Knowledge Organiser – Y10 – OCR HSC RO22

SAINTS PETER AND PAUL CATHOLIC HIGH SCHOOL

Verbal Communication

Verbal or spoken communication can provide others with clues about who you are or how you are feeling

Term	Definition
Tone of voice	Reflects what we are thinking and feeling when we express our words
Clarity	Ensuring that what we are saying is clear and structured in a logical way so that someone can understand
Para verbal	Are feelings and meanings that are expressed to others through the emphasis we put on certain words.
Empathy	Is the ability to understand and share another persons feelings and experiences. This involves using words that show respect

Examples:

Clarity - GP telling a patient about treatment and what to except. Starting with first phases of treatment and double checking that everything makes sense to the service user

Para verbal – A nursery worker emphasising important words when giving instructions to children "The **FIRE POINT** is **NUMBER 36**"

Empathy - a care worker who uses kind word and reassuring words when visiting an individual who has experienced the death of someone.

Non-Verbal Communication

Non- verbal communication also plays a very important part in the information and meanings we convey to others and how we interpret information and messages we receive from others

Term	Definition
Body Language	Using our bodies through movement to communication
Gestures	Using parts of our bodies through movement or positioning to communicate
Facial Expressions	how we use our faces to communicate

Examples:

Body Language - someone who works in a care home could make sure that they smile to their elderly patients when taking part in group activities

Gestures - a social worker nodding their head whilst listening to a service user can indicate that they are listening and interested.

Written Communication

Information/instructions that are written down for a person to follow/understand.

When would they be used in Health and Social Care?

Setting	Example
Health Care Setting	• Practitioners writing a care plan • Medical check (2 year check – Health visitor, Birth Plan – Midwife) • Instructions – (medication, procedure) • Email to family members/service user
Social Care Setting	• Practitioners writing a care plan • Daily report/journal (in a care home/residential home/nursery) • Minutes of a meeting • Email to family members/service user
Early Years Setting	• Daily report/journal (in a care home/residential home/nursery) • End of term report (nursery)

Practitioners must pay particular attention to the following:

- How text is presented, including typeface and font size used – make sure it is clear and easy to read.
- Correct grammar, punctuation and spelling – instil confidence
- The style of writing used – formal/informal will be required for different situations
- The language used – use of current sector terminology and avoiding jargon – so there are no misunderstandings

Factors & Barriers

Factors that positively influence communication, i.e.:

o environmental, i.e.:
- heating and ventilation
- room layout
- lighting
- noise

o interpersonal, i.e.:
- relationships
- personal space
- respecting differences in culture
- body language
- active listening

Barriers to communication, i.e.:

o patronising language, tiredness, inappropriate body language, inappropriate use of language, aggression, and difference in language spoken

o speech difficulties due to disabilities or illness (e.g. dementia, deafness)

o noisy environment, inadequate space, poor lighting, damaged or unsuitable furniture

Ways to overcome barriers, i.e.:

o adapting the environment

o calm tone

o training staff

Personal Qualities

The qualities that contribute to effective care, i.e.:

o patience (e.g. when dealing with an individual in a wheel chair)
o understanding (e.g. by giving clear instructions for an activity at a day care centre so that they are understood)
o empathy (e.g. with an individual's circumstances when breaking bad news in a hospital)
o respect (e.g. an individual's personal religious beliefs about the type of food they can eat in hospital)
o willingness (e.g. to support other individuals)
o sense of humour (e.g. when working with young children in a nursery)
o cheerfulness (e.g. the way a nursery nurse greets the children)

How the qualities contribute to effective care (e.g. empowerment, reassurance, value).

Communicating Effectively

Planning an interaction should consider, i.e.:

o time, i.e.:
- ensuring enough time is set-aside
- that all parties involved are aware of the time and how long it will take

o environmental factors, i.e.:
- away from the noise, in private if necessary, appropriate lighting and space, seating plans (e.g. day care centre seating arrangements)

o activity or topic of conversation, i.e.:
- related to the health, social care or early year setting

o skills to be used, i.e.:
- non-verbal and verbal

o the reasons why practitioners and individuals who use the service need to communicate clearly, i.e.:
- to give, obtain and exchange information to meet the individuals needs

o to ensure the comfort of the individual

o to show value and respect for the individual

How to communicate effectively in a one-to-one and group situation, i.e.:

o by active listening, i.e.:
- concentrate on what is being said, understand conversation, interpret the information, repeat information, respond, encourage others, reflect

o appropriate body language and behaviour, i.e.:
- maintaining eye contact (e.g. when discussing care plan with an individual at a residential home)
- appropriate facial expressions (e.g. when giving bad news in a hospital)

o inappropriate body language and behaviour, i.e.:
- hand gestures/folded arms/finger pointing (e.g. when talking to members of staff at a nursery)
- behaviour which fails to value service users (e.g. making a patient wait for care)

o adapting/using appropriate language, i.e.:
- allowing pauses (e.g. when explaining instructions to a patient)
- tone/pace (e.g. when talking to children at a nursery)
- clarity of information (e.g. appropriate to individuals'

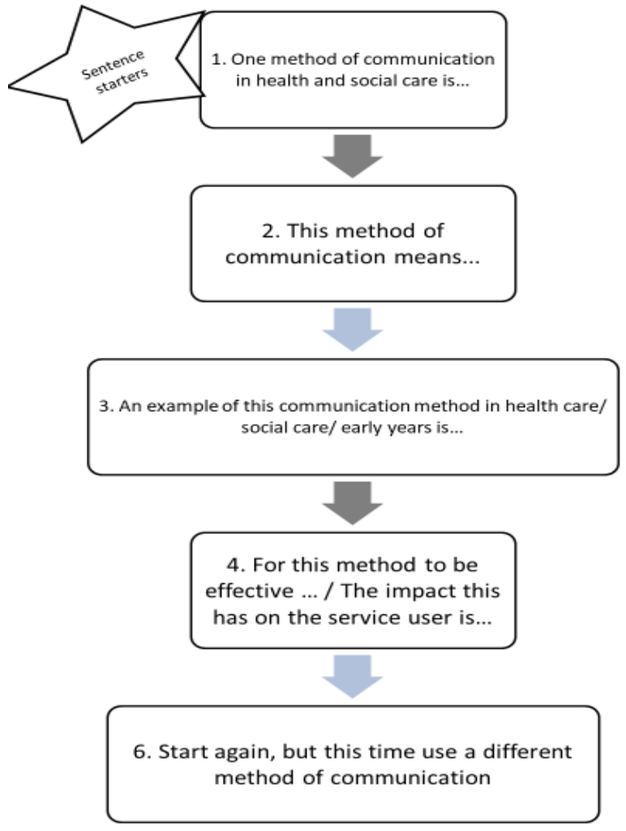
Settings

Health Care Settings

Social Care Settings

Early Years Settings

Structure/Examples



Example of Written Communication

Written Communication is information/instructions that are written down for a person to follow/understand. This can be done in many ways such as letter, email and text.

Written communication is used widely in the Health and Social Care sector. Firstly, in a Health care setting a Physiotherapist would use written communication in the form of writing up the exercises and programme that a service user would complete in order to build up muscle. The therapist would make sure that the information is clear and in a font that is legible for the service user to understand so that they are able to follow the programme.

Key Words

Verbal
Spoken
Communication
Positive
Confidence
Information
Tone of voice
Pace
Speed
Fast
Slow
Feelings
Express
Patients
Practitioners
Listening
Support
Effectively
Empathy
Paraverbal
Emphasis
Non verbal
Gestures
Facial expressions
Body language
Convey
Interpret
Messages
Written care
Care plan
Text
Font
Layout
Professional
Grammar
Jargon
Specialist
Braille
Sign language
Makaton
Advocates
Interpreters
Disability
Communication difficulties
English
Support
Represent

Reading to Explore

You will regularly need to use the internet to explore the different topics we cover in more detail.

To do this effectively, you might need to change the wording in the google search bar. Opening up one website is not enough, you will need to use a variety of websites to give you the detailed explanations required for MB3.

Top Tips

- Make sure you research definitions.
- Make a note of any websites that you use.
- Try to use a variety of settings, don't always use GP for health care.
- Use images to support your work
- Use more that one detailed example to secure your learning