



ST MARY'S
COLLEGE



Unit 2 – Professional practice and the health and social care practitioner

About this Unit:

This unit gives you the opportunity to explore working practice in health and social care and how it is underpinned by the **care values** in order to provide

person-centred care. The **skills, behaviours and attributes** needed by care practitioners and the importance of **working within the boundaries of the law** are considered. You will learn the main **differences between working and personal relationships** and how different health and social care practitioners and agencies work together to meet the **holistic needs** of service users. Different career pathways and how to achieve them by creating a **personal development plan** are also explored.

Key words you should know for this unit:

Start off by reading through these and spending more time looking over the ones you are unsure on.

Task: Each week get someone in your household to choose a different 7 key words to test you on. You need to write down the definition to the key word they give you. Tick it off under the 'Do I know this?' column when you can write the definition (or as close to it as you can) without looking. If you get it wrong, put a * next to it so you know to keep revising that one.

<u>Key word</u>	<u>Definition</u>	<u>Do I know this?</u>
Legislation	'Laws considered collectively'. These help protect people in society	
Standards	'Rules and regulations that set out expected ways of working, professional conduct and practice, for care services and practitioners'.	
Codes of practice/code of conduct	Set of rules that outlines agreed ways of working and provides a clear set of standards that care practitioners are expected to meet.	
Protected characteristics	Refers to nine characteristics of individuals identified by the Equality Act. It is unlawful to discriminate on the basis of a protected characteristic e.g. race, gender, disability, sexuality, age etc.	
Regulations	Rules that are set out in law: it is a legal requirement that these must be followed or the care setting will be breaking the law.	
Direct discrimination	Intentionally putting someone at a disadvantage or treating them unfairly based on their age, gender or race for example.	

Indirect discrimination	When a policy, practice or rule applies to everybody but has a detrimental effect on some people.	
Attributes	A quality or characteristic that someone has e.g. confidence, cheerfulness, trustworthiness etc.	
Behaviour	The way in which someone acts or conducts themselves in response to a situation or person. E.g. co-operatively, calmly etc.	
Skills	Having the ability to do specific tasks well	
Trustworthy	An individual who is known to be honest, truthful and reliable can be described as trustworthy.	
Objectivity	Refers to an absence of bias or prejudice and everything should be based on facts .	
Patience	The ability to wait and accept delays, problems or difficulties without becoming frustrated.	
Respect	Taking account of and having regard for someone's feelings, wishes and rights.	
Empathy	The ability to understand and share the feelings of another or understand another persons way of thinking.	
Commitment	A promise or agreement to do something.	
Initiative	Seeing what needs to be done and getting on with it rather than waiting to be told to do it.	
Professionalism	The ability to carry out a job role in a skilful and knowledgeable way, behaving in a manner that is appropriate and acceptable for that job role.	
Reflective practitioner	Looking back over your work on a regular basis in order to consider and make improvements to your working practices.	
Adhere	To follow instructions or rules exactly as required	
Confidentiality	Limits access or places restrictions on sharing certain types of sensitive information, such as medical records, so that it is kept private and available to only those who need to be aware of it.	
Safeguarding	Actions taken to protect individuals by facilitating a safe and healthy environment	

	and reducing the risks of danger, abuse and harm.	
Boundaries	The limits an individual must work within when carrying out a job role. Their job description indicates the type of work involved.	
CPD	Continuing Professional Development	
Care values	Core principles that underpin the work of those providing health and social care services.	
Duty of care	Legal obligation professionals have to protect individuals who they care and support from danger, harm and abuse.	
Person-centred approach	Focusing care on the needs of the individual. Ensuring that people's needs are met and they can make informed decisions about their care.	
Partnership working	Different professionals, services and agencies working together in order to provide the best carer for an individual.	
Dignity	Care that respects and values the individual's rights and needs.	
Multi-agency	Agencies are organisations who work together to provide care and support in order to meet an individual's needs.	
Multi-disciplinary	A group of health and social care practitioners, each with different roles and responsibilities, working together to meet an individual's needs.	

Revision of work relating to Unit 2 Task 1 (P1, P2, M1 and P4)

Make sure you know:

- Legislation that impacts on practice in care settings
- Regulations that impact on practice in care settings
- The names of health and social care values
- Examples of how practitioners apply the care values in their daily work
- A definition of person-centred practice
- The impact of person-centred practice on an individual's health and wellbeing.

P1 – Legislations

Task: You need to know different legislations and be able to either identify key features of legislations and say which one it is or be able to describe a piece of legislation. Below you will find some key points relating to each of the main legislations you may get asked about in your exam, your task is to write which legislation each one is referring to. Use the box below with all of the legislations in to help you. Start with ones you know and fill in the rest.

Make sure you then read these and can remember at least 3 key points for each legislation.

Equality Act (2010)	General Data Protection Regulation (GDPR)	Human Rights Act (1998)
Health and Social Care Act (2012)	Care Act 2014)	

First legislation:

The _____ is a set of EU-wide data protection rules that have been brought into UK law as the Data Protection Act (2018). This law applies to the processing of data by care organisations and settings. Processing data is the act of obtaining, recording or using an individual's personal information.

The _____ sets out seven key principles:

- Lawfulness, fairness and transparency - this means that people have a right to know and view any information that is being held about them, to know how their information is being used, to have any errors corrected, and to prevent any data being used for advertising or marketing.

- Purpose limitation -- information should only be collected for a specific purpose. Organisations such as the NHS and health and social care settings can hold information about staff and clients for a clear purpose and must only use it for that purpose.
- Data minimisation - data collection should be limited to that which is necessary and relevant to the purpose. This means that organisations and care settings must not collect unnecessary information that is not relevant.
- Accuracy — data found to be inaccurate should be destroyed or corrected. Staff have a responsibility to ensure information they collect and use is correct and up to date.
- Storage limitation — this means that information should be kept for no longer than necessary. Data should be deleted or destroyed when it is no longer needed — for example, staff should securely delete or shred sensitive or personal data.
- Integrity and confidentiality (security) - information must be held and processed securely, so in care settings access should be restricted. For example, non-authorised staff/people should not be allowed to access the information; it should be kept in secure conditions and stored safely, such as in a locked filing cabinet. Electronic records should be password protected to limit access.
- Accountability - care organisations must have appropriate systems and records in place to demonstrate they are complying with the Regulations. They must be able to demonstrate how they gained an individual's consent for processing their information. If there is a serious breach of an individual's data, there is a duty to inform the individual straight away.

Second legislation:

The _____ applies to all public authorities. A public authority is an organisation that has a public function, for example care homes run by local authorities and hospitals. Through a series of Articles, the Act sets out rights to which everyone is entitled. Some of the rights particularly relevant to health and social care:

- Right to life - services such as the NHS provide medication and treatments to preserve life.
- Right to respect, privacy and family life - enable individuals to live as independently as they can, providing dignity and respect for individual needs.

- The Right to liberty and security - an individual cannot be detained or deprived of their freedom unless they have committed a serious crime or have been appropriately assessed with regard to the following legislation:
 - The Mental Health Act
 - The Mental Capacity Act (Deprivation of Liberty).
- Right to freedom from discrimination - these rights are further supported by the Equality Act 2010, see below.
- •Right to freedom of expression - individuals have their own opinions and should have the opportunity to express these. For example, health and social care service users have the right to be consulted and to make choices regarding their care and treatment.
- Right to freedom of thought, conscience and religion - an individual has the right to their own faith and beliefs which should be respected.

Third legislation:

The _____ simplified previous laws covering discrimination, such as the sex Discrimination Act, the Race Relations Act and the Disability Discrimination Act. All of these previous laws were brought together in this one new piece of legislation.

Key aspects of the _____:

- ❖ Direct and indirect discrimination on the basis of a protected characteristic is illegal. The nine protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion, sex and sexual orientation.
- ❖ Discrimination in education, employment, access to goods and services and housing is prohibited.
- ❖ Victimisation and harassment on the basis of a protected characteristic is prohibited.
- ❖ Reasonable adjustments have to be made by employers or providers of goods or services for those with disabilities. For example, installing a ramp to access a building, aids such as computer software to help a person to do their job or providing information in a large format. Hearing loop systems and information provided in Braille are also reasonable adjustments that can enable individuals to access services.

- ❖ Women have the right to breastfeed in public places. It is against the law for a woman to receive less favourable treatment because they are breastfeeding when receiving services.
- ❖ The Act encourages positive action. One form of positive action is encouraging or training people to apply for jobs or take part in an activity in which people with a protected characteristic, such as disability, are under-represented.
- ❖ Discrimination due to association is now an offence. This means that there is now protection from discrimination for carers of an individual who has a protected characteristic.

Fourth legislation:

The _____ is underpinned by two main principles:

- First, it enables patients to have more control over the care they receive
- Second, those responsible for patient care such as the doctors, nurses and others who work in the NHS and social care have the freedom and power to commission care that meets local needs.

Key aspects of the _____:

- 'No decision about me, without me' is intended to become the guiding principle behind which patients are treated. Patients are able to choose their GP, consultant, treatment and hospital or other local health service. They should be consulted and fully involved in the process of planning their care.
- Clinical commissioning groups are groups of general practices that work together in a local area to commission services to achieve the best possible care for individuals.
- Health and Wellbeing Boards bring together health and social care and are made up of commissioners, councillors and lay (non-medical) representatives to promote joint working and tackle inequalities in people's health and wellbeing.
- An increased focus on public health and prevention. Local councils have taken over responsibility for public health services and population health improvement, for example in relation to obesity, anti-smoking, screening and vaccinations.
- Healthwatch is an independent service created by the Act, which aims to protect the interests of all those who use health and social care services. Healthwatch has a role in communicating the views of patients to commissioning bodies and regulators.

Fifth legislation

This Act relates to those being assessed or receiving social care, and those who care for them.

Key aspects of the _____:

- There is a duty on local authorities to promote an individual's 'wellbeing'. The wellbeing principles include: personal dignity, protection from abuse and neglect, physical, mental health and emotional wellbeing, social and economic wellbeing, suitability of living accommodation and control by the individual over day-to-day life (including in relation to care and support). This means that whenever a local authority makes a decision about an adult, it must promote that adult's wellbeing.
- Continuity of care must be provided if someone moves from one area to another, so that there is no gap in care or support when an individual moves.
- There is a duty on local authorities to carry out a Child's Needs Assessment (CNA) for young people where there is likely to be a need for care and support after they reach the age of 18.
- An independent advocate is to be available to facilitate the involvement of an adult or carer who is the subject of an assessment, care or support planning or a review.
- Adult safeguarding. This includes responsibility to ensure enquiries are made into cases of abuse and neglect, the establishment of Safeguarding Adults Boards and responsibility to ensure information sharing and inter-professional working.
- Local authorities have to guarantee preventative services which could help reduce or delay the development of care and support needs, including carers' support needs.

Task: From memory, write key things you can recall for each legislation:

The Care Act (2014)

1. .
2. .
3. .

GDPR:

1. .
2. .
3. .

The Health and Social Care Act (2012)

1. .
2. .
3. .

Equality Act (2010)

1. .
2. .
3. .

Human Rights Act (1998)

1. .
2. .
3. .

Standards – Remember these are rules and regulations that set out expected ways of working, professional conduct and practice, for care services and practitioners.

Codes of practice: These outline an agreed way of working and an approach that care workers should follow in their work.

1. What is the NMC code of conduct and who is it for?

Codes of practice help practitioners to:

- Know the standard they are expected to meet
- Know if they are meeting the standards or need to change the way they are working
- Identify areas for CPD
- Fulfil the requirements of their role.

Codes of practice also helps service users to:

- Understand what standards to expect
- Have confidence they will be treated with dignity, respect and compassion at all times

Codes of practice can help employers to:

- Understand what standards to expect from staff
- Identify care workers who do not meet standards
- Identify support and training needs for staff

Regulations:

Regulations are:

We have discussed two different regulating bodies. **What are they?**

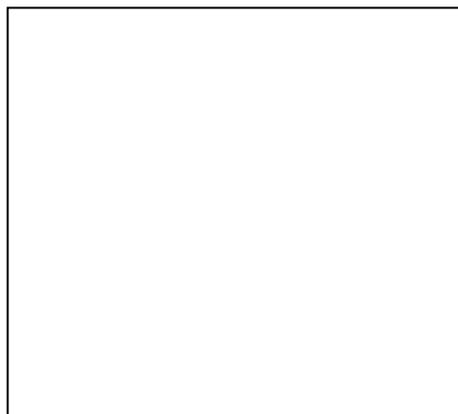
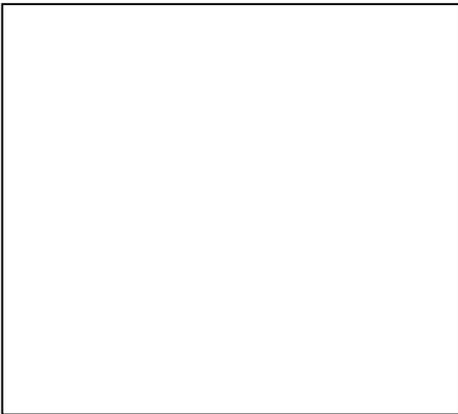
1. .
2. .

Outline the purpose of 1.

Outline the purpose of 2.

National Occupational Standards

From your school notes, summarise in the three boxes below what National Occupational Standards are and their purpose.



The 6 C's:

1. Care
2. Compassion
3. Competence
4. Commitment
5. Communication
6. Courage

Task: Write a brief example of how a professional can show each of the 6 C's.

A nurse can show care by...

A nurse can show compassion by....

A nurse can show competence by....

A nurse can show commitment by...

A nurse can show communication by...

A nurse can show courage....

P2, M1 – Professional skills, behaviours and attributes.

Task: You must firstly recall all the professional skills, behaviours and attributes (there are 13 to remember here!). Write them around the side of the word search.

Can you then write a definition for each key word?

You then need to find the skill, behaviour or attribute in the word search.

Word Search - Skills, Behaviours & Attributes

R	R	Y	M	S	A	R	T	C	I	R	M	N	S	O	E
N	P	I	E	S	S	P	E	V	E	B	O	S	I	W	P
R	K	R	O	W	M	A	E	T	E	R	P	R	L	R	R
I	G	C	O	M	M	U	N	I	C	A	T	I	O	N	I
T	T	L	U	F	T	C	E	P	S	E	R	B	E	C	N
B	H	O	B	J	E	C	T	I	V	E	L	M	I	O	I
T	A	O	K	K	T	S	O	L	V	E	P	E	I	M	T
P	E	N	M	E	T	O	S	T	M	A	O	T	A	M	I
A	S	R	E	N	O	I	T	I	T	C	A	R	P	I	A
T	H	E	L	A	U	Y	S	H	O	V	H	F	N	T	T
I	E	I	U	N	F	W	Y	E	R	N	S	I	S	M	I
E	V	I	T	C	E	L	F	E	R	D	A	A	L	E	V
N	P	R	M	T	N	D	S	R	E	E	M	L	L	N	E
C	N	I	A	N	H	B	A	H	R	G	W	T	I	T	R
E	Y	H	T	R	O	W	T	S	U	R	T	T	K	S	L
A	T	R	S	F	T	S	A	N	H	U	E	L	S	O	M

Task: Choose **5** of the skills, behaviours or attributes and outline how a H&SC professional could show each of them and what impact this would have on the patient/service user.

REMEMBER – YOU MAY HAVE TO DO THIS FOR ANY OF THE SKILLS, BEHAVIOURS OR ATTRIBUTES IN YOUR EXAM – SO HAVE AN EXAMPLE FOR EACH PREPARED.

Example 1:

Example 2:

Example 3:

Example 4:

Example 5:

P4 – Working within requirements of given job role

A job description sets out all the responsibilities of a job role and includes detailed information about:

- The tasks, work activities and responsibilities
- How the role is to be carried out
- Where the practitioner will work
- Who their supervisor/manager is
- Hours of work
- How much they will be paid.

There are many factors a professional must consider to ensure they are working within their given job role.

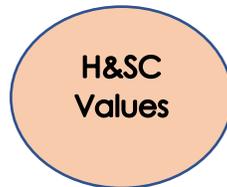
Task: Find a job advertisement for a H&SC role you are interested in (It can be anything, doctor, nurse, surgeon, anaesthetist, social worker etc.). Read the information and then fill in the boxes that highlight the key factors a professional must follow.

<p style="text-align: center;"><u>Policies & Procedures</u></p> <p>Which policies and procedures would your H&SC professional need to adhere to:</p> <p>What is the purpose of these policies and procedures?</p>	<p style="text-align: center;"><u>Professionalism</u></p> <p>How can your professional ensure they show professionalism?</p>
<p style="text-align: center;"><u>Limits & Boundaries</u></p> <p>What are some limits and boundaries for your professional? (What are they required to do)</p> <p>What would mean that your professional was breaking those limits and boundaries? (What can your professional NOT do?)</p>	<p style="text-align: center;"><u>Commitment</u></p> <p>How can your professional show they are committed?</p>

P3, D1 – Health and Social Care Values

Values of care are core principles that underpin the work of those providing health and social care services. Applying the values of care ensures that individuals using the H&SC services receive appropriate person-centred care.

Task: In the space below, create a spider diagram and in one colour recall all 9 health and social care values. Then in a different colour, next to each value give an example of how the care value could be shown by a practitioner in a H&SC setting.



Alongside showing these values, it is important that the **individuals accessing the services feel like they are being valued**. Practitioners can show they value service users and can be achieved in daily routines by considering:

- Individual needs and preferences
- Informed choice
- Active support
- Aid and adaptations
- Health and safety
- Confidentiality

The values can be applied during mealtimes, during personal care, when carrying out activities and with decision-making. Below are some examples of HOW the care worker can make the individual feel valued during these times.

During mealtimes

- Having a range of food to meet all dietary requirements
- Offer privacy whilst eating
- Easy grip knives and forks for service users with conditions such as arthritis, fractured/broken wrists, weak grip etc.
- Enlarged menus, menus in different languages
-
-
-
-

During personal care (bathing, showering, dressing etc)

- Explain what needs to be done beforehand
- Provide help only where it is needed
- Make the client feel at ease by talking to them
- Provide privacy
-
-
-
-

Activities

- Provide activities to suit everyone’s needs
- Make sure activities are risk assessed and checked beforehand
-
-

Decision making

- Discuss options for care/treatment with the patient
- Provide all information about any care they are receiving
- Give them choice over what GP/treatment to have etc.
-
-

Task: Can you add some more ways to highlight how the professional can make the individual feel valued.

Task: Applying theory to a scenario. Read through the two scenarios and answer the questions below each

Providing care that values individuals

Beth is in hospital. The health care assistant has checked Beth's records and knows that she has difficulty swallowing and has a visual impairment, so her eyesight is not too good. Read the conversation below between the health care assistant and Beth and then answer the questions that follow.

Health care assistant: I've got the menu, Beth. I'm hungry, are you?

Beth: Yes I am. Is the food nice here?

Health care assistant: It's not too bad, the fish and chips are really good.

Beth: I used to like fish and chips but I keep getting bones stuck in my throat!

Health care assistant: Well, we've got carrot and tomato soup or pate for starters. I think I will be having the soup, what about you?

Beth: I think I will have the soup - it will go down easily.

Health care assistant: Good choice. Let's see what's on for mains. I'm in luck - the fish and chips are on. Now what have they got that you would like Beth? There's sausage and mash, steak and kidney pie or macaroni cheese.

Beth: I haven't had macaroni cheese for ages, I'll have that.

Health care assistant: Great, I'll get those ordered for you.

Question

1. Explain how the care worker has provided care that values Beth and meets her needs at mealtimes. Consider the following in your answer: dignity, respect, rights, independence, effective communication, person-centred approach to care.

Read the conversation below between Joanna (a care assistant) and Mrs Clark (a 75-year-old woman living in a residential care home).

Joanna: Now come on, Mrs C. You know you like to get up early for breakfast and have a nice cup of tea at 7 O'clock, so you need to get dressed now.

Mrs Clark: I do wish you would call me Rita.

Joanna: Now don't be silly, you know I always call you Mrs C.

Mrs Clark: Do you think I could wear that green dress I like, the one with the flower pattern?

Joanna: [sighs] I can't see it. Here - have this blue dress instead. It's nice.

Mrs Clark: [frowning] Oh okay then. But it's not as comfortable.

Joanna: Then when you've finished putting that on, we'll get you into the dining room in time for a nice cup of tea before breakfast.

Mrs Clark: But it's only 7 a.m.! I wanted to pop next door to see how Jenny's feeling today. She wasn't feeling too good yesterday.

Joanna: Look, I haven't got time you know. I'm only here until 7.30, so we've got to get you ready for breakfast before I go. And I thought it would be nice for you to sit down in the dining room together with the others for half an hour. You can have a chat.

Mrs Clark: Oh well, if you say so.

Questions:

1. Write an explanation of the ways in which Joanna has not provided care that values Mrs Clark as an individual.

2. Write an alternative script for the same conversation between Joanna and Mrs Clark. Your script should demonstrate ways that Joanna could value Mrs Clark with a person-centred approach when providing care.

P7, M2 - Person-centred care

Task: Circle all of the words below that relate to what person-centred care is.

Based on individual needs

Telling them what is happening

Controlling them

Giving the patient control

Making them feel empowered

Doing things for them

Promote independence

Ensure their individual needs are met

Give them choice

Considering their likes/dislikes

Treating all patients the same

You should remember that if person-centred care is shown, this will benefit the patient/service user *holistically*. This means the professional is meeting the persons individual needs by considering physical, intellectual/cognitive, emotional and social impacts.

Task: Match up the definition to the correct key term, either physical, intellectual/cognitive, emotional or social.

PHYSICAL

This relates to an individual's relationships with others. Person-centred care should help individuals to gain confidence and be able to enjoy others company.

INTELLECTUAL

This relates to an individual's mind and their thought processes such as thinking skills, understanding, learning, reasoning and knowledge. Person-centred care should provide an individual with stimulus for the person to become engaged in, keep them interested and involved.

EMOTIONAL

This relates to an individual's feelings. Person-centred care should ensure the well-being of individual's is high priority at all time.

SOCIAL

This relates to an individual's body. Person-centred care should ensure the person stays as physically active as possible and helps them have good physical health.

P5, P6 - CPD – Continuing professional development

You should now know why carrying out CPD is so important for the professional and the opportunities it can bring for careers in health and social care services.

Task: Below is a list of:

1. Opportunities for career development (ways to gain experience and skills to build CPD file)
2. Sources of information in relation to career development (where you can find/go to seek CPD opportunities to help you)
3. Qualifications and training opportunities (How to gain said qualifications and training)

You need to unscramble the words to reveal the answers.

1. Opportunities for career development

VGNUOLETREIN =

EUCDITNOA =

MEYOPLNTM =

POGRSSRENIO THAPYAW =

2. Sources of information in relation to career development

OGAONISISRTAN & SREVICES =

CRSEERA AVRISED =

ITEERNNT =

MEADI =

OWRK EERCIPXENE =

3. Qualifications and training opportunities

FURRTEH EDCUONTAI =

APERPESHPIINSC =

CMORYLPOSU TANINIRG =

Creating your own PDP (Personal Development Plan).

You created your own PDP when you did your P6 for Unit 2 task 3. Here you identified your career aspirations and your learning needs (what you already

have e.g. qualifications, work experience etc. and what you still need to achieve to reach your goal).

You also set your own SMART targets.

Task – Recall what the words are below to make the target and goal SMART

S =

M =

A =

R =

T =

You then create SMART goals that cover different periods of time.

Task – Fill in the blank at the beginning to identify what type of goal it is

1. _____ -term goal – to be achieved within the next month
2. _____ - term goal – to be achieved within the next 4 months
3. _____ - term goal – to be achieved with 9-12 months.

Task: Write a quick summary as to why reviewing your goals is so important, what do you discover?

P8 – Working and personal relationships.

As part of task 4 we looked at what makes a 'personal' and a 'professional/working' relationship different and identified any similarities between them.

Task: Below are some statements for 'personal' relationships and some for 'professional' relationships. You need to circle whether that statement is TRUE or FALSE.

Personal relationships

These exist between friends, neighbours, family members, partners and relations. TRUE/FALSE

These relationships have official rules and policies and procedures you must follow. TRUE/FALSE

All personal relationships have set values that MUST be obeyed. TRUE/FALSE

No uniform/dress code is required in personal relationships. TRUE/FALSE

These relationships occur naturally, and you can choose who you have as your friends. TRUE/FALSE

Working/professional relationships

These relationships are built between colleagues such as GP's, social workers, nurses, inspectors etc. as well as service users and their families. TRUE/FALSE

There are set codes of conduct and policies and procedures that must be followed in these relationships. TRUE/FALSE

People in these relationships need to be careful about how they share information and who they share it to. TRUE/FALSE

It doesn't matter if key care values are not shown in these relationships. TRUE/FALSE

You can wear what you want when in one of these relationships. TRUE/FALSE

Your attendance, punctuality etc. will be monitored. TRUE/FALSE

M3 – Partnerships working and potential barriers to partnership working.

Partnership working:

Task: What are the two type of partnership working beginning with 'multi':

1. Multi- _____
2. Multi - _____

Now match up the descriptions below to the correct example of partnership working:

<p>B. This is where different organisations, such as the police, local authorities, health trusts, charities, schools and colleges and community groups who work together to provide care and support in order to meet an individual's needs.</p> <p>This is multi- _____</p>	<p>A. This refers to a group of H&SC practitioners, each with different roles and responsibilities, working together to meet an individual's needs. They have a range of different specialist skills and expertise.</p> <p>This is multi- _____</p>
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Another example of partnership working is 'National and Local Approaches to Safeguarding'.

Task: Can you remember what laws, organisations and frameworks are in place to safeguard adults and children?

1. .
2. .
3. .
4. .

Safeguarding boards are set up both *locally* and *nationally* and they have a legal responsibility to lead and co-ordinate safeguarding in the area. They develop local safeguarding policies and procedures and show multi-agency working between organisations. Local Authorities also have a duty to conduct serious case reviews for children and safeguarding adults reviews where death or serious injuries have occurred.

Team Around the Child (TAC) refers to a group of practitioners working with a particular child or young person and their family. The plan to support the problems in a holistic way and create a plan to benefit the child.

Task: Around the child, write down what the underpinning TAC principles are:



Barriers to partnership working:

Task: Each box has a potential barrier to partnership working written in. Your task is to write down WHY each of these could be a potential barrier.

<p>Ineffective communication is a barrier because...</p> <p>Time management is a barrier because...</p> <p>Resources are a barrier because...</p>
--

Task: Can you now list ways to overcome these barriers – there are 6 potential ways in total:

1. ⋮
2. ⋮
3. ⋮
4. ⋮
5. ⋮
6. ⋮

D2 - Summarise how partnership working meets the needs of individuals accessing health and social care services.

Task: Create a poster to promote the various positives of showing partnership working when meeting individual's needs. There are 8 positive outcomes for individuals, include all 8 in your poster.

