work? How do I find out what I need to know? How do I put this into practice? How will I know when I’ve got this right?</i>	WHAT ACTIONS DO I NEED TO TAKE, BY WHEN? <i>What steps do I need to take to consolidate this learning, or put it into practice? Who will assess me / give me feedback? Who do I need to contact? By when?</i>

MODULE 1		MODULE 1
Communicating in Person and Writing		ITQ Tasks and Evidence
<p>Content:</p> <ul style="list-style-type: none"> • Interpersonal skills: relating to colleagues, service-users and the public • Presenting yourself professionally • Communicating clearly - the five Ws • Message-taking, reporting, letter-writing 	<p>Associated paperwork</p> <p>Internal memo or email</p> <p>Simple letter</p> <p>(Continue with Learning Journal)</p>	<p>Word L2 - Task 2 (Part 1)– Create a letter to support the Individual Task in Module 1.</p> <p>Email L2</p> <p>Task 2a – Create a checklist for your organisation on the rules of ‘netiquette’ when communicating with others</p> <p><i>(for task 2b, see Module 6)</i></p>
<p>Relates to NVQ Number 3078 (LMC)</p> <p>Links to LMC A1.1</p> <ul style="list-style-type: none"> • Manage and develop self - interpersonal skills (including clear, confident communication) <p>Links with LMC E1 effective communication that promotes positive outcomes for people</p> <ul style="list-style-type: none"> • E1.1 Manage effective communication 	<p>Associated IT skills</p> <p>Keyboard skills</p> <p>Creating and printing a document</p> <p>Laying out a letter (using Template if wished)</p> <p>Simple emailing</p> <p>Advanced email: creating and sending an attachment</p>	<p>Task 2h – Send an email to a colleague with a file attachment* containing documents relevant to your job role or organisation.</p> <p><i>*NB for the purposes of WVLLN Skills Module 1, this attachment can be an ordinary Word™ document.</i></p> <p>See Module 3, for attaching a zip file</p>

MODULE 1 – Communicating in Person and Writing

TUTOR NOTES

- **Interpersonal skills:** relating to colleagues, service-users and management

Ask group-members to chat to each other briefly in pairs or threes, and to think of someone who they think is a good communicator - and why. (This could be someone from television, or a colleague or someone in the workplace, a friend or family member, a celebrity etc.) Ask everyone to introduce somebody else by name and role, and also describing the person they have chosen and why.

- **Presenting yourself professionally**

Role play – Scenario 1. Either in pairs or if someone is brave enough to volunteer in front of the group, have the tutor and the volunteer act out the scene between Natalya and the stranger (who is in fact an inspector). Encourage the participants to think how they would react in this situation, appropriate questions to ask, and who they would contact.

- **Passing on information - the five Ws (and an H)**

For discussion – see attached handout. Use Scenario 1, or one of the other Scenarios, to start a discussion on the ‘Communication WWWs’. Encourage participants to practice communicating the essential details from a situation of their own.

- **Message-taking, reporting, letter-writing**

See Scenarios 2 and 3. Individual Activity 1. Assignment 1

MODULE 1 HANDOUT – Communicating Clearly: Five Ws (and an H)

In newspaper journalism, the news changes all the time. A front-page story might get replaced with a newer one, just minutes before the newspaper goes to print. News journalists are trained to write articles so that all the key information is at the beginning of the story. Then if it has to be shortened to fit in a more important piece, none of the vital facts are lost.

The same principles apply to any situation where it is important to communicate information clearly.

What examples can you think of from your workplace? Who do you regularly have to communicate with, and who has to communicate with you?

	Communicating in a Crisis	Routine Communication between Colleagues
• What	What happened? What needs to happen now?	What's happening – what's the situation? What information is needed, in how much detail?
• Why	Why did it happen? Why is this situation urgent?	Why is it important? Has this been made clear?
• Who	Who is involved? Who needs to be involved, or told?	Who needs to know? Is everybody who needs to be, in the communication loop?
• When	When did it happen?	When should this information be communicated? Is there a deadline? Is the situation time-sensitive?
• Where	Where did it happen – have all the right people been called to the scene?	Where does this information need to go?
• How	How should this situation be handled?	How should this information be communicated?

MODULE 1 – SCENARIO 1

The Unscheduled Inspection

A Care-home inspection is due at Manor Park. Natalya happens to be crossing the hall with a pile of clean bed linen when a middle-aged, smartly-dressed visitor comes through the street door and looks around the hall, uncertain where to go. It is not clear whether the visitor is a relative, a doctor or some other health professional, or somebody coming in with some entirely different purpose.

- What should Natalya do, in this situation?
- If Natalya needs to leave a message for her manager who is not in, what should she put in the message?

Role Play Prompts: Who might the visitor be? Who else? What's the most professional way of greeting them, and finding out what they want? What things would you want to be sure of, if they said they were a visitor? What is your employer's policy about visiting, or unknown people on the premises? Who should be notified?

If it's an inspector making an unscheduled inspection visit, what sort of things might they be looking for? Who will they want to see?

MODULE 1 – SCENARIO 2

The Distressed Visitor

Simon Feltham has an unexpected visitor at the hospice on a day when he is very tired, and can't cope with company for very long. By the end of the visit Simon is too exhausted to say goodbye. His visitor is very distressed. What should Marcus do or say?

Discussion Prompts: What do the group think Marcus should do? (Talk to visitor and reassure, but not too much information. Explain a bit about support services the hospice offers. Arrange another visit? Anything else?) What personal qualities and communication skills would be helpful here?

MODULE 1 – INDIVIDUAL ACTIVITY

A Letter of Thanks

<p>(a) Letter of thanks from the staff</p> <p>An elderly resident, Michael Mills, has died. His family has sent a box of chocolates and a card to thank all the staff at the Care Home. The card is signed 'from Susan and Andrew Mills, and all of Michael Mills's family'. The address on the card is 4 Box Street, Winton, SH4 3PX</p> <p>Please write a letter on behalf of all the care-workers, thanking the family for their gift and also offering your condolences.</p> <p>Circulate a copy to your colleagues and managers by email.</p>	<p>and / or</p> <p>(b) Letter of thanks, on behalf of a resident</p> <p>Mrs Dilys Jones, a resident whose sight is poor, has received a gift of flowers from a former neighbour, Mrs Carol Morrison, on her birthday. She has asked for help in writing a note of thanks. Carol Morrison's address is 14 Lime Avenue, Winsbury, SH17 9AU</p> <p>Please write the letter for Dilys Jones to sign.</p>
<p>Activity Prompts: Address and Postcode. Date. Neat layout. Sender's name, position and contact details. Legible signature</p>	

MODULE 1 – ASSIGNMENT

Do as many of the following tasks as are appropriate to your workplace:

a) Look at your organisation's standard form for recording **Care Notes**. Write some notes on what information the Care Notes ask for, and why you think it is important to capture that information. What are the important things to think about when leaving a Care Record?

Type and save as a Word™ document, if you are doing the IT modules.

b) In consultation with your employer, write a **simple letter connected with your role**, or on behalf of a service-user.

c) If your organisation uses email, practice sending a **business email**, attaching the letter you have written.

Ask for your employer's feedback on these tasks.

<p>MODULE 2</p> <p>Reporting & Recording</p>		<p>MODULE 2</p> <p>ITQ Tasks and Evidence</p>
<ul style="list-style-type: none"> • Confidentiality • Data-protection • Recording skills (facts versus opinion) • Report-writing skills (using evidence) • Information gathering 	<p>Associated paperwork</p> <p>Keyworker and patient care records</p> <p>Weekly Care Checklist</p> <p>Staff Rota</p> <p>Continue with Learning Journal</p>	<p>Spreadsheet L2</p> <p>Task 1 – Create a simple spreadsheet that will record an aspect of work that includes numerical data e.g. ordinary shifts and overtime hours worked by staff over a 3 month period</p> <p>Task 2 – Create a simple spreadsheet that lists all shift staff alphabetically, hours they work per week, whether they are part-time or full-time role, and whether they are available for overtime if required.</p>
<p>Relates to NVQ</p> <p>links with: LMC E1</p> <p>E1.3, Manage recording and reporting systems/ procedures and use effectively</p> <p>E1.2, Ensure information systems support delivery of positive outcomes</p> <p>LMC B3 (411), deal effectively with transitions and significant life events</p>	<p>Associated IT skills</p> <p>Wordprocessing: creating a folder</p> <p>Simple report writing</p> <p>Spreadsheet</p> <p>Writing a letter - House style</p> <p>Mail Merging</p>	<p>Word L2 - Task 2 (Part 2) – Create a letter that can be mail merged to all the staff-members on the rota, advising them of the changes in the rota to accommodate the new weekly staff meeting.</p>

MODULE 2 – Reporting & Recording

TUTOR NOTES

- **Confidentiality and Data-protection**

See MODULE 2 HANDOUT – PERSONAL DATA PROTECTION. Why is data-protection so important? What do you feel about strangers having access to information about you? Use Module 2, Scenario 2 as a Role Play

- **Recording skills (facts versus opinion)**

See Module 2, SCENARIO 1 (The illegible care report). What are the problems here? (poor communication, lack of clarity – what does ‘OK’ mean? – was Mrs Atkins given some medication that hasn’t been written in the notes, or is she mis-remembering?) Emphasise need for factual information over opinions, in recording and reporting.

- **Report-writing skills (using evidence)**

You won’t always have the chance to explain what you want to say to a colleague or manager face to face. When you have to leave a message or write a report, how well and clearly you can communicate can affect the care someone receives.

If your organisation uses a structured Care Plan system (such as the Care Programme Approach (CPA) framework), you may have been trained to fill these out in a certain way, so that all the necessary information is there on which to base decisions, for instance, about Care Plan changes. But even if you are just leaving a quick note for a colleague who is taking over your shift, remember to think about the Five Ws and check that you have given all the important facts.

If you are leaving a short note for someone, give EXAMPLES (= EVIDENCE) of what you are talking about. “Simon seemed very tired today, he fell asleep while his visitors were here”, or “Mrs Atkins was confused, and kept talking about her son as if he was still living”.

- **Information gathering – see MODULE 2, INDIVIDUAL TASK**

MODULE 2 HANDOUT – PERSONAL DATA PROTECTION

Care providers' responsibility to their service users

The Data Protection Act gives individuals **the right to know what information is held about them**. It provides a framework to ensure that **personal information is handled properly**.

Anyone who processes personal information, whether they are an individual or a professional organisation, must comply with eight principles. They must make sure that personal information is:

1. **Fairly and lawfully processed**
2. **Processed for limited purposes**
3. **Adequate, relevant and not excessive**
4. **Accurate and up to date**
5. **Not kept for longer than is necessary**
6. **Processed in line with your rights**
7. **Secure**
8. **Not transferred to other countries without adequate protection**

The Data Protection Act also gives individuals the right to find out what personal information about them is held on computer or on most paper records.

The six **Caldicott Principles** clarify how the Data Protection principles should be applied:

1. **Justify** the purpose for which the information is needed.
2. Only use personally identifiable information **when absolutely necessary**.
3. Use the **minimum personal identifiable information possible** - if possible use an identifier number rather than a name.
4. Access to the information should be on a **strict need to know** basis.
5. Everyone should be aware of his/her responsibilities to **respect clients' confidentiality**.
6. **Understand and comply with the law**. The most relevant legislation is the Data Protection Act 1998, the Police & Criminal Evidence Act 1984 and the Human Rights Act 1998.

MODULE 2 – SCENARIO 1

The illegible care report

A care worker has left a report on Mrs Atkins saying she is 'OK, slept fine'. There is something else in the report about medication, but the writing is very hard to read. This person will not be back on shift for two days.

Mrs Atkins says she woke in the night and asked for something to help her sleep, as she was feeling restless.

Discussion Prompts – What issues does this raise? Why does this matter?

What do you think should happen? How would you deal with this? What is your employer's policy about care notes?

What do you think the care notes for Mrs Atkins on this occasion should have included?

MODULE 2 – SCENARIO 2

Patient confidentiality

Old friends of Simon Feltham, who haven't visited him at the hospice before, ask Janice Baker for a private word as they are leaving. They say that they haven't seen Simon for a long time and they are shocked at how much weight he has lost, and how tired he seems. They want to know what medication he is taking and if it is making him sleepy, and they ask whether any improvement is expected.

Role Play Prompts: Confidentiality – data protection – professional behaviour

What is in the Care Plan, regarding information / instructions?

What are your organisation's policies on giving out information to friends and family?

MODULE 2 – SCENARIO 3

Reorganising the shift rota

At the Clare Centre hospice, the Care Services manager, Janice Baker, is introducing a new weekly team-meeting. Janice has asked Marcus to reorganise the care-shifts for himself and his co-workers in order to accommodate a meeting every week.

What would be the best time of day / week to hold the meeting – what do you need to take into account?

How should Marcus collect and organise the information he needs?

What's the best way of communicating with other members of the team?

Discussion Prompts:

Introducing the new meeting mustn't be allowed to have a negative impact on the service-users. What's the fairest way of making sure there is enough cover, while enabling as many people as possible to come to the meeting? Are there overtime implications here, what's Janice's view on this?

Who else should come to the meeting – other colleagues such as Valerie (Head of Counselling), or her assistant Sue? Who would cover phones etc?

Does Marcus see all his team-mates face to face often enough to collect this information in good time, or what other ways could he contact them to ask about their hours? By letter? Email?

MODULE 2 – INDIVIDUAL ACTIVITY

Updating Care notes for Doctor's visit

Mrs Atkins is complaining of chest pains and seems confused. For the last couple of days she has had very little appetite, and today she is refusing to eat anything. The doctor is coming in to see her. What sort of information might the doctor need to know about the past few hours and days?

How should this information be presented to the doctor? If you were writing it down, how would you organise it?

Activity Prompts:

Facts versus opinions. Time-based evidence: when was the last time Mrs Atkins ate, what was it, medication etc. What have you observed, and have any of your colleagues left useful notes you could incorporate?

MODULE 2 – ASSIGNMENT

Read through the handout on Personal Data Protection.

For each of the eight principles of Data Protection, try think of a reason why this principle is important, and a situation where this might apply

- a) in your working environment
- b) in your personal life

If you can, think of reasons why the Caldicott principles were developed to clarify the original eight principles, and situations where they might particularly apply (in working or private life).

MODULE 3 Team Skills		MODULE 3 ITQ Tasks and Evidence
<ul style="list-style-type: none"> • Teamworking and team relationships • Other professional relationships – who are the ‘Customers’? • Consulting, planning and managing a transition • Meeting protocols – notification, agenda-setting, meeting management, minute-taking 	Associated paperwork Meeting notification Agenda template Minutes template, including Action notes Continue with Learning Journal	Email L2 Task 1 – Send an email detailing important information* to a group list of colleagues that you have set up in your address book. Send the email - blind cc - with high priority - and add a signature. *Eg, meeting notification with agenda attached. Task 2h – Send an email to an external colleague or contact with a ZIP-file attachment containing the Meeting Agenda and a separate document with directions to the meeting venue.
	Associated IT skills Emailing: sending to a list; blind cc (confidentiality) Agenda template Minutes template Create and manipulate a simple table in Word™	
Relates to NVQ LMC D1, lead and manage work with networks / communities/ other professionals and organisations links LMC D3, lead and manage inter-professional teams		

MODULE 3 – Team Skills

TUTOR NOTES

- **Teamworking and team relationships**

What are the things that make a team work well together? What is especially important when people are working in shifts and may not see each other face to face very often? (Prompts: clear communication; a clear sense of direction - people know exactly what they need to be doing; a spirit of co-operation; continuity; good record-keeping etc). What do you rely on other team members for? Under what circumstances might you feel let down by another team member? (Prompts: poor punctuality, mistakes, incomplete records, someone not doing their share of the work, or not doing their work properly.)

- **Other professional relationships – who are the ‘Customers’?**

An organisation should work as a larger team, and there will be many outside relationships too, all contributing to the organisation meeting its goals. Quality standards in the provision of care services focus on putting the needs of the service user first. But inside organisations there are a number of ‘customers’ as well as the service user – who are your other customers, and whose customer are you? What ‘services’ do you and your colleagues provide to each other? What happens to the relationship, when those services are not provided efficiently, or are delivered with a bad attitude?

- **Consulting, planning and managing a transition – see Prompts for MODULE 3, SCENARIO 1**

- **Meeting protocols – notification, agenda-setting, meeting management, minute-taking**

Meetings can be an efficient way of consulting, making decisions and communicating new information. What are the things that make a meeting run smoothly – or not? (**Prompts:** everyone knows the time and the place. There is somewhere to park. Everyone has received an agenda and directions if they need them, in advance. The meeting starts on time, and finishes on time. The points on the Agenda are covered, and the meeting doesn’t go off-topic. Someone has taken notes (Minutes). Actions are agreed upon, along with who is going to carry them out, by when – and, somebody follows up if the actions are not carried out.) What might disrupt a meeting, or prevent it from running smoothly?

MODULE 3 – SCENARIO 1

Reviewing the Care Plan

At Manor Park, Lynn has been asked to review Mrs Atkins' Care Plan. Sarah Simmons, her manager, has asked Lynn to consult her colleagues in the care-team and recommend the changes people think should be made.

How should Lynn set about finding out what everybody thinks?

What are the different ways in which changes to the Care Plan should be communicated to different people, once they have been agreed? Who needs to be involved?

Discussion Prompts:

Why would a care plan get reviewed – what changes might have been observed? (Review 'recording' from last session)

How should Lynn start this process off – what different ways might she use to communicate, and who should she involve? (Colleagues, but also CPN? Social Services? Consultant?)

Why is this process important? (Include discussion of 'accountability', communicating with different groups in different 'languages' – factual for professional colleagues, more empathic for the service-user and their family).

At what stage would you expect to tell the different groups about the proposed changes?

MODULE 3 – INDIVIDUAL ACTIVITY

Organising the weekly team meeting

At the Clare Centre hospice, the Care Services manager, Janice Baker, is introducing a new weekly team-meeting.

At the hospice, Marcus has been asked by the Care Services manager, Janice Baker, to reorganise the care-shifts for himself and his co-workers in order to accommodate a new weekly team-meeting.

He has also been asked to come up with any subjects that the care-workers might want to raise with Janice, at the first meeting.

- **What sort of things might be on that list?**
- **What might the Agenda for the first meeting look like?**

Activity prompts:

What would be the best time of day / week to hold the meeting – what do you need to take into account?

What's the best way of communicating with other members of the team? Paper? Email? Face to face? How can Marcus organise himself to get the information he needs?

How long should you need – have you been realistic about giving enough time to talk about the different things on the agenda?

What else will Marcus need to stay on top of (chasing progress, maybe chasing actions afterwards?) Where will the meeting be held, what time will it finish, do people know that? (Check / remind)

MODULE 3 – ASSIGNMENT

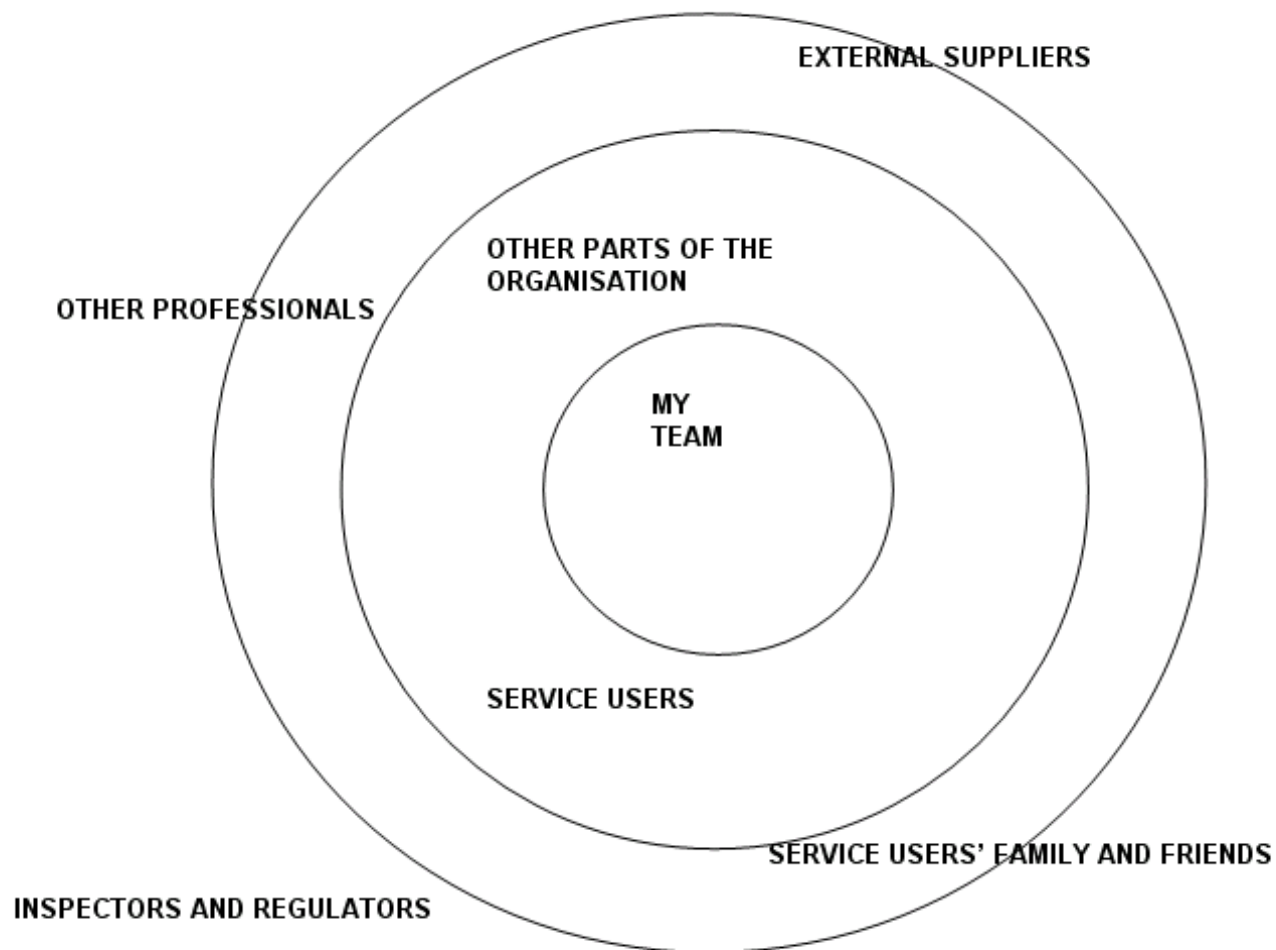
Team Skills

Write in the middle circle the names of your team - members and managers. In the outer circles list some of the other professionals /communities / organisations / networks that you have contact with through your workplace.

How many of them are your 'customers' – how many of them rely on something you provide?

And how many of them are you, yourself, a 'customer' of, because you rely on a service they provide to you or your team?

Discuss this 'map' of your professional relationships with your employer. Are there any significant ones you didn't think of?



MODULE 3 – IT Assignment (if following ITQ)

a) Find your organisation's House Style for a Meeting Agenda (or, if installed on your computer, make use of the **standard templates in Word™**), to set up a **Meeting Agenda**, based on the Individual Activity for Module 3.

Alternatively, create a real agenda, for a meeting you are going to attend at work.

b) If you get the chance, take notes at a meeting you attend.

Using either your House Style (or, if installed, a simple Report Template in Word™) to create a set of simple Meeting Notes and Action Points, plus the date of the next meeting.

Alternatively, make up some 'outcomes and actions' from the Agenda you created for the Individual Activity.

Ask your employer for feedback.

MODULE 4		MODULE 4
Rights & Responsibilities		ITQ Tasks and Evidence
<ul style="list-style-type: none"> • The importance of values • Your rights and responsibilities as an employee • Service user-awareness and rights • Introduction to the regulatory framework 	<p>Associated paperwork</p> <p>Research skills (e.g. checking CQC website, relevant legislation)</p> <p>Continue with Learning Journal</p>	<p>Presentations L2 You need to produce two power point presentations for this unit</p> <ul style="list-style-type: none"> • one on Equal Opportunities • one on the Social Care Regulatory Framework (See Assignment 4) <p>They should be about 10 slides long and should include an organisational house style, objects from other software e.g. a spreadsheet chart or pictures and should include animation and speaker notes.</p> <p>One of your presentations must also be saved as a slideshow as well as a presentation.</p>
<p>Relates to NVQ</p> <p>links B1 = respect, protect and promote the rights and responsibilities of people</p> <p>B1.1, regulatory framework B1.2, promote rights and responsibilities, (includes anti-discrimination/equality & diversity) B1.3, protect from harm and abuse</p> <p>A1, C1 and D1 require learner to apply principles outlined in B1</p>		

MODULE 4 – Rights & Responsibilities

TUTOR NOTES

- **The importance of values**

What are values? Why is it important for organisations, as well as individuals, to know what their values are? Sometimes, the rights of the individual need to be balanced against policy considerations. Try role playing Scenarios 1a and 1b, in threes or pairs.

- **My rights and responsibilities as an employee**

Your basic rights and responsibilities as an employee will be contained in your contract of employment and your job description. What other rights do you have, in law? See Handout, Equal Opportunities and Human Rights.

To conform to the General Social Care Council's Code for Social Care Employers, your organisation should have written procedures covering Equal Opportunities and Staff Training and policies to deal with dangerous, discriminatory or exploitative situations (See MODULE 4 HANDOUT (B) – National Minimum Standards and Code of Practice). Why is it important to have these written policies and procedures?

- **Service user-awareness and rights**

The GSCC's Codes of Practice for Social Care Workers and Employers set out the care industry's responsibilities in relation to the service users and carers. The Care Quality Commission (CQC) takes this Code of Practice into account when enforcing care standards. Are you aware of these Codes of Practice, or your organisation's Complaints Procedure?

The National Minimum Standards published by the Department of Health for Care Homes establish a series of conditions that service-users have a right to expect – see MODULE 4 HANDOUT (B). Why is it important to have these external standards published?

- **Introduction to the regulatory framework** – See Handout, National Minimum Standards and Code of Practice

MODULE 4 HANDOUT (A) – Equal Opportunities and Human Rights

SUMMARY OF THE HUMAN RIGHTS ACT (HRA) 2000:

- 1 **The right to life**
- 2 **Freedom from torture and degrading treatment**
- 3 **Freedom from slavery, or compulsory labour**
- 4 **The right to liberty**
- 5 **The right to a fair trial**
- 6 **The right to respect for privacy and family life**
- 7 **Freedom of thought, conscience, and religion**
- 8 **Freedom of expression**
- 9 **Freedom of assembly**
- 10 **The right to marry**
- 11 **The right not to be discriminated against, in respect of these rights and freedoms**
- 12 **The right to own property**
- 13 **The right to an education**
- 14 **The right to free elections**

EQUAL OPPORTUNITIES

It is unlawful in England to discriminate against a person in the area of employment, or in the provision of goods, facilities or services, on the grounds of:

- **race**

- **sex or marital status** (a man and a woman working for the same employer should receive the same pay if they are doing similar work)

- **disability**

Age discrimination laws ensure that someone is not denied a job, training or a promotion because of their age.

It is against the law for an employer to discriminate against someone because of their **religion or belief**.

MODULE 4 HANDOUT (B) – National Minimum Standards and Code of Practice

The **Care Quality Commission** is the new independent regulator of health and social care in England. It took over from CSCI, the Commission for Social Care Inspection, in 2009. It is the regulator of all health and adult social care services in England.

The **National Minimum Standards** published by the Department of Health for Care Homes establish a series of conditions that service-users have a right to expect.

Your organisation may have its own Code of Practice based on the **General Social Care Council (GSCC)’s Codes of Practice for Social Care Workers and their Employers**.

These are lists of statements that describe the standards of professional conduct and practice required in social care.

Under the Care Standards Act 2000, the GSCC is required to produce these codes and to keep them under review.

Under the GSCC Code of Practice, Social Care Employers must:

Social Care Workers must:

1. Make sure people are suitable to enter the workforce
 2. Have written policies and procedures
 3. Provide training and development opportunities for social care workers
 4. Have policies and procedures to deal with dangerous, discriminatory or exploitative behaviour
 5. Promote the GSCC’s codes of practice
- Source: www.gsc.org.uk

1. Protect the rights of service users and carers;
2. Strive to maintain the trust and confidence of service users and carers;
3. Promote the independence of service users while protecting them from danger or harm;
4. Respect the rights of service users whilst seeking to ensure that their behaviour does not harm themselves or others;
5. Uphold public trust and confidence in social care services;
6. Be accountable for the quality of their work and take responsibility for maintaining and improving their skills.

MODULE 4 – SCENARIO 1

Two sides of the story

a) A complaint by a colleague

Janice has had a complaint from another colleague at the hospice that Marcus left a service-user on their own with medication out on a day-table. Janice knows that Marcus is normally conscientious. She needs to talk to Marcus about it.

When and how do you suggest she addresses this?

Role Play Prompts: giving constructive criticism – still needs to be FAST (Focused, Accurate, Specific, Timely). What happened: how could it happen better, another time?

Aiming for a 'no-blame' culture: objective is to create reflective practitioners, who are thinking about the big picture, not just covering their backs. What policies are involved here – how (far) does this fall short of Codes of Practice? What constitutes an emergency? Was this one?

b) What might have been done differently?

Marcus explains to Janice that he went to the assistance of a colleague who was trying to prevent a patient from falling. A colleague came into the room in his brief absence, and found medication open on the day-table, and reported it. Marcus feels criticised for something that he thinks wasn't his fault.

How would you advise him to deal with this? What are his options? How should he and Janice resolve this and move on?

Role Play Prompts: How could Marcus have handled things differently? How serious an issue is this? Could Marcus have delegated? Prioritised differently? Could Janice and Marcus agree on what might have been done differently? Does policy need to be made clear to other workers, too, without scapegoating Marcus?

MODULE 4 – INDIVIDUAL ACTIVITY

A complaint by the family

Mrs Atkins awoke confused in the night, and tried to get out of bed on her own, although normally she always has assistance with this. She trips on the hem of her nightgown and falls. She is not injured but has to be helped back to bed. In the morning her arm and knee are quite bruised. Her family, when they are informed, ask about the Complaints Procedure.

What should happen here?

Discussion Prompts: How should this incident be reported? (Refer back to good recording practice). What should happen as a matter of routine? What are the policies, and how are the care workers kept aware of them?

What are the family's rights here? What support should they be given? Who should be involved?

Do you know your organisation's complaints procedure well enough to talk the family through it?

MODULE 4 – ASSIGNMENT

1. Obtain copies of the **General Social Care Council (GSCC)’s Codes of Practice for Social Care Workers and for Social Care Employers**. (You can download these from the website, www.gsccl.org.uk, or look up the phone number and ask for them to be sent to you in hard copy.)

Read the detail of both codes (points 1-5 in the Employers’ section, points 1-6 in the Social Care Workers’ section). Make a note of anything that you didn’t know, about your rights or responsibilities.

2. List the various organisations that make up the Social Care regulatory environment. If you can access the internet, visit their websites and find out what they are for, and which ones have rights of enforcement. What penalties are there, for not conforming to the Codes of Conduct?

Talk this through with your employer.

3. If you are doing the ITQ component, you could write up this exercise for your Module 6 ITQ Assignment.

<p>MODULE 5</p> <p>Supervision, Feedback and Appraisal</p>		<p>MODULE 5</p> <p>ITQ Tasks and Evidence</p>
<ul style="list-style-type: none"> • Accountability • Supervision and feedback • SMART target-setting • Mentoring • Appraisal and Performance Review 	<p>Associated paperwork</p> <p>Review notes</p> <p>Appraisal checklist</p> <p>Continue with Learning Journal</p>	<p>Word L2</p> <p>Task 1 – Using a table, create a form template that can be amended as necessary for future use. The form should be for recording staff or client information, or some other important aspect of your job role.</p> <p>Suggestion: create a simple Staff Appraisal form, with a list of criteria against which the staff-member should be assessed, and a simple scoring system. Include space for the person’s name and role, the name of the person carrying out the assessment, and the period covered by the assessment.</p> <p>Save a completed (filled in) example of the form as well as the blank template.</p>
	<p>Associated IT skills</p> <p>Using tables</p> <p>Creating forms; version control</p>	
<p>Relates to NVQ</p> <p>covers A1.2, managing / develop workers through supervision / performance review</p> <p>links to LMC E2, implement systems that measure performance</p>		

Module 5 – Supervision, Feedback and Appraisal

TUTOR NOTES

- **Accountability**

What is accountability – why is it important? What would happen in an environment where no-one felt accountable? In your working environment, who is accountable to whom? (Prompt: everybody! Accountability as a multi-way relationship – management has responsibilities to staff, service-users, regulators; staff have a similar set of responsibilities to each other, the service users, management). Review the ‘who is my customer, whose customer am I’ conversation, from Module 3

- **Supervision and feedback**

How is the role of supervisor different from the role of colleague? What are a supervisor’s responsibilities? What would be the challenges of being promoted to Supervisor? What does someone who is being supervised have a right to expect? (Constructive Feedback and Development – try role playing Scenario 1). What does management expect from its supervisors?

- **SMART target-setting** – see Module 5 Handout.

- **Mentoring**

What is mentoring? How is it different from ‘managing’? What are the advantages of the mentor relationship? (Prompts – from the perspective of the person being mentored, the benefit of the experience and insight of someone else who isn’t your manager. From the perspective of the person doing the mentoring – the opportunity to practice observation and constructive feedback skills, as part of personal development; also to realise how much you know! Role play - the three parts of Scenario 2 in pairs or threes, and debrief in the group.

- **Appraisal and Performance Review**

What is the purpose of this process? Prompt – to give staff clear targets for development; to acknowledge and reward good performance and the acquisition of new skills, based on good evidence. On what should an Appraisals and Performance Review be based? (Prompt: job description, code of conduct and personal development plan, previously agreed with manager)

MODULE 5 HANDOUT

SMART OBJECTIVES

There is no point in setting objectives for something to happen, or to develop your own skills, unless you also have some way of measuring your progress – both from your own perspective and also from an independent viewpoint.

A common way of measuring performance for an individual or an organisation is to set ‘SMART’ targets: targets that are Specific, Measurable, Agreed, Realistic and Timed.

S	Specific	Goals that are too general need to be broken down into specific ones
M	Measurable	How will you know you have achieved it? What evidence will there be? What will success look like?
A	Agreed	If you are setting targets within a work situation, you need to be sure you and the person who is working with you are both clear on what has been agreed.
R	Realistic	Are the targets realistic, given the time and resources available?
T	Timed	When do you hope to have achieved this by?

MODULE 5 – SCENARIO 1

Choosing when and how to give feedback

Patricia is a 62-year-old woman who has just been diagnosed with lung cancer. She and her husband were both very shocked to receive the news. They were given the Clare Centre Hospice's telephone number for more information. They call at 3.15pm on Friday, wanting to make an appointment for counselling, just as Sue is leaving to collect her children from school.

Valerie overhears the conversation. In her opinion, Sue is not as helpful or considerate on the phone as Valerie would have liked. How and when should Valerie raise this with Sue?

Role Play Prompts:

Timing – not while Sue is rushing to get the kids from school! What other issues might be taken into account? (Sue's inexperience – possibly her own anxiety and distress, caused by hearing Patricia's). What policy issues might be raised here? How can this be turned into a development opportunity for Sue? (SMART targets)

MODULE 5 – SCENARIO 2

The Mentoring relationship

a) Setting up a mentoring relationship

To prepare Natalya for possible promotion at Manor Park, Sarah Simmons asks Lynn to mentor Natalya for the next two months. How should Lynn and Natalya's first conversation about this go?

Role Play Prompts: agreements on either side – what the relationship is and isn't (i.e., the difference between mentoring and management). Confidentiality, targets, timeframe. What does Natalya see as her strengths / weaknesses? Helping her to identify areas to work on

b) Dealing with difficult issues

Lynn knows that Natalya is sometimes a bit late arriving on shift. Before she was mentoring her, she didn't think it was any of her business to say anything. She is anxious about criticising Natalya. What would be a good way of setting up a feedback session? How should she communicate to Natalya that she thinks punctuality is important, and why?

c) Receiving negative feedback

Lynn has a few words with Natalya about being on time for work. What do you think Natalya's feelings and reactions are? How would you react if you were Natalya? In Natalya's position, how would you prefer Lynn to approach a subject like this?

Role Play Prompts: Does Lynn manage to give FAST feedback – Focused, Accurately evidenced, Specific about what should have happened differently, and at a Time and in a place when Natalya could concentrate? Does she manage to point out a couple of things that Natalya regularly does well, too ('praise sandwich'), so that Natalya doesn't feel 'got at'?

What are Natalya's responsibilities here? E.g. time-management / time awareness (would have been mentioned before). Taking responsibility. Also, did Lynn give Natalya a chance to explain in case there had been a particular reason for her lateness?

MODULE 5 – INDIVIDUAL ACTIVITY

Assessment for Promotion

A senior care-worker, who was Alice Atkins' Key Worker, is leaving. Sarah Simmons is assessing Natalya for possible promotion to Keyworker status.

If Natalya is promoted, she will be in charge of simple shopping trips and outings such as accompanying Alice to the Cemetery where her son is buried. Natalya would need to be aware of important dates such as Alice's birthday (and Alice's husband, Ron's), Alice's preference for trips to the park etc.

What sort of skills will Sarah be looking for, to demonstrate that Natalya could do the job well?

Activity Prompts:

Job description. Code of Conduct. Communication Skills. Team skills. And...?

MODULE 5 – ASSIGNMENT

1 a) If your manager agrees, design and conduct a **‘reverse appraisal’**. You might want to cover some of the areas listed below, or others from your own experience. Assess your manager, **giving accurate evidence** over the ‘appraisal period’ you are covering. **Practice giving feedback**. Discuss the experience with your manager afterwards!

1 b) If this is not possible in your job role, look at the list below and **identify 3 – 5 things that you think you would find most challenging**, if you were in a management role. How might you develop your strengths in these areas? **Set yourself some SMART targets**, including what actions you would like to take. Talk these through with your employer.

2. If you are doing the ITQ component, base your Module 5 IT Task on this exercise.

Areas you might want to consider including in your **‘reverse performance appraisal’**:

<p>Quality of work Is thorough and accurate (requires same from others)</p> <p>Initiative Takes action to improve department</p> <p>Availability Is there when you need them</p> <p>Planning Lets you know how/where department is going</p> <p>Delegation skills Gives clear instructions</p>	<p>Relationship with employees Mutual respect and regard</p> <p>Decision making Has, or gets, answers; does not procrastinate</p> <p>Communication skills Speaks/writes clearly and directly</p> <p>Promptness Starts meetings, appointments, etc., on time</p> <p>Time management Completes work efficiently</p>	<p>Leadership skills Encourages dedication and loyalty</p> <p>Approachability Is open and attentive to your concerns</p> <p>Training/development Helps with your career growth</p> <p>Creativity/problem solving Has good ideas and solutions</p> <p>Fairness Does not have favourites</p>
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<h2>MODULE 6</h2> <h3>Continuous Improvement</h3>		<h2>MODULE 6</h2> <h3>ITQ Tasks and Evidence</h3>
<ul style="list-style-type: none"> • Managing and developing yourself • Identifying ‘Positive Outcomes’ – (e.g. ‘enjoy, achieve, make a positive contribution’) • Managing for ‘positive outcomes’ • Risk assessment and S.W.O.T. • Project management 	<p>Associated paperwork</p> <p>Formal proposal and report-writing</p> <p>Continue with Learning Journal</p>	<p>Internet & Intranet L2</p> <p>Task 1</p> <ul style="list-style-type: none"> • Create a report in Word™ on how you have researched a topic relevant to your job or organisation using the internet. • Use different search engines to find the information and bookmark your results or save to favourites. • Email some information from the browser to a colleague. <p><i>Suggestion: you could use the written Assignment for Module 4 as the basis for this Task</i></p> <p>Task 2b</p> <ul style="list-style-type: none"> • Explain how your computer is connected to the internet. • Create a checklist/report for the use of your organisation on internet security risks, laws and guidelines <p>(For Task 2a, rules of ‘netiquette’, see Module 1)</p>
<p>Relates to NVQ</p> <p>Links to LMC A1, A1.1, manage and develop self. A1.3 lead and manage continuous improvement in the provision</p> <p>Links to LMC C1, systems procedures and practice to manage risk and comply with health and safety</p> <p>Links to LMC B4, support families, carers and others to achieve positive outcomes</p> <p>Also links to : LMC E10, ensure policies etc for conduct of workers is adhered to; E1.2, Ensure information systems support delivery of positive outcomes</p>		

MODULE 6 – Continuous Improvement

TUTOR NOTES

- **Managing and developing yourself**

Who is responsible for your professional development – to what standards? (Prompts: you, and your employer. See the Codes of Practice / National Minimum Standards.)

- **Identifying ‘Positive Outcomes’ – (e.g. ‘enjoy, achieve, make a positive contribution’)**

The Codes of Conduct and National Minimum Standards exist to make sure that Care Standards are high and service users are protected. When these guidelines are met, people’s experience of social care – whether on the giving or receiving end – can be very positive. What are the factors that help to make for these ‘positive outcomes’?

(Prompts: Privacy, Dignity, Respect. Active participation, service users leading independent lives to the extent that they can; an individual plan for each service user based on their health, personal and social care needs)

- **Managing for ‘positive outcomes’**

What happens when service users do not have the capacity to make their own choices? The guidelines are that a number of factors go towards making the service user’s experience of care a positive one. What are the cross-cutting themes that help to ensure a quality team effort even where the service user’s own preferences may be unclear? See Handouts on ‘Positive Outcomes’ and Cross-cutting Themes.

- **Risk assessment**

What is Risk Assessment? When should you use it? (Prompt: when you are planning a new project, or a change in someone’s care arrangements). What should it take into account? (Impact of physical and other factors on anybody involved – not just the service user). Introduce ‘S.W.O.T.’ as a risk-analysis tool: Strengths, Weaknesses, Opportunities, Threats in the proposal?

- **Project management – See Activity 6 and Assignment 6**

MODULE 6 HANDOUT (A)

Positive Outcomes: Privacy, dignity, choice, rights, independence and fulfilment

The 'Modernising Social Services' Report (1998) called for standards that "focus on the key areas that most affect the quality of life experienced by service users, as well as physical standards". These areas include **privacy, dignity, choice, rights, independence and fulfilment**. These values underpin the National Minimum Standards.

A home's philosophy of care must be based on principles which ensure that residents are treated with respect, that their dignity is preserved at all times, and that their right to privacy is always observed.

The test of whether these principles are put into practice or not will be a matter for the individual resident's own judgement:

- how am I treated by staff when they are bathing me and helping me dress?
- how do they speak to me?
- am I consulted in matters to do with my own care and matters that concern residents as a whole?
- are my wishes respected?
- are my views taken into account?
- do staff regard me as a real person with desires, hopes and expectations just like them?

NATIONAL MINIMUM STANDARDS: Standard 10

Outcome: 'Service users feel they are treated with respect, and their right to privacy is upheld'

Standard 10 requires that the arrangements for health and personal care respect the service user's privacy and dignity at all times, and with particular regard to:

- personal care-giving, including nursing, bathing, washing, using the toilet or commode;
- consultation with, and examination by, health and social care professionals;
- consultation with legal and financial advisors;
- maintaining social contacts with relatives and friends;
- entering bedrooms, toilets and bathrooms;
- following death.

Other provisions under Standard 10 allow for easy, private access to a telephone and to receive their mail unopened; for service users to wear their own clothes at all times, and for all staff to use the term of address preferred by the service user.

MODULE 6 HANDOUT (B)

Cross-cutting Themes that inform the whole Social Care experience

The following cross-cutting themes underpin the drafting of the National Minimum Standards for Care Homes for Older People:

- **Focus on service users:** standards that “focus on the key areas that most affect the quality of life experienced by service users, as well as physical standards”. Regulators will look for evidence that the facilities, resources, policies, activities and services of the home lead to positive outcomes for, and the active participation of, service users.
- **Fitness for purpose.** The regulations are designed to ensure that care home managers, staff and premises are ‘fit for their purpose’. Regulators will look for evidence that a care home is successful in achieving its stated aims and objectives.
- **Comprehensiveness.** Life in a care home is made up of a range of services and facilities which may be of greater or lesser importance to different service users. The total service package offered by the care home needs to contribute to the overall personal and health care needs and preferences of service users, and the way in which the home works with other services / professionals to ensure the individual’s inclusion in the community.
- **Meeting assessed needs.** Care homes need to meet the assessed needs of service users, and individuals’ changing needs must continue to be met. The assessment and service user plan carried out in the care home should be based on the care management individual care plan.
- **Quality services.** Regulators will seek evidence of a commitment to continuous improvement, quality services, support, accommodation and facilities which assure a good quality of life and health for service users.
- **Quality workforce.** Competent, well-trained managers and staff are fundamental to achieving good quality care for service users. The National Training Organisation for social care, TOPSS, is developing national occupational standards for care staff, including induction competencies and foundation programmes. In applying the standards, regulators will look for evidence that registered managers and staff achieve TOPSS requirements, and comply with any code of practice published by the General Social Care Council (GCSS).

MODULE 6 – SCENARIO 1

Arranging Respite Care

A week's respite care is being arranged for Patricia at the Clare Centre hospice. Janice, the Care Services manager, is taking Marcus through the necessary arrangements. What sort of things need to be taken into account?

Discussion Prompts: Does Patricia already have a Care Plan? If not, who needs to be involved in the Assessment?

Communicating with Social Services and other professionals. Will Patricia have a Macmillan or Marie Curie nurse? A care programme will need to be worked out for the week. Who else needs to be involved? How can the family and Patricia's husband be involved?

What 'positive outcomes' could be envisaged here, for Patricia and her husband?

MODULE 6 – INDIVIDUAL ACTIVITY

The Care Managers have noticed that, although they try to work things out so that everyone has an even workload, in practice some of the care-workers have a more difficult time with their service-users, while others finish their tasks quickly.

They would like people who may have a lighter workload on one day, to actively look for ways they can support their busier colleagues. They have asked you to contribute your ideas for how this might happen.

How would you introduce this idea to the staff team? Who might you draw on to help here? If you were to carry out a simple risk assessment on this project, what would you take into account? What Strengths, Weaknesses, Opportunities and Threats are there in the project?

Activity Prompts: Issues this situation raises: Managing, delegating. Managing a change of culture. Analysing where problems might arise, and what the advantages would be.

MODULE 6 – ASSIGNMENT

Looking at the Cross-cutting Themes Handout, identify one actual or hypothetical project that you could imagine impacting positively to increase or reinforce the effectiveness of existing procedures in your workplace (some suggestions below).

Using tools from these Modules, write a proposal for a change-project in your workplace that supports 'positive outcomes' in one or more of the areas listed.

Your proposal should include:

- a) A clear description of the project and its benefits
- b) The What, Why, Who, How, When and Where of the project
- c) SMART objectives for it
- d) An analysis of the possible Strengths, Weaknesses, Opportunities and Threats
- e) Your estimate of the time and cost involved
- f) How you think project should be monitored or evaluated

Talk your proposal through with your employer. Have they thought of any angles you missed? Do they think your plan is workable?

Possible areas for you to explore, when selecting your project idea

- active participation of service users – working with other services / professionals to ensure the individual's inclusion in the community.
- meeting the assessed and changing needs of the service users, with a range of services and facilities
- training workers to think in a joined-up way about their personal and role contribution to 'positive outcomes'