CHCCOM005

Communicate and work in health or community services

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Release 2

Learner Guide

Aspire Version 1.1

Aspire Learning Resources
Supporting Vocational Education and Training for 30 years
1991 to 2022

Contents

Aspire acknowledges the homelands of all Aboriginal and
Torres Strait Islander peoples and pays our respect to Country

Before you begin

This Learner Guide is based on the unit of competency *CHCCOM005 Communicate and work in health or community services*, Release 2.

Your trainer or training organisation must give you information about this unit of competency as part of your training program.

How to work through this Learner Guide

This Learner Guide contains a number of features that will assist you in your learning. Your trainer will advise which parts of the Learner Guide you need to read, and which Practice Tasks and Learning Checkpoints you need to complete.

Feature of the Learner Guide	How you can use each feature
Learning content	Read each topic in this Learner Guide. If you come across content that is confusing, make a note and discuss it with your trainer. Your trainer is in the best position to offer assistance. It is very important that you take on some of the responsibility for the learning you will undertake.
Examples	These highlight learning points and provide realistic examples of workplace situations.
Practice Tasks	Practice Tasks give you the opportunity to put your skills and knowledge into action. Your trainer will tell you which Practice Tasks to complete.
Callouts	Callouts reiterate key learning points to help students revise for their assessments.
Weblinks	Weblinks provide learners with additional content to contextualise their learning and develop their understanding.
Videos	Videos provide a visual reference of key concepts to aid comprehension and guide learner exploration. Each video is accessed by a QR code in the Learner Guide (or a button in the eBook version) for ease of access.
Glossary/margin definitions	Key terms are defined where they first appear to help consolidate understanding. A glossary of terms is provided at the end of the Learner Guide to assist learner revision of key concepts.
Summaries	Key learning points are provided at the end of each topic.
Learning Checkpoints	There are Learning Checkpoints at the end of each topic. Your trainer will tell you which activities to complete. These activities give you an opportunity to check your progress and apply the skills and knowledge you have learnt.
Case studies	Case studies are interspersed throughout the learning content to provide a workplace setting that contextualises key concepts.

Foundation skills

As you complete learning using this guide, you will be developing the foundation skills relevant for this unit. Foundation skills are the language, literacy and numeracy (LLN) skills and the employability skills required for participation in modern workplaces and contemporary life.

These skills are listed below:

Foundation skill area	Foundation skill description
Reading	• Understanding how documents are presented and being able to navigate through documents • Understanding industry- and job-specific terminology • Interpreting key information in relevant documents • Understanding routine workplace checklists and documentation
Writing	• Planning, drafting and writing reports and documents • Communicating through written letters, email and online • Recording progress; reporting incidents
Oral communication	• Clarifying instructions • Providing information • Supporting others through encouragement, negotiation and conflict resolution • Using body language to model desired behaviour and responding to others' body language
Numeracy	• Calculating costs, weights, measurements of height and distance • Interpreting measurements
Learning	• Understanding your job role, organisational procedures and legal responsibilities • Managing your work and seeing how well you are going • Making goals for yourself at work • Seeking professional development opportunities for continuous improvement
Problem-solving	• Identifying problems • Working out how to fix a problem using problem-solving processes • Reviewing the outcome
Initiative and enterprise	• Recognising opportunities to develop and apply new ideas • Generating ideas by thinking of new ways to do something • Making suggestions to improve work
Teamwork	• Working well with other people by cooperating, collaborating, encouraging and building rapport
Planning and organising	• Planning your workload and commitments • Implementing tasks • Completing work on time • Knowing how to deal with hazards and risks

Foundation skill area	Foundation skill description
Self-management	• Understanding and applying decision-making processes • Reviewing your behaviour and the impact of your decisions
Technology	• Efficiently using digitally based technologies and systems correctly and safely • Accessing, organising and presenting information • Using equipment correctly and safely

Note: Not every unit of competency will contain all foundation skills.

What do you already know?

Use the following table to identify what you may already know. This may assist you to work out what to focus on in your learning.

Topic	Key outcome	Rate your confidence in each section
Topic 1 Communicate effectively with people	1A Use verbal and nonverbal communication to enhance understanding	❑ Confident ❑ Basic understanding ❑ Not confident
	1B Communicate service information clearly	❑ Confident ❑ Basic understanding ❑ Not confident
	1C Listen to requests, confirm understanding, clarify meaning and respond appropriately	❑ Confident ❑ Basic understanding ❑ Not confident
	1D Exchange information clearly and confidentially	❑ Confident ❑ Basic understanding ❑ Not confident
Topic 2 Collaborate with colleagues	2A Clarify and agree on time frames for carrying out workplace instructions	❑ Confident ❑ Basic understanding ❑ Not confident
	2B Identify lines of communication between your organisation and other services	❑ Confident ❑ Basic understanding ❑ Not confident
	2C Use industry terminology correctly	❑ Confident ❑ Basic understanding ❑ Not confident
	2D Follow communication protocols when interacting with others	❑ Confident ❑ Basic understanding ❑ Not confident

Topic	Key outcome	Rate your confidence in each section
Topic 3 Address constraints to communication	3A Identify early signs of complicated or difficult situations	❑ Confident ❑ Basic understanding ❑ Not confident
	3B Identify and resolve constraints to effective communication	❑ Confident ❑ Basic understanding ❑ Not confident
	3C Use communication skills to avoid and resolve conflict situations	❑ Confident ❑ Basic understanding ❑ Not confident
Topic 4 Report problems to supervisor	4A Comply with legal and ethical responsibilities and discuss difficulties with supervisor	❑ Confident ❑ Basic understanding ❑ Not confident
	4B Refer breaches and adverse events to the appropriate people	❑ Confident ❑ Basic understanding ❑ Not confident
	4C Refer issues impacting on the rights and responsibilities of employees, employers or clients	❑ Confident ❑ Basic understanding ❑ Not confident
Topic 5 Complete workplace correspondence and documentation	5A Complete documentation according to legal requirements and organisational procedures	❑ Confident ❑ Basic understanding ❑ Not confident
	5B Use clear, accurate and objective language when documenting events	❑ Confident ❑ Basic understanding ❑ Not confident
	5C Follow organisational policies and procedures for using digital media	❑ Confident ❑ Basic understanding ❑ Not confident
Topic 6 Contribute to continuous improvement	6A Contribute to identifying improvements in work practices	❑ Confident ❑ Basic understanding ❑ Not confident
	6B Promote and model changes to improve work practices and procedures	❑ Confident ❑ Basic understanding ❑ Not confident
	6C Seek feedback and advice on developing skills and knowledge	❑ Confident ❑ Basic understanding ❑ Not confident
	6D Consult with manager regarding access to skill development opportunities	❑ Confident ❑ Basic understanding ❑ Not confident

Topic 1: Communicate effectively with people

1A Use verbal and nonverbal communication to enhance understanding

1B Communicate service information clearly

1C Listen to requests, confirm understanding, clarify meaning and respond appropriately

1D Exchange information clearly and confidentially

1A Use verbal and nonverbal communication to enhance understanding

Communication is the process of transmitting information from one person or group to another person or group.

Communication involves a sender (the thing that sends a message), a message and a receiver (the thing that receives the message). Messages can be communicated in verbal and non-verbal formats.

Individuals have different communication needs depending upon factors such as the language they speak, their cultural background, their age and their abilities.

Communication models, modes and types

- Communication **models describe the process** of communication.
- Communication **modes are the mediums** through which communication is processed.
- Communication **types are the methods** of communication.

The information below provides further details about models, modes and types of communication.

Communication models	
	• **Linear model:** in this model, communication is seen as a one-way linear process. The sender (the 'source' of the message) transmits a message (sound, word, behaviour) through a 'channel' (the pathway or route of communication) to the receiver.
	• **Interactive model:** in this model, communication is seen as a two-way interactive process. The sender transmits a message, and the receiver responds. There is a flow of communication and feedback between the sender and receiver via two channels. The ways the sender and receiver construct messages are influenced by their experiences, environment and culture (their 'field of experience').
	• **Transaction model:** in this model, communication is a transaction. Rather than being senders and receivers, people are viewed simply as communicators. According to this model, communication is a more dynamic process than the processes outlined in the Linear and Interactive models of communication.
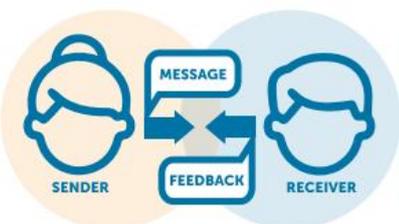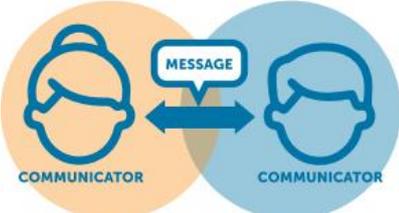
Modes of communication

- Interpersonal mode: a two-way process of participants exchanging information, feelings and meaning through a combination of verbal and nonverbal communication.
- Interpretive mode: a one-way process of the participant deriving the meaning of the message through analysing written, oral and visual communication, within the context of the message and messenger.
- Presentational mode: the one-way presentation of information, concepts and ideas to an audience who must then interpret the meaning without opportunities to discuss and negotiate the meaning with the presenter.

Types of communication

- Verbal communication: the exchange of information through the use of sound and words.
- Nonverbal communication: the exchange of information through nonverbal means, such as gestures, tone, facial expressions and body language.
- Written communication: the exchange of information through written symbols that hold a common meaning for both the writer and the recipient.

Communication techniques

Using different communication techniques will help you communicate with a diverse range of people and allow you to demonstrate empathy, respect and awareness of cultural differences.

Here are some descriptions and examples of common communication techniques.

Asking open-ended questions

- An open-ended question requires more than a 'yes' or 'no' response. Open-ended questions generate more detailed and nuanced responses than closed-ended questions.
- Example of an open-ended question: 'How do you feel about that change?'
- Example of a closed-ended question: 'Do you agree with that change?'

Affirmation

- An affirmation is a supportive statement. Affirmations are used to demonstrate understanding and appreciation.
- Example: 'That's a great way of putting it.'

Reflection

- A reflection is a statement that a person uses to confirm their interpretation of a message. Reflections are also used to express empathy and understanding towards the speaker.
- Example: Jenny said, 'I don't even have time to get a cup of coffee for myself this morning'. Rob reflected, 'So you feel there is too much work to do and not enough time?'

Summarising
• A summary is a form of reflective listening where the listener summarises the main points of the communication to ensure that they have not missed any important information. This technique can be used to ensure accurate interpretation of information and also to close off one topic and lead into the next.

When you are talking to someone, it is important to understand the influence that grammar, speed and pronunciation can have on the message you are trying to communicate.

Below is an explanation of pronunciation, grammar and speed of speech.

Pronunciation
• When you pronounce something correctly, you say the word in the correct way. Pronunciation can differ according to a person's background and geographical location. For example, some Australians pronounce the word castle as 'car-sil' whereas others pronounce it as 'cass-.'
• Pronunciation is essential for clear communication. Incorrect pronunciation can drastically change the meaning of a message and lead to misunderstanding, confusion and sometimes even offense.

Grammar
• Grammar illustrates how language should be used, such as where words are placed and used in a sentence. For example, when we order a coffee we say, 'I would like a cappuccino please.' We don't say, 'Cappuccino I would please like.'
• The rules of grammar help make messages understandable. This is especially important when communicating with people who are less proficient in English. There can be a tendency to break grammatical rules to aid comprehension but this ineffective as English language learners will expect to hear certain expressions and phrasing and if this is not used, understanding can be further compromised.

Speed
• The speed of verbal communication can be used to convey feelings of urgency, excitement and anxiety. It is important to be aware of how the speed of your voice may express these emotional states to your audience.
• It is also important to be aware that for population groups who have difficulty with hearing and comprehension, the speed at which you speak can have a significant impact on how well you are understood.

When and how to use and recognise nonverbal communication

Research has shown that when it comes to understanding a message, nonverbal communication is as important as verbal communication.

It is important to understand how nonverbal factors such as body language impact your communications with others and how observing other people's nonverbal communication can help you understand them. You can recognise nonverbal communication by:

- noticing people's posture – are they sitting or standing with their back straight, leaning slightly forward to convey engagement, or are they slouching or leaning away showing disinterest?

- watching out for hand gestures – are they fidgeting or using excessive hand gestures which can indicate nervousness; or are their hands open and by their sides communicating confidence and ease?

- looking for facial expressions – is the person smiling and animated indicating engagement and receptiveness, or is their brow furrowed indicating confusion? A tight mouth and clenched jaw might indicate anger or aggression

- looking to make eye contact – is the person making eye contact with the speaker to show interest and respect, or are they avoiding eye contact which can suggest deception or disinterest?

When working with clients, nonverbal communication can look like the following:

Body language and posture	Patrea folded her arms across her chest to reinforce that the answer was still no and that she would not change her mind.
Evasive eye contact	Nadia avoided making eye contact because she was uncomfortable with the confrontation.
Hand gesture	Tony waved his hand as he dismissed the matter to reinforce to Amanda that the mistake didn't matter and that she should stop worrying about it.
Reassuring touch	Jason placed his hand on Donald's shoulder to remind him that he was standing close by and would not let him fall over.

Respect the rights and responsibilities of others

Respect for others is demonstrated through your speech, behaviour and attitude.

Respect is a critical foundation of work in the health and community services sectors and is also embedded in the policies and procedures of organisations and professional standards. For example, the Australian Community Workers Association's Code of Ethics includes the obligation of the worker to treat clients with dignity and respect the skills, knowledge and experience of their colleagues.

A code of ethics is a set of guiding principles or guidelines that members of a group must follow or are expected to uphold.

> The Australian Community Workers Association's Code of Ethics can be found at:
> aspirelr.link/acwa-ethics-standards

Here are some ways in which you can demonstrate respect to others:

Ways to demonstrate respect to others
• Maintain and promote dignity, choice and empowerment.
• Advocate for the needs and rights of the people who access services.
• Use inclusive and appropriate language to describe people and communities.
• Involve people who access services in planning and decision-making processes.
• Actively listen to others and clarify messages.
• Ensure physical environments cater to people with diverse needs to communicate confidentially and in a safe space.
• Seek regular feedback from people accessing services.

Example
Use verbal and nonverbal communication to enhance understanding and respect

Here are some examples of how to use nonverbal and verbal communication to enhance understanding and demonstrate respect.

Verbal communication
Sibella is an older woman with moderate dementia who attends an activity at the local day centre once a week. Most days, Sibella enjoys herself and chats with the other ladies at her lunch table. On other days, she becomes easily disorientated and confused. The workers at the centre find that talking in a calm, gentle tone and reminding Sibella about where she is and what's happening next helps her reorient herself. For example, they might say: 'It's okay, Sibella. You are at the day centre. Lunch will be here soon. Everything is fine.'

Nonverbal communication
Hy is an older man with a physical and intellectual disability. He requires assistance from workers to get in and out of his chair and to walk and has difficulty following verbal instructions. Sometimes he becomes distressed when workers try to help him out of his chair. The workers at the care facility use nonverbal communication to reassure him and indicate what he needs to do. They begin by putting his walker in front of him and patting it. Once Hy is standing, one of the workers walks forward and then turns, smiles and gestures with their hand for Hy to follow. Another worker holds Hy and the walker and takes a step forward so that he can see the action and follow along.

Practice Task 1

Question 1

Match each term about communication models, modes and types to its definition.

Linear communication model	When information is conveyed through written symbols which hold a common meaning for both the writer and the recipient.
Transaction communication model	When information, concepts and ideas are presented to an audience in a one-way direction. The audience must then interpret the meaning without discussing or negotiating the meaning with the presenter.
Written communication	In a one-way process, the participant derives meaning by analysing written, oral and visual communication, within the context of the message and messenger.
Presentational mode of communication	In this model, people are viewed simply as communicators. Communication is seen as more dynamic and transactional.
Interpretive mode of communication	The sender transmits a message (sound, word, behaviour) through a 'channel' (the pathway or route of communication) to the receiver in a very linear process.

Question 2

Which of the following communication techniques enhance understanding and demonstrate respect for clients? Tick all that apply.

❑ Asking closed-ended questions that generate a 'yes' or 'no' response

❑ Using affirmations to support the speaker

❑ Using a reflection statement to confirm the interpretation

❑ Asking open-ended questions to seek detailed information

❑ Summarising the main points of the communication to ensure that important information has not been missed

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. Incorrect pronunciation can change the meaning of a message and lead to misunderstanding, confusion and sometimes even offense.	Yes / No
b. When speaking with people who have English as a second or third language, we should ignore grammar and focus on communicating key words.	Yes / No
c. The speed with which we communicate can convey emotion. It can also make understanding and comprehension difficult for those with hearing impairment.	Yes / No
d. To recognise nonverbal communication, we need to only look at a person's face, e.g., facial expressions and eye contact.	Yes / No
e. To help communicate respect, you should establish and maintain eye contact, smile, have uncrossed limbs, be standing upright and leaning slightly in towards the speaker.	Yes / No

1B Communicate service information clearly

Workers in the community services sector regularly interact with people from diverse backgrounds.

When communicating information about a service to a person, it is important for workers to be as clear as possible. The information needs to be communicated in a way that the other person can easily understand.

Some people have specific communication needs. For example, a person with limited English language skills might need information that is written in their preferred language. A person who has difficulty reading might need information to be explained to them verbally. A person with disability may need some time to think and respond to information.

Clear communication

Clear communication is essential in all professional settings including community services.

The following information provides strategies for achieving clear communication in the community services environment.

Clear purpose	Make sure that the idea or main purpose of the message is clear. You may need to limit the number of ideas within the message so that the main point is not lost.
Keep it brief	Communicate the most essential information in short, simple statements.
Correct information	Make sure the information you are communicating is accurate and up-to-date.
It makes sense	Present the information in a logical sequence. For example, if you are explaining a process, start with the first step, then the second step, and so on.
Don't leave things out	Make sure you provide the person with all the information they need to make an informed decision.

Tailor communication to meet individual needs

Some of the ways you might need to tailor your communication to meet the needs of an individual include:

- making your sentences shorter when speaking with someone who has dementia

- avoiding the use of slang when speaking with someone from a non-English speaking background

- facing a person who is in a wheelchair when you speak to them.

Here are some key things to consider when tailoring your communication.

Method	Information should be simple and clear and may be delivered by written information, visual demonstrations and audible instructions.
Content	The amount of information provided should be relevant, engaging and easily understood by the audience.
Frequency	Depending on the nature of the content, the information may need to be delivered only once or many times over to achieve the desired result.

In some cases, you may need to try a few different approaches to communicate information to someone. For example, if a person does not understand what you communicate to them verbally, you may need to try a visual method of communication (e.g., a simple diagram).

Regardless of the approach that you choose, it is essential that you clarify that the person has understood what you are trying to communicate by listening to their verbal communication and observing their nonverbal communication.

Language and communication

People working in the health and community services sectors often need to tailor how they communicate with clients to ensure their message is understood. When tailoring communication, it is important to account for language considerations.

For example, a support worker might need to avoid using industry specific words or acronyms when communicating with a client. Or a worker may need to speak more slowly when communicating with someone who has a cognitive impairment.

Interpreter
A person or technology that translates speech from one language to another to assist another person's understanding.

There may be situations where you need to use an **interpreter** interpreter to help you communicate verbally with a person who does not speak English or has limited English proficiency. Translation can be used to convert written information from one language into another. Relying on a person's family member or friend to interpret for you can be problematic. For example, a person's right to privacy could be breached if a family member is involved in interpreting for them. Professional interpreters, on the other hand, are bound by a code of ethics which ensures the privacy of the individuals they are working with.

Here are some other factors to consider regarding language and communication:

Language considerations
• Use basic vocabulary when speaking with someone who has limited English proficiency.
• Language barriers can sometimes be overcome if information is provided in a written (rather than verbal) format, or vice versa.
• When arranging an interpreter, be aware that a person's country of birth is not always a reliable indicator of their preferred language: check the person's preferred language and dialect.
• Some people will not be literate in their native language; you will need to find alternative ways of communication.
• Use visual information to communicate health-related information to someone who has a limited understanding of health-related concepts and terminology.

Source: https://www.legalaid.nsw.gov.au/__data/assets/pdf_file/0018/5832/Guidelines-on-interpreting-and-translation.pdf

Culture and communication

Different **cultures** have different rules about communication, such as eye contact and communicating with people of different ages (e.g., communicating with someone who is older than yourself).

Workers and agencies must recognise and accommodate cultural differences to meet the needs of service users, families and staff members from diverse backgrounds. To develop an overall understanding of someone's cultural background, associations representing specific cultural groups may be able to assist.

Culture
The social behaviour and norms found in human societies, which are influenced by race, religion, economic status, family life, health, educational or governmental system of their members.

Techniques for culturally-aware communication
Use active listening.
Allow adequate time for conversations and interactions.
Use empathy to try to understand the experience of the person you are interacting with.
Work towards establishing rapport and developing a trusting relationship.
Check if you are unsure what is appropriate or acceptable in a specific situation or circumstance (e.g., how you should refer to someone older than yourself).
Do not make assumptions about someone based on their cultural background.
Recognise that regardless of culture, people are individuals with individual needs.

For more information about understanding different cultures, see:
aspirelr.link/reachout-culture

Religion and communication

Some religions have rules about topics of conversation and who may be involved in those discussions. In some religions, for example, it is taboo to discuss death directly with a person who has a critical health condition.

In other religions, touching someone of the opposite sex is not acceptable. For people who belong to that religion, a gentle touch from someone of the opposite sex – even if it did not have sexual connotations – could be considered inappropriate.

Regardless of religion, each person should be viewed and treated as an individual; you may need to tailor your communication strategies to accommodate different religious beliefs and practices.

Emotions and communication

The emotions of the person who sends a message, and the emotions of the person who receives it, can influence communication.

Have you walked down the street and seen someone who was sad and then you experienced sad feelings? Or perhaps you've seen a scary movie and felt scared as you watched the frightened expressions on the faces of the characters? The reason this happens is that human beings have interpersonal bonds which allow us to experience shared emotions.

The emotional state of a person communicating a message can influence how a message is interpreted by the recipient. Consider the following example.

Example
Emotional impact on message receipt

Giorgio is feeling upset that his cat has died. When he arrives at work, Giorgio asks his colleague, Samantha, to help him clean up their shared office. Samantha can tell that Giorgio is upset but misinterprets his sadness for contempt, thinking that Giorgio is upset because she made a mess in their office. In fact, Giorgio accepts that he is equally responsible for the messy office but needs Samantha to help him clean it up because he has clients arriving shortly for a meeting.

Emotional states

The emotional state of the recipient can also influence the interpretation of a message. For example, Mei is feeling anxious due to a personal situation at home.

When Liam asks Mei to attend a meeting in his office, Mei interprets the request as if she has done something wrong, and Liam wants to discuss this in his office. In fact, Liam wants to meet with Mei so he can tell her she has been promoted, but Mei's anxiety has influenced the way she has received Liam's message.

It is important when you are communicating that you consider these interpersonal bonds and the way in which our emotional state may be influencing those around us, and vice versa.

Disability and communication

A person's disability might affect their vision, hearing, speech, cognition and/ or mobility. All these factors can impact upon how a person sends and receives messages.

Here are some things you maye need to consider when communicating with people living with a disability:

People who are blind/ people with low vision	• When you greet the person, make sure you identify yourself. • If you are having a group discussion, you should identify who you are directing questions to by using the person's name as a vocal cue; for example, 'Sarah, what do you think?' • Always give a verbal warning about any movements about to take place in the person's immediate surroundings. For example, 'I am just going to bend down and pick up that pen for you'. • Always announce when a conversation is over, and you are leaving. For more information about communicating with someone who is blind or has low vision see: https://www.visionaustralia.org/information/family-friends-carers/communicating-effectively
People who are hard-of-hearing	• Face the person directly and speak clearly. • Speak clearly, but don't shout; shouting can distort sound. • Speak slowly but not too slowly. • Where appropriate, ensure that the person is wearing hearing aids and that they are in working order. • Use written communication where appropriate. • Use actions and visual cues where appropriate.

People with a speech impairment	• Use an encouraging approach; don't correct the person's speech. • Be patient; give the person time to respond. • Don't pretend to understand if you don't. Instead, ask them to repeat the statement or question, or say it in a different way. • Speak normally – you do not need to raise your voice or slow your speech. • Pay careful attention to the person's body language as this may help with shared understanding.
People with a cognitive impairment	• People with cognitive impairments may not be able to tell you what they need or that they don't understand you. You can prepare by asking a family member or carer who knows the person to give you some ideas on ways to communicate. • If a person is having difficulty communicating, pay attention to their body language – this may help you better understand what they need. • Make sure that the person feels safe and comfortable. • Be patient; don't hurry the person.
People with physical disabilities	• Talk to the person at eye level; for example, if they are in a wheelchair, sit on a chair if you want to have an extended conversation with them. • Be aware that mobility aids such as wheelchairs are often viewed as an extension of that person's body – therefore, leaning on, pushing or handling a wheelchair is considered rude and offensive. • Do not presume the person has a cognitive impairment; speak to them as you would another adult.

Sources: https://www.visionaustralia.org/information/family-friends-carers/communicating-effectively; https://deafnav.com.au/understand/communication; https://www.dhhs.tas.gov.au/publichealth/health_literacy/health_literacy_toolkit/communicating_with_people_who_are_hearing_impaired; https://www.avacaremedical.com/blog/10-tips-for-interactions-with-wheelchair-users.html

For more information about communicating with someone who is deaf or hard-of-hearing see: https://deafnav.com.au/understand/communication

Health and communication

A person's health can influence their ability to communicate; for some people communication may be impaired because of the physical effect an illness has on their capacity to communicate. For others, the medication they take can impair their cognition and understanding making communication more difficult.

When working with clients, especially older clients, it is important to be aware of conditions that can impair their capacity to communicate; this can include stroke, COPD (chronic obstructive pulmonary disease) or dementia.

However, there are less obvious conditions that can affect communication. For example:

- frailty
- pain
- delirium
- sleep deprivation.
- malnutrition
- dehydration
- low mood

Medications can also affect a person's ability to communicate, especially in cases where clients are taking 5 or more medicines every day. This is known as polypharmacy. In these cases, it is important to understand the effects and side-effects these medicines may have on individuals.

Mental health conditions such as depression, anxiety and psychosis can also affect a person's ability to understand information and comprehend how that information is relevant to them.

Here are some questions to consider when communicating with someone who has a health issue:

Questions to consider when communicating with someone who has a health issue
Is the person on any medications that alter cognition or that may make them drowsy or confused?
Does the condition impact the person more at a certain time of day?
How quickly does the person fatigue from interactions?
Is the information relevant in the context of the person's wishes and prognosis?

In these instances, workers can use their communication skills to determine what is impacting the person's ability to receive or give information and demonstrate that they are interested and care about the person's wellbeing. They can also ask clients about their needs, concerns and condition.

> For more information about communicating with someone with a mental health condition, see: aspirelr.link/nsw-communication-mental-health

Age and communication

Older people may have difficulties with communication because of:

• age-related hearing impairment

• age-related visual impairment

• memory loss.

It is also important to be especially aware of respectful communication when working with older people. For example, talk with the person rather than talking at them and avoid pet names such as 'darling' and 'dear.'

Watch the following video on 'Elderspeak.' Learn about what 'elderspeak' actually means, the effect it has on clients and the techniques workers can use instead to treat older clients with respect and dignity.

> ## Video: How to address older people
>
> Watch this video on 'elderspeak - How do you address older people?':
> aspirelr.link/youtube-elderspeak
>
> Think about the comments made in the video about 'elderspeak'– how it can be disrespectful and degrading to older people. Have you ever used this type of speaking with an older person? Have you seen others use elderspeak?

For people living with dementia, the challenges of communication can include:

• difficulty finding words

• a reduced vocabulary

• difficulty understanding what someone is saying.

When communicating with people who are living with dementia, it is important to have a caring and supportive approach that respects the needs and rights of the person as well as their cultural background. You can maximise engagement with people with dementia by using verbal and nonverbal strategies.

> For more information about communicating with someone with dementia, see:
> aspirelr.link/communicating-dementia

> For more information about communicating with older people from diverse cultural backgrounds see Diversicare's Little Book of Cultural Tips:
> aspirelr.link/diversicare-cultural-tips

Example

Communicate service information in a manner that is clear and easily understood

Roger works as a community support worker and is meeting with Mrs Hajek to discuss some important information about the services his organisation provides.

Roger knows that receiving a lot of information all at once can be confusing. He uses clear communication and avoids using jargon when he talks to Mrs Hajek. He explains that the services his organisation provides are free, can be provided weekly and includes home assistance with cleaning and shopping.

Roger leaves a brochure that Mrs Hajek can read later to review the information he has provided. He will follow up the following week about services Mrs Hajek may be interestewd in knowing more about.

Practice Task 2

Question 1

Which of the following strategies aid clear communication? Tick all that apply.

❑ Make sure that the idea or main purpose of the message is clear.

❑ Provide detailed information that explains each point at great length.

❑ Make sure the information is the most correct and up-to-date version of the information.

❑ Ensure that the information is logical and relevant to the main point of the message and follows a reasonable sequence.

❑ Make sure to provide all of the important information that is required to make an informed decision.

Question 2

Provide an example of when asking a client's family member to interpret a conversation between a worker and their client might create a legal and ethical issue.

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. When arranging an interpreter, the person's country of birth should be used to indicate their preferred language.	Yes / No
b. By using empathy and asking questions, workers will gain a better understanding of how to communicate in a culturally acceptable way with different clients.	Yes / No
c. Using touch is an important form of non-verbal communication across many cultures and religions.	Yes / No
d. Communicating with clients when we are feeling upset or anxious can make them think they are the cause of these negative emotions.	Yes / No
e. Communicating with clients with a health condition is only problematic if they have a serious medical condition such as a stroke or take multiple medications.	Yes / No

Question 4

Match each communication strategy to the individuals they would most benefit.

People with a speech impairment	Face the person directly and speak clearly. Do not shout or speak slowly. If possible, use written communication, actions and visual cues.
People with physical disabilities	If you cannot understand the person, repeat the statement or question, and give the person time to respond. Watch for nonverbal cues and body language to help with understanding.
People who are hard-of-hearing	Understand that this person may not be able to tell you what they need and make sure the person feels safe and feels no pressure to rush a response.
People with a cognitive impairment	If someone uses a wheelchair, meet the person at eye-level for an extended conversation. Avoid leaning on, pushing or handling a wheelchair.

1C Listen to requests, confirm understanding, clarify meaning and respond appropriately

When we communicate with each other, each person brings different knowledge, experience and feelings to the exchange. These differences can influence how each person communicates and interprets information.

Good communication involves verbal and nonverbal features. Your body language can communicate to someone that you are listening to them, that you care about them and that you believe that what they have to say is important.

By actively listening to requests and clarifying meanings you will be able to get the most out of each exchange and respond appropriately every time.

Active listening

Typically, when we listen to what someone is saying we only take in and comprehend a small portion of what they are saying. When someone is actively listening, they are not distracted by what is going on around them; instead, they concentrate on the speaker and what he/she is saying.

Active listening
Concentrated listening and non-verbal encouragement indicating an understanding of what is being said.

Active listening:

• encourages the respondent to keep talking

• indicates that you are paying attention and interested in what they are saying

• establishes two-way communication.

This involves five key strategies, each of which can be demonstrated through various means of verbal and nonverbal communication:

Strategy	How to demonstrate this when communicating with someone
Pay attention	• Face the person you are talking to. • Give the person your undivided attention. • Don't look at your phone, watch or other people in the room.
Show you are listening	• Be aware of your body language – for example, crossed arms can be read as judgement. • Use brief verbal comments to encourage the person (e.g. 'Okay', 'I see', 'Yes, I understand what you're saying'). • Use facial expressions to encourage the person, such as nodding and smiling; this nonverbal form of communication tells the person: 'You have my attention, and I am focused on you'.

Strategy	How to demonstrate this when communicating with someone
Provide feedback	• Reflect on what the person has said by paraphrasing. • Summarise the message in your own words. • Clarify meaning by asking related, relevant, follow-up questions.
Respond appropriately	• Try not to interrupt the person unnecessarily. • Respond openly and honestly. • Treat the other person respectfully; for example, you could soften your response with phrases like, 'It sounds like you...', 'What I hear you saying is...'. • If the person is expressing multiple feelings, focus on the last or most prominent one.
Defer judgement	• Demonstrate empathy and a non-judgemental attitude. • Be aware of any judgements you are making as the person speaks – if you make a biased judgement, you are unlikely to really hear what they are saying. • Avoid making assumptions. • Give the person time to pause and complete what they are saying; if you do need to stop someone to give other people a chance to speak, do it as sensitively and respectfully as possible.

Adapted from: https://www.adelaide.edu.au/writingcentre/sites/default/files/docs/learningguide-activelistening.pdf

Confirm correct interpretation

Communication is a two-way process; a message is passed from one person and received and interpreted by another.

Sometimes a person's interpretation of a message does not reflect the intention of the person who communicated it. For example, you might say to a friend, 'I'm so far behind with my work today because my wife keeps calling me.' Your friend might interpret what you have said to mean you want your wife to stop calling you at work, when your intention was simply to blow off steam about a busy day.

There are many factors outside of your control that can influence how another person interprets what you are communicating, such as competing demands, insufficient knowledge, emotional states or bias. Although you cannot control how another person interprets the message you are communicating, you can clarify their understanding to ensure their interpretation matches your intention.

You can check that someone has understood the message you are trying to communicate by asking them questions. Here are some examples of questions you can ask to check understanding.

Questions to check understanding
'Can you please tell me what you just heard?'
'Can you please repeat what I just told you, in your own words?'
'What does what I just said mean to you?'
'What steps are you going to take next?'
'How will you explain that to the others?'
'Can you please describe the steps in the process that I just outlined?'
'I just want to make sure I covered everything. Can you please summarise what I just told you?'

Example
Confirm understanding

Christos is the manager of a service that provides phone-based and online services to adults with mental health difficulties. He has just been told that the organisation's server has been hacked and the online system will be unavailable for a twenty-four-hour period.

Christos immediately calls each of his team leaders to share the information. He confirms their understanding by asking a series of questions:

- 'Just to make sure I've covered everything, can you summarise what I've just said to you in your own words?'

- 'How will you explain what I just told you to your team?'

- 'What steps are you going to take next?'

Clarifying meaning

Clarification
Checking to make sure a person has correctly understood what another person is communicating.

Clarification helps to reduce misunderstanding and shows the speaker that the listener is interested in what they are saying and supports their needs. For example, when Gloria tells Shanti that she is getting cold outside and is ready to go inside to have some lunch, Shanti clarifies what Gloria says by saying, "So you're getting cold and you're ready to go inside for lunch now, Gloria?"

Clarification is especially important when a person has difficulties with communication, such as a speech impediment, or there are barriers to communication, such as language differences (e.g., one person speaks English, the other person speaks Arabic).

The following information provides different clarification methods and examples of their use.

Open-ended questions
Open-ended questions cannot be answered with a simple 'yes' or 'no' answer. They can be used to gather more information and give the speaker an opportunity to fill in missing details. **Examples:** • 'How have you been feeling today?' • 'What's happening for you at the moment?' • 'What else can I do to help?'
Closed questions
Sometimes people you suport will have limited ability to communicate beyond basic responses. Asking a series of 'yes' or 'no' questions may help clarify what the person wants and needs. **Examples:** • 'Do you want me to do this?' • 'Would you like to go there?' • 'Would you like something to eat?' • 'Are you uncomfortable?'
Summary
Once you feel that you have understood the message you should repeat a summary of the key points back to the speaker to confirm the understanding is correct. It is important that you are willing to listen and be corrected if you have misunderstood. **Example:** • Jamie: 'So what I'm hearing is that you've run out of medication, and you need me to go to the chemist to pick up some more?'   Emily: 'Yes.'

Respond appropriately

Sometimes the communications you have with other people will require follow-up action. For example, if Sharon says, "Can you please arrange a family meeting with my daughter," the appropriate response could be, "Yes, I can do that Sharon," or "No, that's not possible right now, Sharon."

In other cases, you will need to clarify the follow up action. For example, if Sharon says, "I don't like the way my daughter talks to me", she may be communicating (a) the need for empathy and acknowledgement or (b) that she wants you to arrange a family meeting with her daughter to discuss this problem. In this situation – where it is not clear what the appropriate response would be – you need to clarify the intention behind Sharon's statement.

When you respond to what people are communicating to you, you need to ensure your body language is consistent with what you are saying. Otherwise, the message can be confusing. For example, if someone is telling you about a problem and you respond by saying, 'That must be really hard for you', but you're smirking and rolling your eyes as you say it, the message the other person receives will probably be, 'I don't think that's an important problem and I'm just agreeing so that you stop talking'. Both verbal and nonverbal communication needs to be respectful and clear.

Practice Task 3

Question 1

Which of the following questions confirm a person's understanding? Tick all that apply.

❑ 'Can you please tell me what you just heard?'

❑ 'Did you understand what I just said?'

❑ 'In your own words, can you please repeat what I told you?'

❑ 'How will you explain this information to the others?'

❑ 'Can you please summarise what I just told you?'

Question 2

Number the steps from 1 to 5 in the order you would follow when actively listening and responding.

	Respond appropriately and with respect by being open and honest and using phrases like 'What I hear you say is…'.
	Complete follow up actions if required. Sometimes this may involve communicating that you are unable to complete the action right away; other times, it might involve communicating with others in a different mode or format.
	Pay attention by facing the person you are communicating with and giving them your undivided attention.
	Show you are listening by using facial expressions and body language that encourages the person to continue communicating, e.g., nodding, smiling.
	Provide feedback by summarising or paraphrasing what the person has said.

1D Exchange information clearly and confidentially

Workers in health and community services often need to share information with other professionals and agencies.

There are a range of circumstances where workers may need to share information with other professionals and agencies. For example, a client may require support outside the scope of a service, or a client may be transitioning to a different agency.

Regardless of the reason for sharing information with other agencies, it is important to be aware of the relevant ethical, privacy, confidentiality and legal considerations. The way in which you handle and pass on a person's information will have a direct impact on that person's access to and quality of care.

Privacy, confidentiality and disclosure

When you are providing support to someone, you will often need to work with a range of other professionals and agencies. This may require you to share information about a client with another agency. Here are some examples of what information might be shared.

The information that is shared between agencies may include:
• contact details (address, phone number)
• incident reports
• individual plans and goals
• information about a client's specific needs.

Before you share any information about a person with another agency, you must be aware of the legislation regarding **privacy**, **confidentiality** and **disclosure**.

Australia's *Privacy Act 1988* (Cth) outlines the legal requirements of agencies and organisations for handling personal information, including how that information is:

• collected   • used   • disclosed   • stored.

In addition to the Commonwealth law regarding privacy, most Australian states and territories have their own privacy legislation. You should be familiar with the main points in the legislation that governs the state or territory you work in.

Privacy
A fundamental human right designed to protect people from intrusion and to selectively express themselves.

Confidentiality
The principle of keeping personal information private, unless the person consents to sharing the information with other parties.

Disclosure
The act of sharing or releasing private or personal information.

For more information about privacy rights in Australia, see:
aspirelr.link/oaic-privacy-rights

For more information about the Privacy Act, see: aspirelr.link/oaic-privacy-act

Any organisation subject to Commonwealth privacy law must have a privacy policy that is clearly written and up-to-date. It must be readily available to staff and may be included in organisational policies or displayed in a public area e.g., a poster in an office.

Collecting and using personal information

Privacy and confidentiality are critical to work in the community services sector. Workers will often have access to privileged and sensitive information about the people they work with. Laws regarding privacy and confidentiality are designed to protect people's dignity, rights and wellbeing.

According to Australia's privacy laws, there are different types of personal information that can be collected about a person.

- **Personal information** includes a person's name, address, contact details (such as phone number or email), date of birth and gender.

- **Sensitive information** includes information such as a person's racial or ethnic origin, political opinions, religious or philosophical beliefs, sexual preferences or practices, or criminal record.

- **Health information** is sensitive information about a person's physical and mental health, disability, health preferences, use of health services and genetics.

Within the Act, a higher level of protection is given to sensitive information and health information. For example, an organisation must not collect sensitive information from a person unless they have consented to it (some exceptions apply).

For more information about privacy for health service providers, see:
aspirelr.link/oaic-health-privacy

Tips for maintaining privacy and confidentiality
Do not discuss details about a client to a colleague who is not involved in that client's support.
Always follow your organisation's procedures for obtaining consent to collect and share personal and sensitive information.
Do not share personal details about a co-worker without their consent.
Tell clients why you are collecting information about them.
Store information about clients in a secure place, such as locked filing cabinets and / or password-protected electronic files.

Storing information

Organisations must take reasonable steps to protect the personal and sensitive information it stores. Organisations must ensure that the personal and sensitive information they are storing is:

- not misused
- interfered with
- lost
- accessed by an unauthorised person
- modified
- disclosed.

Tips for protecting stored personal and sensitive information include:

- using passwords to protect information that is stored electronically so only authorised staff can access it
- keeping hardcopy personal information in a locked file or cabinet
- making sure employees log off when they walk away from their computer
- placing computer screens out of the view of people who are not authorised to view them, especially visitors to an organisation.

Consent

Informed **consent** requires that a person:

- be provided with adequate information
- understands that information
- understands the consequences of their decision
- is able to make a decision freely without pressure from another person.

In the health and community services context, informed consent is associated with decisions regarding the provision of care. When a person provides informed consent about the provision of care, they understand the risks and benefits associated with that decision.

Consent
To give permission or to agree to something.

Most community organisations use a consent form when seeking consent from a client to share information with another agency. The format of consent forms will vary between agencies.

Example
Consent form

Here is an example of a consent form used by a disability service.

Baymore Disability Services

Consent to disclose information

I _Jacqueline Foster_ (full name of client or representative) of

27 Vasey Court, Wynvale SA, 5098 (address)

consent to Baymore Disability Services disclosing information pertaining to me to

Outer South Respite Service (name of agency) for the purpose of

referral/application for respite funding.

Specific details of information (if required):

Nature of disability

Personal care needs/supports and equipment required

Contact details

Current home situation

Financial details (including current disability packages/funding)

Limitations (if required):

None

Client: _Jacqueline Foster_ (name) _Jacqueline Foster_ (signature)

20 December 2020 (date)

Witness: _Kaye Green_ (name _K Green_ (signature)

20 December 2020 (date)

Some organisations also have a standard referral document that their staff use when making a referral to another service.

Information you might need to incorporate in a referral document includes information about services the client is currently receiving or involved with.

Exchange information clearly

Organisations have standard processes and procedures for exchanging information. It is important to find out what these processes and procedures are in your workplace.

In health settings, workers apply the ISOBAR framework when handing over clinical information. This is a multi-step process that requires background information about the worker and the client/individual and forward planning regarding the provision of care.

The table below describes the elements of the ISOBAR tool. (The table is an adaptation of the ISOBAR tool; if you are required to use the tool in a clinical setting, please refer to https://www.safetyandquality.gov.au/our-work/communicating-safety/clinical-handover/implementation-toolkit-clinical-handover-improvement).

Although the ISOBAR tool has been designed for health services, the principles can be applied in any setting where agencies share information about individual patients or clients.

I	Identify	Introduce yourself (role/job) and the individual receiving support (name, date of birth, age, gender).
S	Situation	Briefly explain the reason for the information exchange, including relevant details about the person's main issues and service needs.
O	Observations	Pass on any clinically relevant assessments or objective information that will assist the other person to better meet the needs of the individual.
B	Background	Provide details on any relevant background information.
A	Agree on a plan	State what you would like to happen as a result of the information exchange.
R	Responsibility/risk management	Confirm shared understanding, clarify tasks.

Example
Exchange information clearly, in a timely manner and according to confidentiality procedures

Po-shun works at a community health service and regularly provides written and verbal referrals to specialists in the team. This week Po-shun rang the podiatrist (Jenna) to arrange for Mrs Elliot to access the podiatry service. Po-shun handed Mrs Elliot's information over in the following exchange:

'Hello Jenna, this is Po-shun. I'm calling about an individual who already accesses our service. The person's name is Mrs Cynthia Elliot.

Mrs Elliot is a diabetic and I noticed this morning that she is developing ulcers on her feet that will require a podiatry review.

I will also send through her current medical history and medication list.

I would like to arrange an appointment for her to see you as soon as possible.'

Practice Task 4

Question 1

Which of the following actions help maintain a client's privacy and confidentiality when exchanging information in the workplace? Tick all that apply.

❑ Not discussing personal details of an individual to staff who are not involved in dealing directly with that person

❑ Always following organisational procedures for obtaining written consent to disclose personal information

❑ Having a client present when discussing their sensitive information with colleagues not involved in their support

❑ Keeping personal information in locked filing cabinets and password-protected electronic files

❑ Ensuring you have a valid reason for collecting, storing or distributing any personal information

Question 2

Number the steps from 1 to 6 in the order you would follow to ensure that you exchange information clearly and in a timely manner.

	Provide details on any relevant background information.	
	Provide a summary of the main points of the information exchanged.	
	Introduce yourself (role/job) and the individual (name, date of birth, age, gender).	
	Pass on any clinically relevant assessments or objective information that will assist the other person to better meet the needs of the individual.	
	Briefly explain the reason for the information exchange, including relevant details about the person's main issues and service needs.	
	State what you would like to happen as a result of the information exchange.	

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. Informed consent means an individual is provided with information about what they are agreeing to; but, they don't need to understand the consequences of consenting.	Yes / No
b. To give consent, an individual must be able to make the decision freely without pressure from another person.	Yes / No
c. When an individual provides informed consent, they understand the risks and benefits of that decision.	Yes / No
d. Community organisations typically use a consent form to obtain consent from an individual to share their information with other agencies/organisations.	Yes / No
e. Consent forms require individuals to sign away their right to withdrawing consent at any given moment.	Yes / No

Summary

- Communication always involves a sender, a message and a receiver.

- A range of factors can influence communication including language, culture and emotions (of the sender or the receiver).

- Nonverbal communication is as important to understanding a message as verbal communication.

- Respect is a critical foundation of health and community services work.

- Clear communication is concise, accurate, logical, complete and has an obvious purpose.

- When tailoring communication to meet different people's needs, you need to consider the method of communication, the content of communication and the frequency of communication.

- Active listening involves making a conscious effort to hear what another person is saying.

- Workers who collect, use, share or store information about clients need to be aware of the laws regarding privacy, confidentiality and disclosure.

Learning Checkpoint 1

Communicate effectively with people

Part A

1. Which of the following statements are correct? Select yes or no for each one.

a. Incorrect pronunciation can change the meaning of a message and lead to misunderstanding, confusion and sometimes even offense.	Yes / No
b. Word pronunciation is less essential when communicating with an audience that uses English as a second language.	Yes / No
c. Misuse of grammar can change the meaning of a sentence and communicate an incorrect message.	Yes / No
d. It is important to be aware that for population groups who have difficulty with hearing and comprehension, the faster the speech the less they will understand and the more confused and distressed they may become.	Yes / No
e. Beyond the words actually spoken, the speed of verbal communication does not communicate anything else.	Yes / No

2. Which of the following verbal and nonverbal communication techniques demonstrate respect to the speaker and show that the listener is paying attention? Tick all that apply.

❑ Summarising what the speaker has said

❑ Simply nodding and saying 'yes' to everything the speaker says

❑ Using affirmations to signal to the speaker that they are being understood and to continue

❑ Smiling, nodding or facing the speaker reinforces the nonverbal message, 'you have my attention, and I am focused on you'

❑ Fidgeting and glancing around the room

3. Match each communication technique to its definition.

Reflections	Requires listeners to produce more than a 'yes' or 'no' response. In fact, they require listeners to generate more detailed and nuanced responses.
Open-ended questions	Requires listeners to provide a supportive statement which demonstrates understanding and appreciation.
Summaries	Listeners outline the main points of the communication to ensure that they have not missed any important information. This also confirms to the speaker that the information they have shared has been accurately interpreted.
Affirmations	Listeners make a statement that confirms their interpretation of a message. This response also conveys empathy and understanding towards the speaker.

4. List three ways communication can be tailored to address individuals who are less proficient in English.

5. Outline any legal and ethical considerations that need to be taken into account when arranging an interpreter or translation services.

Part B

Read the case study, then answer the questions that follow.

> ## Case study
>
> Rhonda works in the community as part of a team that assists people with activities of daily living and personal care tasks. As part of her role Rhonda needs to communicate service information to the people she supports and their significant others. Every week Rhonda assists an eighty-year-old man named Jack with his showering and grooming. Jack takes several different medications to help manage his depression and diabetes. At times this can make Jack feel confused and tired, especially if he has slept poorly the night before.
>
> Jack and his family often get confused about the services he receives and ask questions about the billing. Jack's daughter, who is hard of hearing, is often confused by the conflicting service information she receives. To decrease the confusion Rhonda has arranged a small family meeting to go over the service information and address their concerns.

1. What are the three possible communication models that Rhonda could apply to her communication?

2. Which communication mode should Rhonda apply to her communication?

3. What are the three possible communication types that Rhonda could apply to the family meeting to ensure that the service information she provides is clearly understood by all?

4. Which of the following communication strategies should Rhonda use to address Jack's cultural and religious beliefs? Tick all that apply.

❑ Using empathy to try to understand Jack's experience

❑ Working towards establishing a rapport and developing a trusting relationship

❑ Checking if she is unsure what is acceptable

❑ Making assumptions about his needs and ways to interact with him based on his culture and religion

❑ Treating Jack as an individual with individual needs regardless of his culture or religion

5. Jack's son and daughter are feeling anxious. Suggest two ways their emotional state can affect communication at the family meeting.

6. List three ways Rhonda could improve her communication with Jack's daughter who has a hearing impairment.

7. How might Jack's health and age influence how and when Rhonda chooses to communicate with him?

8. List three ways Rhonda can tailor service information to Jack and his family.

9. Which of the following questions could Rhonda ask to check that the service information has been correctly understood? Tick all that apply.

❑ 'Will you please tell me what you just heard?'

❑ 'Will you please repeat that back to me in your own words?'

❑ 'What does this information mean to you?'

❑ 'What steps will you take next?'

❑ 'Did I speak clearly enough?'

10. List three active listening techniques Rhonda could use when listening and responding to requests from Jack's family.

11. What clarification techniques could Rhonda use to ensure that she has understood what Jack's family is trying to communicate?

12. Which of the following statements are correct? Select yes or no for each one.

a. Rhonda can only disclose information about Jack to his family if she has his informed consent.	Yes / No
b. Under privacy laws, anyone in Rhonda's organisation is able to view Jack's medical and health information.	Yes / No
c. If Jack is experiencing confusion due to his medication, he is able to provide informed consent.	Yes / No

13. After speaking with Jack and his family, Rhonda identifies an additional service that can assist Jack. List four pieces of information Rhonda will need to communicate to this service to exchange information clearly and in a timely manner on Jack's behalf.

Topic 2: Collaborate with colleagues

2A Clarify and agree on time frames for carrying out workplace instructions

2B Identify lines of communication between your organisation and other services

2C Use industry terminology correctly

2D Follow communication protocols when interacting with others
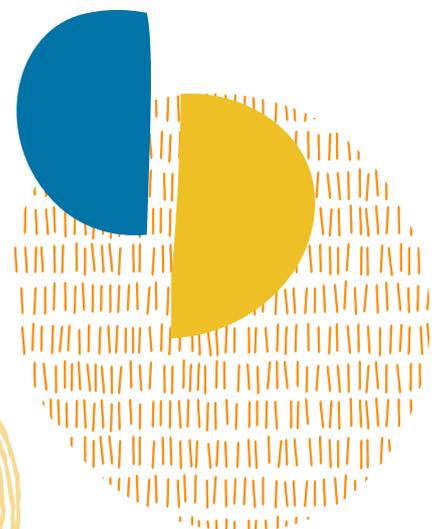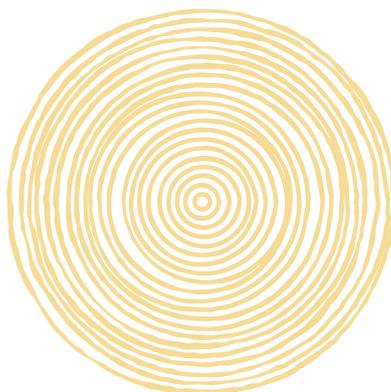
2A Clarify and agree on time frames for carrying out workplace instructions

The ability of staff to listen to, clarify and agree on workplace instructions is key to an efficient and effective workplace.

Breakdowns in communication caused by poor listening or a failure to clarify instructions can mean that important tasks are not done correctly and completed on time. Where multiple people are involved in completing a task, the failure of one person to follow instructions can jeopardise the work of the team.

It is important, therefore, for workers in health and community services to listen carefully, and clarify and agree upon time frames when they are given instructions.

Listening and clarifying

The first step in understanding workplace instructions is to actively listen and the second step is to clarify your understanding.

For example, if your manager is providing you with instructions on how to fill out a template, make sure you:

- give her your undivided attention – don't look at your phone or wave to people as they walk by

- use basic words and phrases to show that you are listening to her (e.g., "Okay," "I see")

- try not to interrupt her unnecessarily, and ask relevant questions when she has finished talking.

The next step is to clarify the message before you begin the task. Following on from the previous example, this might involve:

- asking open ended questions (e.g., 'What else do I need to know about submitting the template?"

- summarising the key points back to your manager to confirm you understood her correctly.

The third and final step for carrying out workplace instructions is to agree upon the time frame.

Agreeing on time frames

When you are given instructions to undertake a task, you will need to reach an agreement about the length of time required to complete the task.

Both you and the person providing the instructions need to be realistic about what can be achieved in a set period of time. Overestimating the time required to undertake a task could result in inefficiencies, whereas underestimating the time required to complete a task can create unnecessary stress for you and others in the workplace.

Here are some important factors that should be taken into consideration when agreeing on time frames.

Time frame considerations
• The number of people who are helping with the task – some tasks can be done more quickly if multiple people are helping)
• Competing priorities, such as any other work you need to complete
• When you need to start the task
• When the task needs to be finished by
• Availability of resources – do you have all the resources necessary to complete the task or do they need to be purchased, borrowed or ordered?

Example
Listen to, clarify and agree on time frames for carrying out workplace instructions

Andrew and Petalyn are area managers in a state-wide community services organisation. Last week their manager, Aitor, called them both to a meeting and asked them to assist with developing and rolling out a new service-wide policy. Aitor explained that the policy would need to be rolled out within two months.

Petalyn actively listened to Aitor while he was speaking and then clarified her duties by summarising back the main points of the conversation.

Andrew explained to Aitor that he had multiple other projects he needed to finish in the next two months. Given these competing demands, Andrew explained, he didn't feel that he could commit to anything else within the time frame Aitor had outlined.

Aitor, Petalyn and Andrew then worked together to set a more realistic time frame for each stage of the development and roll-out of the policy.

Practice Task 5

Question 1

Which of the following strategies could be used to listen to and clarify workplace instructions? Tick all that apply.

❑ Making a list of what you need to do next

❑ Asking open ended questions relevant to the information received

❑ Repeating back what the speaker said in your own words

❑ Summarising the key points back to the speaker to confirm you understood correctly

❑ Asking the speaker to put the information they delivered in writing

Question 2

List three factors that can affect agreement on work task time frames.

2B Identify lines of communication between your organisation and other services

Strong connections between community services and other organisations, such as health services, benefit people within the community.

When community services organisations have strong connections with other organisations, it means that the people accessing community services can access more holistic forms of support.

The links between health and social circumstances mean that there are especially strong connections between health and community services. People's health is affected by their social and economic circumstances, and vice versa. For example, people who are on a low income may find it difficult to afford nutritious food, which can impact upon their health. Similarly, a person with poor health and mobility issues may find it difficult to access nutritious food.

Each organisation will have their own processes and procedures for communicating with other organisations and services.

Service functions, structures and relationships

Australia's health and community services systems are complex and diverse.

It is important to understand the diverse range of services that are provided by health and community services systems. An understanding of both these systems will help you meet the diverse needs of individuals and communities.

The following table describes some of the services provided by Australia's health and community services systems.

Primary health care	• The first port of call for most people when they access a health service. Primary health care services do not require a referral. • Services are provided by a range of professionals including GPs, nurses, allied health professionals, community pharmacists and Aboriginal and Torres Strait Islander health workers. • Primary health care can also involve health promotion and disease prevention. • Examples of health promotion initiatives include skin cancer awareness campaigns, immunisation programs and domestic violence education.
Specialist services (also known as 'secondary' health care services)	• People with complex health conditions are often referred to specialist services by a primary health care provider. • The professionals who provide specialist services include surgeons, psychiatrists, obstetricians and gynaecologists. • Specialist services also include pathology and imaging.
Hospitals	• Hospitals provide a range of services to admitted and non-admitted patients. Some of these services are provided over a brief period (e.g., acute care), whereas others are provided over a longer term (e.g., rehabilitation). Psychiatric hospitals specialise in care for people with mental health difficulties.
Aged care	• Provides support for older people in their own homes, in the community and within specific residential facilities. • Services include residential services, day programs, respite, home-based services, advocacy, case management, leisure and recreation.
Disability services	• Provide services to people with physical disabilities, neurological disabilities, intellectual disabilities, sensory disabilities and autism spectrum disorder. • Services include case management, accommodation, employment, day programs, independent living skills programs, recreation, respite, advocacy and early intervention.
Support services for people using alcohol and other drugs	• Provide support for people who are impacted by drugs and alcohol. • Services include counselling, residential rehabilitation, case management, accommodation, harm-reduction supports, information, advocacy, crisis intervention, outreach and youth-specific services.
Family and domestic violence support services	• Provide services and support to families affected by domestic violence. Support may be available to individuals who have been violent. • Services include emergency housing, legal services, counselling and court support services.

Mental health services	• Provide services to people with mental illness including, but not limited to, schizophrenia, major depression, anorexia and bulimia, bipolar and obsessive-compulsive disorders, and anxiety disorders. • Services include case management, group programs, personal support, accommodation, independent living skills, advocacy, crisis assessment, mobile and residential care, and early intervention.
Housing	• Long-term and short-term housing support for people of different circumstances. • Services include emergency and transition housing, bond relief, help to secure rental housing and rental assistance, advocacy, access to public housing and accessible housing for people with disabilities.
Youth work	• Provides information and support to young people. The age limits for what is defined as 'youth' varies between agencies and departments. • Services include accommodation, case management, independent living skills, information and training.
Children's services	• Provides care for children in a range of settings from birth until the end of primary school. • Services include long day care, family day care and out-of-school-hours care.
Child protection	• Provides intervention to support children (and their families) who are at risk of abuse and neglect. • Services include foster care, adoption, group residential care, supervised access, case management, assessment and therapeutic services.
Employment services	• Assists job seekers (in particular individuals with barriers to employment) to be job ready and to secure employment. • Services include case management, job readiness and pre-vocational training, support with job seeking, support for parents returning to work, and apprenticeships.

Sources: https://www.aihw.gov.au/getmedia/63fe0895-b306-4375-95ff-162149ffc34b/aihw-aus-221-chapter-2-1.pdf.aspx

Here are some key features of Australia's health and community services systems.

Features	Description
Health services	
Funding	All levels of government (Commonwealth, state/territory, local) are involved in funding Australia's health system. Other stakeholders who fund the health system include: • non-government organisations • private health insurers and • individuals who pay for products and services.
Responsibility	All levels of government share responsibility for Australia's health care system including Commonwealth, state and territory and local government. Some health services are operated by the private sector.
Stakeholders	• Individuals ('patients') who use health services to meet their health needs • Government health departments are involved in planning and developing policies • Private health insurers provide people with options to manage their health care expenses • Consumer and advocacy groups protect the interests of individuals who use health services • Not-for-profit organisations support health services and consumers by, for example, raising awareness of health issues and fundraising for research
Other important features	• Medicare is Australia's universal public health insurance scheme. Medicare cardholders can access fee-free treatment as public patients in public hospitals. Medicare also covers a portion of the cost of some medical services, procedures and pharmaceuticals.
Community services	
Funding	Community services are funded by government (at the local, state and federal level) as well by philanthropic organisations, trusts, grants and charitable donations.
Responsibility	The community services sector comprises government and non-government services to meet a range of diverse needs including aged care and disability support.

Stakeholders	• Individuals who use community services
	• Government departments that plan and deliver services
	• Consumer and advocacy groups that protect the interests of people who use community services
	• Not-for-profit organisations that plan and deliver community services and support services through awareness-raising and fundraising efforts
Other important features	• A model of care describes the way a community service provides and delivers care. There are many different models of care within the community services sector because different groups of people have different care needs and one model cannot cater to every group's needs.
	Examples of models of care include:
	– transitional care
	– shared care
	– family-based care
	– preadmission clinics and planning
	– multidisciplinary care
	– integrated mental health services.
	• Support services play an important role in the community services sector in enabling people to be more independent and to achieve a higher quality of life. Support services play many different roles depending on the work environment and the needs of the individual. Support services provide valuable emotional and practical support to people accessing care.
	• The role of a support services worker may include:
	– identifying individual support needs
	– breaking down tasks to enable independence and participation
	– making appointments and providing transport
	– providing emotional support to people and their families
	– providing memory support to people with dementia or memory loss
	– providing physical assistance with personal care and activities of daily living.

Principles underpinning community services work

The community services system has as a collaborative and holistic approach to service provision. Service providers are encouraged to work in a way that recognises and respects people's individual goals and choices.

The table below outlines some other important principles underpinning community services work.

| Rights-based Situates the rights of service users at the centre of service provision, with a focus on accessibility, autonomy and equity. | **Rights-based** service delivery | A rights-based approach to service delivery situates the rights of service users at the centre of service provision, with a focus on accessibility, autonomy and equity.
 • 'Autonomy' refers to a person's right to make their own decisions about their life.
 • 'Accessibility' means that services are planned, managed and delivered in a way that gives everyone the same opportunity to find and use services.
 • 'Equity' means that disadvantaged people and groups receive beneficial treatment so they can enjoy the same rights as others.

 Source: https://humanrights.gov.au/about/news/speeches/access-and-equity-human-rights-practice#i |
| Person-centred Getting to know each person and taking time to learn about their individual preferences, needs and goals. | **Person-centred** service delivery | A person-centred approach means seeing the person as the expert in their own life.

 A person-centred approach means getting to know each person and taking time to learn about their individual preferences, needs and goals. Every individual is an expert in their own life, with a unique history, outlook and hopes for the future.

 The key principles of a person-centred approach are:
 • respecting individuality
 • focusing on the whole person, rather than their perceived problems
 • working with respect, compassion and empathy
 • collaborating with others
 • empowering people
 • being led by the person. |

Source: https://www.qualityhealthcare.com.au/post/2019/09/17/what-is-person-centred-support

Multi-disciplinary approaches and relationships between health and community services

A multi-disciplinary approach involves combining the knowledge and skills of many different workers from different disciplines to meet a person's holistic needs.

This approach identifies that some people have diverse needs that cannot be met by a single service provider or professional.

Professionals in health and community services often work together to meet individual and community needs. Here are some examples of collaborative relationships between different members of the health and community service workforces:

Community hubs for mothers with young children that offer a range of different services, such as child and maternal health, occasional care and parenting programs, in a single place.
See: aspirelr.link/tas-education-centres

Early intervention services for young children with disabilities that use teams of professionals to provide holistic supports to families, such as social workers, early childhood educators and allied health professionals.

See: aspirelr.link/saya

An alcohol and drug services staffed by medical professionals (who specialise in rehabilitation) that works collaboratively with a housing service to arrange housing for clients.

See: aspirelr.link/quin-house

The relationship between your organisation and other health and community services may be outlined in your organisation's policies and procedures. However, some relationships and connections between services are less formal. For example, the manager of a childcare centre might develop a strong professional relationship with a speech pathologist, which is the basis for a relationship between two services.

Whether the relationship is formal or informal, the regulations regarding privacy and confidentiality still apply.

Video: Working in partnership

Watch the video *Working in partnership: KidsMatter schools and health and community services*: aspirelr.link/working-in-partnership

Can you identify the various health and community services that work together to provide support for children? Pay particular attention to the different support they can provide children and the importance of communication in providing ongoing support.

Roles and responsibilities in a team

It is important that people are aware of how their role and responsibilities directly impact the provision of care and how they contribute to the overall team.

Here are examples of common roles and responsibilities in a health or community services team.

Supervisor
A supervisor should support the individual members of their team through delegation of tasks, feedback, supervision, communicating changes in the workplace and enforcing compliance with workplace procedures.

Carers
Carers include people who are employed to provide care, and family members, friends and volunteers who play a role in the provision of care. Carers work collaboratively with health professionals, sharing important first-hand knowledge of a person's care needs.

Support workers
Support workers provide assistance to people to enable them to be more independent and to achieve a higher quality of life. Support workers work in collaboration with health professionals, sharing important first-hand knowledge of a person's support needs.

Administration officers
Administration officers play an important role in coordinating services, collecting and storing service data and often providing the first point of contact for people who need to access a service.

Digital communications

Organisations and professionals in health and community services use a range of different digital technologies to communicate with clients, colleagues and other service providers.

Here are some examples of digital technologies and digital media used in these sectors for internal and external communication.

Email	• Emails are an easy, efficient way to communicate with internal and external stakeholders. Email communication is generally a direct and simple form of communication, and it is often considered more informal than written documents. However, emails identifying a professional organisation should be written using formal, polite language. • Most forms of information can be sent by email, including written documentation, graphics, images and tables. • Remember that you represent an organisation when sending a work email, so always be respectful and polite. Check your spelling and ensure all content is correct. You should also check to ensure you are sending to the correct email address and that only people privy to the information will see the content.
Web communication	• Organisations use websites to provide information to clients, professionals and other organisations about the services they offer. • Your organisation's website will display company information, contact information, statement of policies, as well as the company's vision, mission and key outcomes; it may also provide resource links. • A website is like a business card for your organisation, so it must accurately reflect your organisation in full. Details must be up to date and relevant.

Social media	• Social media helps organisatons build an online community and reach a broad range of people. Social media platforms include Facebook, Twitter and Instagram. Social media is primarily about relationship building. Again, you need to ensure that all information shared on social media accurately reflects your organisation. • Avoid sharing images of the people you support unless you have specifically asked for permission. Doing so without permission is a breach of privacy.
Podcasts	• Podcasts are digital audio files which are distributed over the internet to subscribers who download and listen to the content. Podcasts are typically presented as a series, with individual episodes presented on a regular basis. • For example, the Emerging Minds initiative produces podcasts relating to child mental health designed for health and community service professionals and families. See aspirelr.link/emerging-minds-podcast
Videos	• Videos are a medium used to record and watch moving images. They can be accessed via digital storage media (e.g., DVDs), streamed from the internet, or downloaded from the internet and watched on a personal device. • Most smartphones can record video footage, which has made video production much more widely available than it used to be. • Videos are an efficient and effective way of communication because once they been created, they can be easily shared, replayed and updated.
Video communication applications	• Video communication applications such as Zoom and Skype are used to facilitate communication between people who are working remotely or from multiple locations.
Digital applications	• A digital application is any software that can be used on a computer, mobile device or tablet to undertake useful tasks such as writing, calculation or communication. • An example of a common digital application is instant messaging. Instant messaging applications such as Slack and Yammer provide a similar function to SMS on a mobile phone – users can send and receive messages instantly.
Newsletters	• Newsletters are short documents used to communicate news and information to a group of people, such as staff within an organisation, or a group of people within the community. • Newsletters are issued on a regular basis – usually on a weekly or monthly basis – and are most often distributed by email. • Advances in digital media applications mean that newsletters can be produced with interactive media. These media enhance the presentation of the document and make it more visually appealing to the reader.

Broadcasts	• Broadcasts are a way of presenting information to a mass audience by way of radio or television. In health and community services environments, broadcasts can be very useful for sharing information in different languages and with specific communities.
Intranet	• Intranet is an internal web server that all workers can access on site, or from home, using a password. It is password protected to ensure confidentiality of all information stored on the intranet. • Intranet can be used for displaying staff rosters, staff information and training, or sharing important work-related information.
Tablets and applications	• Tablets, such as iPads, are an easy, mobile way to access the internet and other communications. Some organisations have intranet software or applications on the iPad that allow workers to access information during their workday as the devices are portable. • Applications are specific software created for a device. They are usually linked to the internet. Your organisation may have an application for its intranet or its website. You may also use applications for other organisations, such as the ATO.

Example
Identify lines of communication between your organisation and other services

Paulo works as an outreach worker at a service that supports homeless young people. Most of the clients Paulo has contact with have multiple and complex needs in addition to their issues with housing. It is common for clients to have mental health difficulties and to have experienced some form of abuse or neglect. Some also have complex physical health problems which are made worse by their living conditions.

Paulo relies upon the established lines of communication between his service and other health and community services. His organisation has a strong relationship with numerous not-for-profit and government housing agencies, as well as a youth mental health service. A local adolescent health service is another important connection that Paulo regularly relies upon to access health services for his clients.

Practice Task 6

Question 1

Which of the following statements relating to the structure of the community services system are correct? Tick all that apply.

❑ The community services system is made up of a combination of publicly funded and privatised services.

❑ The community services system works closely with the health system to provide both health services and community support for people needing assistance.

❑ The federal government is solely responsible for funding all health services across the nation, across all states and territories.

❑ Health insurers, local charities and corporate grants may also contribute to health services funding.

❑ The community services system functions as a collaborative holistic person-centred approach to health care and support.

Question 2

Match each digital tool to its use within community and health services.

Websites	A low cost way to send and receive many types of workplace correspondence. Can be used to communicate with colleagues, managers, clients and other services.
Social media	Helps organisations establish an online presence by having a dedicated space where information is freely available to clients, professionals and other organisations about the services they offer,
Podcasts and videos	Networking platforms where people can share information and ideas quickly and efficiently with others and connect in various ways. Many health services and community service organisations use these platforms to communicate with the broader community.
Email	These refer to digital audio and video files that can be uploaded to the internet and shared or streamed. These files are typically created to engage with a wider audience and provide information in a medium that is easily accessible to most mobile device users.

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. Digital applications allow workers across an organisation to communicate with each other through instant messaging.	Yes / No
b. Tablets and applications are not practical in community and health services because the needs of clients are too broad.	Yes / No
c. An intranet allows clients to access resources and organisational information, such as forms, policies and procedures.	Yes / No
d. Newsletters are used to communicate news and information to a group of people, such as staff within an organisation, or a group of people within the community.	Yes / No
e. Broadcasts, via television or radio, are not suitable for the health and community services sector as they can cause panic and distress.	Yes / No

Question 4

Which of the following are support services that workers may refer a person to? Tick all that apply

❑ Counselling, social support and activities

❑ Nursing care

❑ Retail shopping assistance

❑ Allied health support such as physiotherapy and podiatry

❑ Home modifications and maintenance

Question 5

Match each organisational structure/model to its definition.

Rights-based service delivery	Seeing the person as the expert in their own life. This requires getting to know each person and taking time to learn about their individual preferences, needs and goals.
Multi-disciplinary team	This approach to service delivery puts the rights of users at the centre of service provision, with a focus on accessibility, autonomy and equity.
Person-centred service delivery	Combines the knowledge and skills of many different workers from different disciplines to meet a person's holistic needs. This approach identifies that some people have diverse needs that cannot be met by a single service provider or professional.
Support worker within a team	Provides assistance to people to enable them to be more independent and to achieve a higher quality of life. They collaborate with health professionals, sharing important first-hand knowledge of a person's support needs.

2C Use industry terminology correctly

Every industry uses terms and phrases that people outside that industry may not understand.

You need to be aware of the terminology (also referred to as 'jargon') within your sector and the sectors you work closely with. For example, if you work in youth services and work closely with health professionals, you will probably need to learn the meaning of some medical terminology. Similarly, if you are working as part of a team with allied health professionals working with early childhood educators, there will be terminology relating to childcare and education that you need to understand.

Medical terminology is especially important. It must be correctly documented and communicated, otherwise it can have a negative impact on a person's health and wellbeing if information is misinterpreted, misunderstood or incorrect.

If you hear someone use terminology that you don't understand, you should clarify the meaning with them, or with another colleague or supervisor.

> The Department of Health publishes a list of acronyms and a glossary relevant to the health sector at: aspirelr.link/dep-health-glossary

Correct terminology in health and community services

Industry terminology is used by professionals within a specific industry to facilitate communication.

When communicating verbally, in writing or via digital technologies, it is important to use the correct terminology for that setting.

For example, if you work in aged care and will be speaking to other aged care workers in a meeting, use words and phrases that are common within that industry. If you are an aged care worker writing an email to a medical professional, use medical terminology correctly.

Using industry terminology correctly will help to ensure a common, shared understanding.

Here are some situations where you need to be especially aware of industry terminology.

Verbal communication	• Inter-profession verbal handovers • Health-related enquiries to other community services sectors • Bedside handover
Written communication	• Referring a client to another service or sector • Completing a clinical incident or hazard report form • Recording information in client files and care plans • Writing summary reports and letters
Digital communication	• Creating or updating electronic health records

Terminology in community services

Here are some examples of terminology commonly used in community services settings.

A participatory approach
An approach to service delivery that focuses on building on the knowledge of communities and relying on and strengthening community resources. Participatory approaches are collaborative and involve working with communities as partners.

Community development
Community development focuses on the empowerment and self-determination of communities. Good community development helps people recognise and develop their ability and potential. It also helps them work together to solve problems and meet community needs.

Case management
A case manager's role is to work with individuals by: • planning and goal setting with them • assessing the individual's needs and supporting the individual • coordinating others to implement activities that meet set goals and • monitoring and evaluating the options and services required to meet the individual's needs.

Inter-agency
An inter-agency approach to community work involves a group of agencies, often multidisciplinary, working in partnership to provide coordinated, integrated and flexible services to enable a holistic approach to service provision.

Least restrictive option
The least restrictive option refers to maximising the independence and autonomy of the people who access community services. It requires workers and agencies to intervene and provide service in a way that has the least impact and is least restrictive to the individual.

Terminology in health services

Here are some examples of terminology commonly used in health care services.

Ambulatory care	Care provided to patients who are not admitted to a hospital, such as emergency department patients and patients at outpatient clinics. The term is also used to describe the care provided to patients of community-based (non-hospital) health care services.
Casemix	The range and types of patients treated by a hospital or other health service. Casemix classifications put patients into manageable numbers of groups with similar conditions that use similar healthcare resources. This term provides a way of describing and comparing hospitals and other health services for the purposes of planning and managing health care.
Deinstitutionalisation	The process of shifting service delivery away from institutional care, to care in the home and community.
Occasion of service	An occasion where a patient receives some form of service from a hospital but is not admitted.
PBS (Pharmaceutical Benefits Scheme)	A national, government-funded scheme for all Australians that subsidises the cost of standard medications.

Source: https://www1.health.gov.au/internet/main/publishing.nsf/Content/Glossary

Example
Use industry terminology correctly

Lydia has just started working at an organisation that provides community-based support to multicultural communities.

Lydia sometimes feels as if her colleagues are speaking a different language. Lydia's supervisor, Scott, has reassured her that it takes time to get used to the industry terminology. He tells Lydia that the most important thing is to never pretend to understand something if she doesn't understand it, and to clarify her understanding if she's not clear about something.

Last week at a staff meeting Scott was reminding his team of the importance of a participatory approach. Lydia did not know what the term 'participatory approach' meant, so she approached Scott after the meeting to explain it to her.

Scott explained that a participatory approach is when the people who are affected by a problem are involved in solving a problem. Lydia clarified by summarising what Scott had told her in her own words. "So, if there was a problem with vaccination rates in a specific suburb, a participatory approach would involve asking people within that community to help find ways to improve vaccination rates?" "Exactly!" Scott replied.

Practice Task 7

Question 1

Match each health and community services term to its definition.

Least restrictive option	A collaborative approach that involves working with communities as partners.
Participatory approach	Describes the care provided to patients of community-based (non-hospital) health care services and to patients who are not admitted to a hospital
Casemix	Refers to maximising the independence and autonomy of the people who access community services.
Ambulatory care	Refers to the range and types of patients treated by a hospital or other health service. This term provides a way of describing and comparing hospitals and other health services for the purposes of planning and managing health care.

Question 2

In which of the following verbal, written or digital communications would workers be required to use correct industry terminology? Tick all that apply.

❑ Bedside handover

❑ Referring a client to another service or sector

❑ Completing a clinical incident or hazard report form

❑ Talking to a client's family members about their day

❑ Updating electronic health records

2D Follow communication protocols when interacting with others

Every organisation has procedures for managing workplace communication.

Most community service organisations have formal protocols and informal expectations regarding how staff should communicate with each other and with the people who access services. They will also have 'lines of authority' – also known as 'governance structures' or 'operational lines' – which indicate how information should be passed between different levels of an organisation (e.g., from a team member to a team manager; from a team manager to an area manager etc.).

The purpose of a line of authority is to ensure that relevant information reaches the relevant people and issues are dealt with at the most appropriate level.

Authority lines

Authority lines help to ensure a systematic approach to decision making within an organisation.

An authority line ensures greater efficiency within an organisation. For example, it would be inefficient for the CEO of an organisation to sign purchase order forms; it would reduce the amount of time she or he can devote to other important asks. It makes more sense, therefore, to delegate responsibility for these types of tasks to someone lower down in the organisational structure, such as a supervisor.

Authority lines vary between community service organisations but they generally follow the management structure of an organisation (unless otherwise specified). The management structure of an organisation is typically outlined in an organisational chart.

When you need to share information, your first point of call will most likely be your manager or supervisor, or whoever is above you in your organisation's line of authority. In circumstances where you cannot contact that person, you should follow the relevant protocols in your workplace for dealing with those situations.

Codes of conduct

Your workplace communication protocols will be underpinned by a workplace code of conduct.

A **code of conduct** is a set of principles, standards, values or rules of behaviour that guide the decisions, procedures and systems of work for a workplace. The code of conduct should promote the welfare of people by protecting their rights and ensuring ethical practice.

Codes of conduct vary between workplaces; however, in a community services setting most codes emphasise the importance of:

- ethical behaviour
- accountability
- transparent sharing of information
- promoting dignity and respect and
- maintaining privacy and confidentiality.

It is important that you comply with your workplace code of conduct whenever you participate in workplace communication.

Code of conduct
A set of rules that informs employees how to act in a workplace.

Items a workplace code of conduct might include:
A statement of purpose
Related legislation
Disciplinary action for breaches of the code
A summary of workplace values
Roles and responsibilities of accountable persons named in the code
Workers' rights and treatment under the code
General applications of the code
Application of the code to specific work circumstances.

Distributing information and interacting with media

There are a range of other situations where you may need to follow communication protocols, including when distributing information and communicating with the media.

Some organisations require correspondence to be checked before it is sent. For example, emails and letters to external stakeholders may need to be authorised by a team leader. Organisations may also have protocols about distributing newsletters and information about events.

Some organisations also have protocols around publications. For example, draft publications may need to be reviewed by a senior member of staff before they can be finalised and distributed.

Many organisations also have policies and protocols regarding interactions with the media. For example, you will most likely need approval before you make comments to the media about an issue relating to your work. Usually, authority is required from a communications team or senior management, or even the Chief Executive Officer.

Example
Follow communication protocols when interacting with others

Kathryn works as a support coordinator with several families who have children with disabilities.

Kathryn is visiting the Simmonds family who have a child with a disability. Kathryn follows her workplace's code of conduct by presenting herself in a professional manner and providing the families with the information they request to make informed decisions about the support needs and funding they require.

The next day, Kathryn reviews the paperwork from the home visit and emails it to her team leader. She enters her notes about the visit into the relevant database and reviews it to make sure it is accurate.

Kathryn's team leader reviews and approves Kathryn's paperwork. She prints three copies and sends one to the NDIS, one to the family, and places one in the family's file as per her workplace's documentation requirements.

Practice Task 8

Question 1

Briefly outline what an authority line is, and describe how it impacts communication within a community services environment.

Question 2

Which of the following information are examples of protocols about workplace communication? Tick all that apply.

❑ Proper terminology to use in the workplace

❑ Transparent sharing of information with relevant stakeholders

❑ Ways to promote clients' dignity and respect

❑ Ensure clients' privacy and confidentiality

❑ Instructions and templates for commonly used forms and reports

Summary

- When workers are given instructions at work, they need to use active listening skills, clarify the instructions and agree on a time frame for completing tasks.

- Strong lines of communication between your organisation and other services help to ensure more holistic forms of care and support for clients.

- Two important principles underpinning community services include rights-based and person-centred service delivery.

- Use the forms and methods required by each sector in order to meet privacy and confidentiality legislation and to enable continuity of support for the person receiving that support.

- Digital technologies are a very common tool for communication in health and community services.

- All sectors use specialised terminology that people outside the sector may not understand.

- It is important that workers within the community services sectors understand the terminology used in health services (and vice versa).

- Your workplace will have lines of authority and communication protocols to ensure appropriate and effective management and distribution of information.

Learning Checkpoint 2

Collaborate with colleagues

Part A

1. Which of the following statements are correct? Select yes or no for each one.

a. The community services system is made up of a combination of publicly funded and privatised services.	Yes / No
b. The community services system provides both health services and community support for people needing assistance.	Yes / No
c. Health service funding is primarily provided by health insurers and corporate grants.	Yes / No
d. The various community services within the sector function collaboratively to provide holistic person-centred health care and support.	Yes / No
e. Community service providers are encouraged to work in inter-professional models so all of a person's health and community service needs are considered.	Yes / No

2. Which of the following principles underpin person-centred service delivery? Tick all that apply.

❑ Seeing the person as the expert in their own life, with their own unique history, outlook and hopes for the future

❑ Seeing the person as a patient who needs to be treated, supported and cared for by a team of health and medical personnel

❑ Getting to know each person and taking time to learn about their individual preferences, needs and goals

❑ Working with respect, compassion and empathy to empower the person

❑ Focusing on the whole person, rather than their perceived problems

3. List three principles underpinning rights-based service delivery.

4. Provide one example of a multi-disciplinary team coming together to provide health and community services to an individual.

5. Match each team role to its definition.

Carer	Provide assistance to people to enable them to be more independent and to achieve a higher quality of life. They work collaboratively with health professionals, sharing important first-hand knowledge of a person's support needs.
Support worker	They play an important role in coordinating services, collecting and storing service data and often providing the first point contact for people who need to access a service.
Administration officer	Supports the individual members of their team through delegation of tasks, feedback, supervision, communicating changes in the workplace and enforcing compliance with workplace procedures.
Supervisor	Includes people who are employed to provide care, or family members, friends and volunteers who play a role in the provision of care. They work collaboratively with health professionals, sharing important first-hand knowledge of a person's care needs.

6. Look at the My Aged Care website. Identify at least two pieces of information provided in the introductory video on the homepage of the My Aged care website: aspirelr.link/myagedcare

7. Which of the following statements are correct? Select yes or no for each one.

a. Email is a popular way for health and community service workers to communicate with each other, managers, other services and clients.	Yes / No
b. Health services and community service organisations use social media to communicate with individual clients.	Yes / No
c. Podcasts and videos are digital files uploaded and distributed over the internet to subscribers who download/stream and watch/listen to the content.	Yes / No
d. Health and community services workers mainly use tablets and applications to complete referral letters and consent forms.	Yes / No
e. In health and community services environments, newsletters and broadcasts can be very useful for sharing information in different languages and with specific communities.	Yes / No

8. List two examples of how an intranet can be used by community services and health organisations.

Part B

Read the case study, then answer the questions that follow.

Case study

Miah works as part of a large community service team. On any given day, Miah might make contact with as many as three other service areas within her own organisation. Miah will also contact other external community services on behalf of those she is providing support for.

Timothy recently joined Miah's community service team and her manager has directed her to be Timothy's resource person. Miah has a list of things to explain to Timothy about the operations of the organisation, such as communication protocols, other community service sectors, referral processes and forms, service relationships and funding models, and authority lines for passing on important information and issues.

Miah has reassured Timothy that it won't take him long to get used to the industry terminology and the service structure. She tells him that one of the most important things to remember is to be willing to admit when he is unsure about something and ask questions about the instructions he is given and to seek calrity about time frames of items that need completing.

1. Suggest three ways Timothy can actively listen to and clarify workplace instructions.

2. List five factors Timothy and his new team need to consider when agreeing on work time frames.

3. Briefly outline why is it important for Timothy to have a good general knowledge of other related community service sectors.

4. Provide a list of at least five community service sectors that Timothy may need to be aware of in his job.

5. List five community services which Timothy might refer individuals to for community support.

6. Provide four examples of verbal, written and digital communication methods that will require Timothy to use correct industry terminology.

7. Provide three examples of industry terminology relating to roles and services that Timothy might use in his workplace.

8. Identify three points Miah could explain to Timothy about how authority lines work and how they impact on communication.

9. Suggest five examples of client-related communication documents that Timothy may be required to use in his workplace.

10. List three important factors Timothy should consider before providing service-related information to others and the media.

Topic 3: Address constraints to communication

3A Identify early signs of complicated or difficult situations

3B Identify and resolve constraints to effective communication

3C Use communication skills to avoid and resolve conflict situations

3A Identify early signs of complicated or difficult situations

Complicated and difficult situations are inevitable in the workplace.

Complicated and difficult situations in the workplace can include interpersonal conflict, malicious gossip, burnout, inappropriate or unacceptable behaviour and a lack of team cohesion. These types of situations can arise from miscommunications and conflicting values and ideas, as well as competing economic and organisational priorities.

There are usually warning signals that indicate the potential for complicated or difficult situations in the workplace. To stop these situations from escalating, it is important to identify warning signals in a timely manner and report them according to your organisation's procedures.

Identifying early signs

You might notice early signs of complicated and difficult situations when you talk to or observe your co-workers' or your team. Signs of potential difficulties include:

- people behaving in an aggressive way towards each other

- team members' reluctance to work with each other

- ongoing low morale in a team or a workplace

- people exhibiting signs of stress.

Specific circumstances can also increase the potential for difficult and complicated situations in the workplace. For example, economic instability can increase levels of stress in the workplace, leading to an increased potential for interpersonal conflict. When there are limited resources in the workplace – such as limited funding, or over-stretched staff – this can also increase the potential for stress and conflict.

Here are some other early signs of potentially complicated and difficult situations in the workplace.

Body language	The potential for conflict between team members may be evident in their body language when they communicate with each other. The following body language could indicate a complicated or difficult situation: • failure to make eye contact • folded arms and legs ('defensive' postures) • clenched fists or jaw.

Verbal communication	The potential for conflict may be evident in the way someone verbally communicates with another person or a group of people. For example, they might aggressively challenge a person, avoid conversing with a specific person or talk over or ignore a person who is speaking.
Workplace culture	Subtle signs in workplace culture may indicate the potential for complicated or difficult situations. These subtle signs include: • under-performing staff • disengagement • staff turnover • increased rates of sick leave • non-compliance with workplace processes • uncooperative and non-collaborative behaviour • disrespectful behaviour and language • workplace bullying and exclusion.

Reporting early signs

Not every sign of potential complication or difficulty will indicate actual complication or difficulty. For example, two people may communicate with each in other in a very robust way – such as challenging each other's ideas and strongly advocating for a specific approach – but that does not necessarily mean there is a problem between them. Someone else might naturally use quite defensive postures when communicating with others because they are shy or anxious.

If you are unsure whether to report a potential complication or difficult situation, check your organisation's policies and procedures. There will be circumstances where you definitely need to formally report what you observe in the workplace – such as bullying or unethical behaviour – and other circumstances where an informal discussion with your supervisor would be more appropriate.

If you do not know what your organisational policies and procedures are, or you have difficulty understanding them, ask a more experienced colleague or your supervisor for help.

Example
Identify early signs of complicated or difficult situations

Multiple new staff have recently started working at the child protection agency where Logan works. Some are new graduates with minimal direct experience with clients. Senior staff at the agency have limited time to spend with the new staff, although they are doing their best to provide mentoring and support when they can.

At a recent staff meeting, Logan noticed that some of the new staff members were anxious about going out in the field. Some reported that they needed some more time shadowing experienced staff before they took on their own caseload.

Logan identified that the anxiety the new staff members were experiencing could lead to problems later on, such as disengagement and high staff turnover. Logan reports his concerns to his manager, as per the agency's standard procedure.

Practice Task 9

Question 1

Which of the following are early signs of a potentially complicated or difficult situation? Tick all that apply.

❑ Defensive and protective body language such as crossed arms, closed fists, rude gestures and avoiding eye contact

❑ Verbal language, such as directly challenging a person or situation and outright avoidance of conversation with a person

❑ Written language with a stern and authoritative tone, including in emails directed at team members and reports to management

❑ Workplace situations, such as absenteeism, non-compliance with workplace processes, poor behaviour and a rise in disputes, grievances and complaints

❑ Conflicting interpersonal, economical and organisational factors

Question 2

List two instances when you should report early signs of potentially complicated or difficult situations.

3B Identify and resolve constraints to effective communication

It is important for workers to be aware of constraints to effective communication and how to resolve them.

Various barriers can interfere with the process of effective communication. The barriers can relate to the sender or the receiver, such as language differences and emotional states, or other factors (e.g., the physical environment).

Effective strategies for resolving communication constraints will depend upon the type of barrier that exists and the available resources. In the community services sector, where people may be resistant to or ambivalent towards service providers, a motivational rather than a coercive approach is typically most effective.

Constraints to effective communication

Constraints and barriers to communication can occur at any stage during the process of communication.

Barriers and constraints to communication can distort or disrupt a message. Skilled communicators are aware of these barriers and restraints and have strategies and techniques for resolving them.

The following table describes seven categories of constraints to effective communication in the workplace, along with strategies for resolving them.

Physical constraints	Physical constraints that can affect communication include distance and office layout (e.g., large, open or noisy work areas).
	Strategies to resolve physical constraints include:
	• using technology to communicate remotely
	• paying attention to seating arrangements (e.g., seating people from the same team in close proximity to each other)
	• minimising noise in workplaces.
	Physical constraints can also come about as a result of disability. For example, hearing or speech difficulties can interfere with the process of effective communication.
Perceptual constraints	Perceptual constraints to communication include any belief that causes a person to think that other people don't care about or won't understand the information they wish to share.
	Strategies to resolve perceptual constraints:
	• promoting a culture of trust and respect
	• promoting active listening in the workplace.

Bias, prejudice and stereotyping	Bias, prejudice and stereotyping of a specific group – such as women, migrants and people from non-English speaking backgrounds – can interfere with effective communication.
	When you have preconceived views of a person based on their sex, ethnicity, sexual orientation or disability, it can affect your ability to listen to others with an open mind.
	Strategies to resolve bias, prejudice and stereotyping include:
	• promoting and encouraging understanding of cultural diversity
	• participating in training and professional development activities designed to raise awareness of discrimination and prejudice.
Language constraints	Sometimes a person may have functional English skills but still have difficulty understanding complex information, such as detailed health information.
	Specific words, phrases, gestures and abbreviations may pose a barrier to effective communication. The jargon used within industries, for example, may not be easy for people outside that industry to understand. Body language can also be interpreted in different ways depending on a person's cultural background.
	Strategies to resolve language constraints include:
	• If someone has difficulty understanding you because of limited English proficiency, try using shorter and simpler sentences.
	• If someone is having difficulty understanding what you are saying, try using a different technique, such as drawing a simple diagram.
	• Avoid the use of jargon when communicating with professionals outside your industry and people who are new to your industry.
	• Be aware of how body language is interpreted (and misinterpreted) according to a person's cultural background.
Emotional factors	Some people may find it hard to express certain emotions, and others may find some topics uncomfortable to talk about. This can pose a barrier to effective communication.
	Someone who is feeling very upset or distressed may find it difficult to comprehend what someone is telling them.
	Strategies to resolve emotional constraints include:
	• promoting a supportive workplace culture
	• using **debriefing** strategies where appropriate.

Debriefing
Asking a series of questions in a structured way immediately following an exercise or event that looks to review or evaluate the actions taken.

Motivational interviewing and a coercive approach

It is important for workers in health and community services to try and empower the people they work with and help them get to a place where they can make informed decisions about their own lives.

This means that no matter how much you think a person should change, you cannot force them to. That person firstly needs to understand why a change is needed and, secondly, they need to be motivated to make that change.

This approach helps people to explore and resolve uncertainty, ambivalence, and a lack of confidence.

Motivational interviewing is radically different to a coercive approach. A **coercive approach** involves pressuring a person to change something which you believe is in their best interests. When you use warnings, rewards or confrontation to encourage someone to change, you are using a coercive approach.

Motivational interviewing, on the other hand, allows someone to identify their own (internal) motivation for change.

Motivational interviewing
A method that encourages a person to identify their own motivations for change and strengthen their commitment to a specific goal.

Coercive approach
Strategy to encourage change that relies upon external motivations, including the communication of adverse consequences.

Example
Identify and resolve constraints to effective communication

John works as an office manager at a large welfare agency. Recently John's supervisor, Nailah, has noticed that John is under-performing at work and seems to be disengaged from the team. When Nailah raises the issue with John, he is very defensive at first. 'No, I am not!' he replies.

Nailah pauses to give John time to add any additional thoughts. John continues, 'It's not like I don't want to be part of the team, but no one cares what I have to say anyway'. Nailah nods and reflects what John has said in her own words. Nailah then asks, 'What makes you feel like nobody cares what you have to say?'

John tells Nailah that because the rest of the team are also located in another section of the building, he feels quite isolated. He also says that some members of the term use terminology that he is not familiar with and it makes him feel stupid to keep asking what they mean.

After listening carefully to what John is telling her and clarifying some points, Nailah realises that a combination of factors has led to a breakdown in communication between John and the rest of the team. His physical location in the office, for example, has left him feeling isolated, as has the team's reliance on terminology specific to the organisation. John's perception that other people do not listen to him has made him reluctant to share his ideas with the team.

Practice Task 10

Question 1

Which of the following might be constraints to effective communication in health and community services workplaces? Tick all that apply.

❑ Physical constraints may include distance, large work areas, barricaded office cubicles, closed doors and anything that physically restricts people from speaking to one another.

❑ Procedural constraints which ensure workplace communication aligns with legal and regulatory requirements, e.g., no discrimination, bullying and harassment.

❑ Cultural constraints are any beliefs, knowledge or concepts related to a person's cultural background which interfere with a person's ability to come to a shared understanding of an issue.

❑ Language constraints include any words, symbols or abbreviations that prevent a person from understanding information.

❑ Emotional constraints include any feeling that limits the exchange of information.

Question 2

List five communication strategies that could be used to resolve workplace communication constraints.

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. Motivational interviewing encourages a person to identify their own motivations for change and commit to achieving a specific goal.	Yes / No
b. A coercive approach allows people to explore and resolve uncertainty, ambivalence, and a lack of confidence.	Yes / No
c. Motivational interviewing involves pressuring a person to change something which you believe is in their best interests.	Yes / No
d. When you use warnings, rewards or confrontation to encourage someone to change, you are using a coercive approach.	Yes / No
e. A coercive approach relies upon internal motivations to encourage change. Motivational interviewing, on the other hand, relies on external motivation for evoking change.	Yes / No

3C Use communication skills to avoid and resolve conflict situations

Interpersonal differences and conflict occur in most workplaces.

Many people find themselves in conflict situations at work. When there is conflict and tension between people, it can be difficult for them to think clearly and respond appropriately. Communication skills such as active listening and assertive communication can help to defuse and resolve conflict.

When good communication skills become a habit in the workplace, it is more likely people will apply them effectively during conflicts.

Using 'I' statements

When in a conflict situation, it is especially important to use assertive rather than aggressive or passive communication.

Using 'I' statements to describe your feelings and needs helps with assertive communication. For example, saying 'I feel...' rather than 'You make me feel...' puts the emphasis on your feelings, rather than blaming someone else.

Using a succinct and direct 'I' statement can help clarify what you are feeling or needing. When you are talking about your own feelings and needs, it is difficult for the other party to dispute what you are saying, which minimises the potential for escalating conflict.

Here are some other tips for using assertive 'I' statements.

Describe the situation or issue	Begin by describing the situation or issue neutrally and objectively. **Example:** 'When we are doing handover, I need more time to ask questions.'
Clearly describe your feelings	Start with the words 'I feel...' Try to describe your feelings clearly and succinctly. Avoid vague comments such as, 'I feel bad'. **Example:** 'I feel anxious when I don't have enough time to ask questions during handover.'
Describe the desired outcome	Use the statement 'What I would like is...' to describe the desired outcome. **Example:** 'What I would like is an extra 15 minutes when we do handover.'

Stay focused on the issue

Sometimes people treat conflict situations as an opportunity to air all the issues they have with another person. For example, Cameron is frustrated with his colleague Abby because she refuses to pay her social club fees. Cameron is responsible for making sure all staff members pay their social club fees if they intend to participate in staff social activities. Cameron needs to talk to Abby to resolve the issue about her unpaid fees.

When Cameron is preparing how to approach Abby, he is tempted to raise some other issues he has had with her in the past, such as arriving late for an important meeting a few months ago and ignoring protocols around using an open-plan office. However, he knows this could make the situation worse.

To avoid escalating a conflict, it is better not to raise issues from the past and stay focused on the issue at hand.

How to stay focused during conflict
Concentrate on the issue at hand and encourage the other person to stay focused too.   For example, when Abby raises an issue about her contract, Cameron responds, "I understand that you are concerned about your contract, Abby, but what we are talking about at the moment is your social club fees."
Focus on facts.   For example, when Abby tells Cameron that he's being pedantic and unreasonable, Cameron responds, "I understand that you're feeling frustrated, Abby, but if you want to come to after-work social events, you need to pay your social club fees."

The broken record technique

The broken record technique can be used when attempts to resolve a conflict are progressing slowly.

The broken record technique involves using one or two relevant phrases and repeating them, like a broken record, until the other party recognises what you are saying or understands that you are not going to offer other options.

The broken record technique should not be used to stop someone expressing their opinion. If you are unable to resolve the conflict directly, you may need to pursue other options, such as discussing the issue with your supervisor, or seeking out someone to mediate a conversation.

Here are some other things to avoid when trying to resolve conflict and interpersonal differences.

Things to avoid when dealing with conflict
Avoid generalising phrases such as accusations that start with, 'You always …' or 'You never …'
Don't exaggerate; the aim is to be specific about the situation and your needs, not to make the other person look bad.
Avoid dealing with too many issues at once; this can make the other person defensive because they feel like they are being attacked.

Collaboration and confrontation

Collaboration is an important strategy for consultation, communication and problem solving in the workplace that involves swapping, sharing and discussing ideas. Collaboration is not the same as cooperation and often involves tough decisions and trade-offs.

Most people think of **confrontation** as a negative style of communication; however, confrontation can have a positive outcome if it is done in a constructive and respectful way.

Unhealthy confrontation is done as punishment, revenge or payback. It typically involves shouting or nasty or hurtful behaviour. Healthy confrontation is affirming and validating of the other person whilst also providing an opportunity for everyone to share their concerns openly and honestly.

Confrontation – even healthy confrontation – should be used with care in the workplace. It requires a skilful approach and the ability to balance firmness and compassion. Whatever approach you use, make sure you comply with relevant organisational processes and procedures, such as codes of conduct, and legislation, such as anti-discrimination laws.

Here is an example of collaboration versus unhealthy and healthy confrontation.

Collaboration
An approach that involves people working together to accomplish common goals.

Confrontation
Bringing people together face to face to address a conflict.

Situation	Ryan and Sofia are neighbours in an apartment block. The stairwell of the apartment block is narrow and dark. Sofia has asked Ryan on multiple occasions to not park his bicycle outside his apartment as she is afraid she will trip over it and hurt herself.
Collaboration	Sofia knocks on Ryan's door and asks him if they could work on a solution to the bicycle problem together. They discuss the issue over coffee.
	Ryan doesn't want to park his bike downstairs because he's afraid it will get stolen. Sofia says that if there were better lighting outside, she wouldn't trip over his bike. She suggests that he use a bike lock to prevent his bike from being stolen. Ryan notes that even with a bike lock, a lot of people's bikes have been stolen from the bike rack downstairs.
	Eventually, Ryan and Sofia come up with a solution: Ryan will pay for a motion-sensor light outside his apartment. This is a win-win solution that Ryan and Sofia came up with together.

Unhealthy confrontation	Sofia bangs on Ryan's door. When he answers, Sofia shouts, "I tripped over your bloody bike again Ryan. I almost broke my leg! If you don't park it downstairs from now on, I'm going to throw it over the balcony."
	Ryan shouts back, "How dare you shout at me! Do you know how much I had to pay for that bike? I can't afford a car. I need my bike for work, not that you would understand what it's like to work for a living." Then he slams the door in Sofia's face.
	Now that they have argued, Sofia is reluctant to approach Ryan again and Ryan is less open to listening to her.
Healthy confrontation	Having tripped over Ryan's bike again, Sofia waits until she has calmed down and then knocks on Ryan's door. When he answers she says, "Hi Ryan. Look, I know you need your bike for work but I tripped over it again this morning."
	"Well, maybe you should be more careful," Ryan replies.
	"Ryan, I'm really worried that I'm going to get seriously hurt if you keep leaving your bike out in that narrow stairwell. I would really appreciate it if you left it downstairs instead."
	"It will get stolen if I have leave it downstairs," Ryan says.
	"I understand," Sofia replies. "Do you have any other ideas as to how we can resolve the issue?"
	"I'm busy right now. Can we talk about it later?"
	"Sure, I'm home this afternoon. Would you like to come over at about 3pm? I would like to get this resolved as soon as possible."
	"Okay," Ryan nods. "I'll come over at three."

For more information about healthy confrontation, see:

aspirelr.link/professional-confrontation

For more information about dealing with conflict at work, see:

aspirelr.link/workplace-conflict

Referring unresolved conflicts

Although good communication skills can resolve some conflicts, they cannot resolve them all.

If you cannot resolve a conflict on your own, you will need to refer it to your supervisor. Your supervisor might decide to facilitate a conversation between you and the other party. Some of the issues your supervisor might address in this conversation include:

- what is fuelling the conflict

- guidance for resolving the conflict

Unresolved conflict
Conflict that keeps recurring, or escalates, and the parties involved are unable or unwilling to come up with constructive solutions to the conflict.

- potential solutions to the conflict

- expectations around behaviour and codes of conduct in the workplace.

Sometimes an external mediator will be required to help facilitate conflict resolution.

Here is an outline of a typical conflict resolution process in the workplace.

Referral to supervisor	The first step in the dispute resolution process is recognising that conflict may not be resolved without help from a third party. The worker should then refer the situation to their supervisor.
Individual viewpoints	The supervisor will meet with each person involved in the conflict individually to understand their point of view and how the situation is impacting upon them.
Combined meeting	The supervisor will then summarise the key issues and the potential solutions. The supervisor will then present this information to all parties.
Mediation	If the conflict cannot be resolved by a meeting facilitated by the supervisor, the dispute will be referred to a professional mediator.
Individual mediation	The mediator will then repeat the process of individually meeting with each person to discuss their perspective.
Combined mediation	The mediator will summarise the issues and solutions and attempt to facilitate negotiation and agreement of a solution.
Arbiter	Sometimes when individuals cannot agree upon a resolution the mediator and supervisor will enforce a solution that is best for the workplace and remind the workers that compliance with the decision is part of their workplace responsibilities. This is a last resort and should only be used when all other forms of mediation and negotiation have failed.

Example

Use communication skills to avoid, defuse and resolve conflict situations

Saxon sits next to Janet in an open plan office. Janet has been having loud conversations, complaining about her work and talking to Saxon and his colleagues in an aggressive manner.

Saxon and Janet's team is going through an especially stressful period due to a backlog of work and a major change-management process. Saxon identifies that Janet's behaviour is probably due to stress. He wants to support Janet, but also let her know how her behaviour is affecting him. Saxon asks Janet to lunch to discuss the situation.

Saxon tells Janet that he's noticed she hasn't been herself and wants to know if there is anything he can do to help. At first Janet says, 'It's just work.' Saxon maintains eye contact. Janet continues, 'It seems worse now than it used to be'. Saxon nods and Janet says, 'We have more referrals and I don't feel like I can make a difference'. Saxon paraphrases what Janet has said. 'So you're feeling overwhelmed by your workload and powerless to make a difference.'

Saxon explains how Janet's behaviour has affected him. 'I find it stressful to work with colleagues who snap at me, and I've started to avoid you.' Janet apologises, and they both agree to keep the lines of communication open to avoid further conflict.

Video: Use communication skills to assist conflict situations

Watch the following video to learn how to use assertive communication in difficult or complicated situations to express your feelings and views: aspirelr.link/assertive-communication

Although this video is aimed at a younger audience, many of its teachings apply to adult relationships and workplace interactions. Think about the various ways you can apply assertive communication to your workplace and work in health and community services.

Practice Task 11

Question 1

List three reasons why 'I' statements should be used to resolve conflict.

Question 2

Which of the following active listening strategies should be used when trying to resolve conflict? Tick all that apply.

❑ Always talk directly to the person you are in conflict with.

❑ Nod eagerly and continuously to hurry the person along so you can express your viewpoint

❑ Stand close to the person with clenched fists and fixed eye contact.

❑ Use open body language.

❑ Use reflective and paraphrasing statements to show that you are listening to and understand the other person's perspective.

Question 3

Identify two communication techniques that should be avoided when trying to resolve conflict.

Question 4

Which of the following statements are correct? Select yes or no for each one.

a. Confrontation is an approach that involves people working together to accomplish common goals.	Yes / No
b. Collaboration involves sharing and discussing ideas, and making tough decisions and trade-offs.	Yes / No
c. Confrontation is a technique that involves one person directly challenging another.	Yes / No
d. Confrontation is always a negative style of communication.	Yes / No
e. Healthy confrontation involves shouting so the person can 'let off steam' and voice their emotions.	Yes / No

Question 5

List three reasons why unresolved conflict should be referred to a supervisor.

Summary

- Identify early signs of complicated or difficult situations and report them so that situations don't escalate.

- Early warning signs of complicated and difficult situations can show up in people's body language, their manner of communication and in the culture of the workplace.

- It is important that you are aware of how certain factors cause constraints to effective communication and what strategies can be used to resolve those constraints.

- Barriers and constraints to communicate can distort and disrupt messages.

- Motivational interviewing involves one person encouraging another to identify their own motivations for change, as opposed to a coercive approach which involves pressuring a person to change because you think they should.

- Some communication skills that can be used to avoid, diffuse and resolve conflict in the workplace include active listening and assertive communication.

- Collaboration involves working together to achieve a shared goal.

- Collaboration is different from confrontation; confrontation involves challenging another person directly.

- Not all confrontation is 'bad'; confrontation can lead to positive outcomes if it is done in a constructive and respectful way.
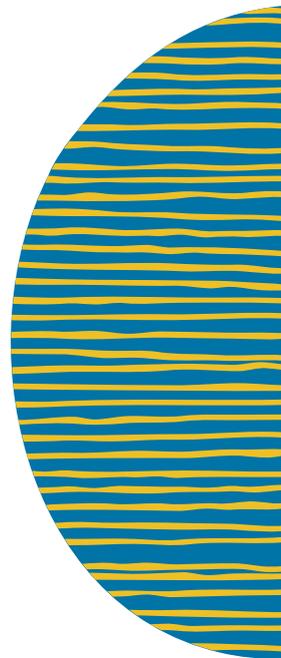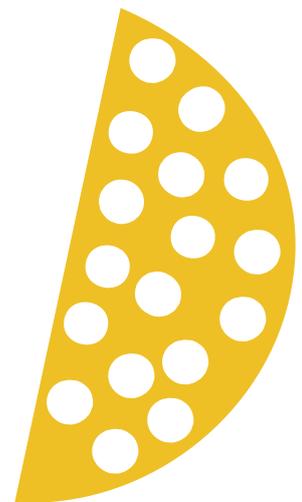
Learning Checkpoint 3

Address constraints to communication

Part A

1. Which of the following are possible early signs of a complicated or difficult situation unfolding in the workplace? Tick all that apply.

   ❑ Folded arms, legs or clenched fists

   ❑ Under-performing workers

   ❑ Disengagement

   ❑ Making eye contact

   ❑ Staff turnover

2. List three competing priorities or differences that can lead to a complicated or difficult situation between work colleagues.

3. List three constraints to effective communication that people receiving community services may experience.

4. Match each constraint to the communication strategies that can be used to resolve it.

Cultural constraint	• Using technology to communicate remotely. • Paying attention to seating arrangements such as seating people from the same team near each other. • Minimising noise in workplaces.
Perceptual constraint	• Being aware of how body language is interpreted (and misinterpreted) according to a person's cultural background. • Promoting and encouraging understanding of cultural diversity.
Language constraint	• Promoting a culture of trust and respect. • Promote active listening in the workplace.
Physical constraint	• Using shorter and simpler sentences if someone is having difficulty understanding you because of limited English • Avoiding the use of jargon when communicating with others outside your industry.

5. List three communication skills a worker can use during conflict resolution processes.

6. Describe how both collaboration and confrontation can be used in the workplace to resolve conflict.

7. Which of the following statements are correct? Select yes or no for each one.

If you cannot resolve a conflict on your own, you will need to refer it to your supervisor.	Yes / No
Supervisors might try to resolve the conflict by facilitating a conversation between all parties involved.	Yes / No
During conflict discussions, supervisors might provide guidance for resolving the conflict.	Yes / No
If conflict exists with your supervisor, it will remain unresolved.	Yes / No

Part B

Read the case study, then answer the questions that follow.

Case study

Tina has recently noticed a big change in the culture of her workplace. Previously, Tina enjoyed coming to work and felt like she was a valuable part of a collaborative team. These days, Tina finds herself avoiding eye contact with people in the work corridors, closing her office door and not contributing to workplace discussions. She has also noticed that her fellow workers tend to be off sick from work a lot of the time.

Tina feels that her supervisor Anthony often takes a coercive approach to change and that as a result people are far more likely to be confrontational than collaborative these days.

Yesterday Tina had a confrontation with Anthony over her attitude in the workplace. Tina felt like the conversation was one-sided and that Anthony didn't care about what she had to say.

Tina has decided that if something doesn't change for the better, she will start looking for a new job.

1. Identify two early signs of complicated or difficult situations that Tina should be aware of and report.

2. Which of the following physical constraints may be stopping effective communication in Tina's workplace? Tick all that apply.

❑ Distance

❑ Small work areas

❑ Barricaded office cubicles

❑ Closed doors

❑ Visual and audible distractions

3. List three communication strategies Tina could use to resolve the constraints to effective communication in her workplace.

4. What does Tina mean when she says that Anthony uses a coercive approach to change?

5. What is motivational interviewing and why should Anthony use it instead of coercion?

Topic 4: Report problems to supervisor

4A Comply with legal and ethical responsibilities and discuss difficulties with supervisor

4B Refer breaches and adverse events to the appropriate people

4C Refer issues impacting on the rights and responsibilities of employees, employers or clients

4A Comply with legal and ethical responsibilities and discuss difficulties with supervisor

Legal and ethical requirements for workers in the health and community services protect workers themselves, as well as the individuals who receive those services.

Workers in health and community services have numerous legal responsibilities. Some legislation is relevant to all workers and settings, whereas other legislation is only relevant in specific situations. For example, what is legally required in one state may not be legally required in another.

The legal responsibilities of workers are embedded in organisational policies, guidelines and practice manuals. These policies, guidelines and manuals provide a guide for workers' daily activities.

Supervisors must ensure that workers understand organisational policies and are able to access relevant guidelines and practice manuals.

Ethical behaviour and responsibilities

Ethical decision-making is the process used to make decisions that align with a code of ethics.

Ethics
Moral principles that govern a person's behaviour.

A code of **ethics** could be outlined, or more often implied, in legislation, organisational policies, professional standards or a combination of resources.

Here are some examples of resources that outline employees' ethical responsibilities.

Resources outlining workers' ethical responsibilities
Legislation and regulations, e.g., anti-discrimination laws
Codes of ethics
Accreditation or service standards (national/state)
Organisational policies and procedures
Organisational codes of conduct, guidelines and practice manuals
Job specification/position descriptions (role boundaries, levels of responsibility)

Even when agreed principles and guidelines exist, it is not always easy to determine what constitutes ethical conduct. For example, if your colleague tells your boss that he didn't miss a deadline – even though you know that he did – it might be ethical to tell your boss that truth. On the other hand, if the colleague is a friend of yours who is going through a difficult time and cannot afford to lose their job, it might be unethical to tell your boss that he lied.

How you choose to act in a particular situation will be influenced by various factors including relationships, loyalties and emotions. It is therefore important to understand what your legal and professional obligations are and apply those above all else.

Mandatory reporting of child abuse and neglect

Mandatory reporting is the legal requirement to report certain kinds of behaviour, including suspected cases of child abuse and neglect.

Each state and territory has slightly different mandatory reporting requirements for child abuse and neglect. These differences relate to:

- who is required to report suspected child abuse and neglect

- what types of abuse and neglect need to be reported

- when abuse and neglect needs to be reported.

The table on the following page outlines some of the mandatory reporting requirements for child abuse and neglect in each state and territory as they relate to workers within health and community services.

Some of the information in this table has been condensed so it should be used as a guide only. To fully understand your mandatory reporting requirements and when you should make a report:

- speak with your supervisor

- review your workplace policies and processes for reporting abuse and neglect

- use the links below to access the information for each state/territory

> See the Resource Sheet produced and annually updated by the Australian Institute of Family Studies at aspirelr.link/mandatory-reporting-child-abuse-and-neglect

Mandatory reporting requirements – child abuse and neglect			
State /Territory	**Professionals who are required to report***	**What types of abuse must be reported?**	**When does a report need to be made?**
ACT	• Doctors • Dentists • Nurses • Midwives • Psychologists	• Physical abuse • Sexual abuse	When the person has a belief that a child has experienced or is experiencing sexual abuse or non-accidental physical injury The reasons for the person's belief must arise from information obtained because of or during their work (paid or unpaid)
NSW	• A person who delivers health care, welfare, children's services or residential services to children. • A person who holds a management position and has duties which include direct responsibility for, or direct supervision of, health care, welfare, children's services or residential services to children. • A registered psychologist who is providing a professional service as a psychologist.	• Physical abuse • Sexual abuse • Emotional/ psychological abuse • Neglect • Exposure to domestic violence	When the person has a suspicion on reasonable grounds, obtained during their work, that a child is at risk of significant harm because of the types of abuse listed in the previous column or a failure to engage with services after a pre-natal report

Mandatory reporting requirements – child abuse and neglect			
Northern Territory	Any person (regardless of their profession)	• Physical abuse • Sexual abuse or other exploitation of the child • Emotional/ psychological abuse • Neglect • Exposure to physical violence	When the person has a belief, based on reasonable grounds, that a child has suffered or is likely to suffer harm or exploitation
	A health practitioner or someone who performs work of a kind that is prescribed by regulation	• Sexual abuse	When the person has reasonable grounds to believe a child aged 14 - 15 years has been or is likely to be a victim of a sexual offence and the age difference between the child and offender is greater than 2 years
Queensland	• An authorised officer • A public service employee employed in the department • People employed in a departmental care service or licensed care service • Doctors • Registered nurses • People engaged to perform a child advocate function	• Physical abuse • Sexual abuse	When the person has a reasonable suspicion that a child in care has suffered, is suffering, or is at unacceptable risk of suffering significant harm caused by physical or sexual abuse When the person has a reasonable suspicion that a child has suffered, is suffering or is at an unacceptable risk of suffering, significant harm caused by physical or sexual abuse and may not have a parent able and willing to protect them

Mandatory reporting requirements – child abuse and neglect			
South Australia	• Medical practitioners • Pharmacists • Registered or enrolled nurses • Dentists • Psychologists • Social workers	• Physical abuse • Sexual abuse • Mental or emotional abuse • Neglect	When the person has reasonable grounds to suspect a child or young person is at risk, or may be at risk, and the suspicion was formed in the course of the person's employment

Tasmania	• Medical practitioners
	• Registered or enrolled nurses
	• People registered under the Health Practitioner Regulation National Law (Tasmania) in the:
	  – midwifery profession
	  – dental profession
	  – psychology profession
		• Sexual abuse
		• Physical abuse
		• Emotional/psychological abuse
		• Neglect
		• Exposure to family violence
			There are a range of situations and circumstances when a report must be made.
			
			One of these is when the person has knowledge, or a belief or suspicion on reasonable grounds that:
			• a child has been or is being 'abused' or 'neglected' or
			• a child is affected within the meaning of the Family Violence Act 2004 or
			• there is a reasonable likelihood a child will be killed, abused or neglected

Mandatory reporting requirements – child abuse and neglect			
Victoria	• Registered medical practitioners • Nurses • Midwives • Out-of-home care workers (excluding voluntary foster and kinship carers), • Youth justice workers • Registered psychologists	• Physical injury • Sexual abuse	When the person has a belief on reasonable grounds, formed in the course of practising their professional duties, that a child needs protection (according to the *Children, Youth and Families Act 2005* (Vic.) The report must be made as soon as practicable after forming the belief and after each occasion on which the person becomes aware of further reasonable grounds for the belief
Western Australia	• Doctors • Nurses • Midwives	• Sexual abuse	When the person has a belief, on reasonable grounds, that child sexual abuse has occurred or is occurring and where this belief is formed in the course of the person's work (paid or unpaid)
	• Family counsellors • Family consultants • Family dispute resolution practitioners	• Physical abuse • Sexual abuse • Neglect • Psychological harm including harm caused by exposure to family violence	Reasonable grounds for suspecting that a child has been: • abused, or is at risk of being abused • ill-treated, or is at risk of being ill-treated • or exposed or subjected to behaviour that psychologically harms the child

Source: https://aifs.gov.au/cfca/publications/mandatory-reporting-child-abuse-and-neglect

The following table has more information about mandatory reporting of child abuse in each state and territory:

ACT	aspirelr.link/act-child-abuse
NSW	aspirelr.link/nsw-child-abuse
NT	aspirelr.link/mandatory-reporting-nt
QLD	aspirelr.link/qld-child-abuse
SA	aspirelr.link/mandatory-reporters-sa
TAS	aspirelr.link/mandatory-reporting-tas
VIC	aspirelr.link/vic-child-abuse
WA	aspirelr.link/mandatory-reporting-wa

Indications of risk

As part of your legal and ethical responsibilities, it is important to be aware of the signs that indicate a child is being abused or neglected or is at risk of being abused or neglected. Some of the indicators of child abuse and neglect are listed below.

It is important to note that this is not a complete list of indicators of child abuse; links for further resources are provided below. It is important to note also that these are indicators only: not every child who has one of these indicators is being abused or neglected, and not every child who is being abused or neglected will have one of these signs.

Type of child abuse	Indicators
Sexual abuse	• Describing sexual acts • Inappropriate behaviour for their age and/or persistent sexual behaviour • Self-destructive behaviour • Persistent running away from home • Going to bed fully clothed
Physical abuse	• Facial, head and neck bruising • Lacerations and welts from excessive discipline or physical restraint • Explanation offered by the child is not consistent with the injury • Other bruising and marks which show the shape of the object that caused it (e.g., hand-print, buckle) • Burns and scalds

Type of child abuse	Indicators
Emotional abuse	• Feelings of worthlessness about life and themselves • Lack of trust in people • Lack of interpersonal skills necessary for adequate functioning • Extreme attention seeking or risk-taking behaviour • Behavioural disorders (e.g., aggression, bullying)
Neglect	• Poor standards of hygiene leading to social isolation • Scavenging or stealing food • Focusing on basic survival • Extreme longing for adult affection • Untreated physical problems
Exposure to family violence	• Frequent crying • Signs of irritability and anxiety • Underweight for age • Very demanding or very passive • Wary of new people and startle easily

Source: https://education.nsw.gov.au/student-wellbeing/child-protection/child-protection-policy-guidelines/resources

For more information about indicators of child abuse and neglect, see:
aspirelr.link/recognise-abuse

Adult disclosures of abuse

Factors such as poor physical health, social isolation and care dependency mean that some older people and adults with disability are at risk of abuse.

If you are providing support to an adult who discloses that they are being abused, here are some tips for providing them with emotional support:

Listen to the person and give them time to talk about their experience.
Acknowledge and validate their experience.
Try to be calm and non-judgemental.

If you are working with vulnerable adults, you need to be aware of your legal and ethical responsibilities when an adult discloses that they are being abused, or when you suspect abuse is occurring. In some circumstances, you may be legally required to report the abuse. In other circumstances, the most ethical and appropriate response would be to talk with the person about their options.

Different states and territories have different approaches and requirements for reporting abuse of vulnerable adults.

Conflicts of interest

A conflict of interest occurs when the personal interests of a worker conflict with their professional responsibilities.

When such a conflict occurs, a worker's professional decisions and conduct can be unduly influenced by their personal interests.

For example, Ronelle is a team leader who is interviewing potential candidates for a role in her department. One of the candidates for the role is Ronelle's niece. This is a potential conflict of interest; Ronelle's personal interest in her niece could influence her professional responsibility to choose a candidate based solely on merit.

Here are some other examples of potential conflicts of interest.

- Jill is a team leader involved in arranging shifts for her team. She starts dating Mel, one of her team members.
- Jill's personal interest in Mel could influence how she makes decisions about the staff roster (e.g., how many shifts each team member gets)

- Gianni is a disability services worker whose wife is a personal trainer. Gianni is also involved in organising personal training for his clients.
- Gianni's personal interest in the success of his wife's business could influence his decisions about which personal trainer will best meet the needs of an individual client

- A promotions panel is considering an application from a staff member, Zakiah. Zakiah is married to Joe, one of the members of the promotions panel.
- Joe's personal interest in Zakiah's success could influence his ability to make an impartial decision about who deserves a promotion.

The potential for a conflict of interest is not necessarily a problem, so long as it is identified and managed appropriately.

In the previous example, for instance, Ronelle could declare that one of the candidates for the role is her niece before the interviews take place. The interview panel would then need to decide, based on organisational policies, procedures and other relevant guidelines, how to address this potential conflict of interest. The organisational policy may state that Ronelle cannot be a member of the interview panel, or that she can only have a limited role in the interview process.

Tips for addressing potential conflicts of interest
Declare potential conflicts of interest as soon as you become aware of them.
If you are unsure whether there is a conflict of interest, talk to your supervisor as soon as you become aware of the potential conflict.
Check your organisation's policies and procedures regarding conflicts of interest.

Work role boundaries

Maintaining professional boundaries means keeping to the specifications of your job role and organisational policies and procedures. It also means making sure that you maintain adequate personal boundaries in your professional relations with people you support.

Community service workers should not attempt to carry out work that:

• is not specified in their job description

• cannot be performed safely due to lack of training or practical experience

• is unethical, illegal or outside the policies and procedures of the organisation.

A range of documents in your workplace will outline your role, rights and responsibilities. Here are some examples.

Position descriptions
Workplace policies and procedures (e.g., infection control)
Practice manuals and guides
Codes of ethics
Service standards (if relevant to a particular field)
Legislation and regulations (e.g., workplace health and safety).

It is important that you read these documents and clarify any areas you are uncertain about with your supervisor. Clarification involves seeking additional information on an issue, explaining how you understand the issue, then checking that your understanding is correct.

Example
Comply with legal and ethical responsibilities and discuss difficulties with supervisor

Jarrod is a social worker. He has been providing support to Chloe, a 14-year-old high school student, and her family for a few months. Chloe is being bullied at school and is socially isolated. She rarely leaves her house except to go to school and to come and see Jarrod. After a session one afternoon, Chloe tells Jarrod that she has no money to get home. Can he lend her ten dollars?

Jarrod tells Chloe it would be inappropriate for him to lend her money but asks if she would like to use the phone at reception to contact her parents and ask them to collect her.

Duty of care

Workers in health and community services have a legal and moral responsibility to keep clients safe. This responsibility is referred to as 'duty of care'.

According to the requirements of duty of care, staff must take reasonable care to avoid someone being injured. Although we don't always know whether our actions will cause someone to be injured, **duty of care** applies to those situations where we have a reasonable expectation that an action will affect another person.

Duty of care
A moral or legal obligation to ensure the safety and wellbeing of other persons.

For example, giving a young child a sharp knife to cut up a piece of fruit is an act that may represent a breach of duty of care. Not providing adequate supervision for children during an excursion to the beach may represent a breach of duty of care; it is an omission.

Duty of care only applies to those areas that are relevant to the circumstances of the care. For example, a doctor has a duty of care regarding the medical treatment she provides but does not have a duty of care regarding a patient's finances.

However, in some circumstances professionals have a duty of care to children even if they are not their client. For example, a registered psychologist working with an adult client who believes on reasonable grounds that the child of their client is in need of protection, has a duty of care towards that child according to mandatory reporting laws in Victoria.

The laws around duty of care vary depending upon your work role and the type of service you provide as well as the state/territory where you are working.

Dignity of risk

Dignity of risk
A person's right to dignity and choice, upheld in legislation and service standards, to ensure that duty of support or safety is not used as a reason to limit a person's freedom of personal choice.

Dignity of risk was first devised in relation to the care of people with intellectual disabilities in the 1970s. At that time, people with intellectual or developmental disabilities were often viewed as incapable of living independently or making decisions for themselves, which often deprived them of the common life experiences that other people take for granted.

Dignity of risk acknowledges that life comes with risk, and that we must support people to experience success and failure. It is through taking risks and trying new things that we make mistakes and learn.

With many activities, it is not possible to eliminate risk altogether. The legal requirement of dignity of risk means that workers need to find a balance between duty of care and the inherent right of individuals to decide what level of risk they are comfortable with.

The key issue when considering the legal and ethical implications associated with dignity of risk is to determine the acceptable level of risk for the benefit that the activity offers. These questions should be discussed with the person and their families or carers.

- What are the potential risks?

- What are the potential benefits?

- How can the risks be reduced without reducing the benefits?

> **Video: Duty of care and dignity of risk**
> Watch the following video on 'duty of care' and 'dignity of risk':
> aspirelr.link/duty-dignity
>
> This video focuses on mental health workers but the information is relevant to all workers where support is offered to clients.
>
> Pay particular attention to the various scenarios presented and the choices workers need to make in order to fulfil duty of care requirements, whilst also maintaining a client's dignity of risk.

Discrimination

Discrimination occurs when an individual is treated less favourably than others because they belong to or identify with a particular group.

A person can also be discriminated against because they are perceived to belong to or identify with a particular group, even if that perception is incorrect. For example, a person might be discriminated against because their boss believes they are autistic, even if they are not autistic.

In Australia, it is unlawful to discriminate against people because of their age, gender, ethnicity, disability or impairment, marital status, sexual preference, or political or religious beliefs. The table on the following page includes some of the Commonwealth Acts that enshrine laws against various forms of discrimination. Additional legislation exists in each state and territory.

Forms of discrimination	Acts
Discrimination based on age	*Age Discrimination Act 2004* (Cth)
Discrimination based on disability	*Disability Discrimination Act 1992* (Cth)
Discrimination based on race, national or ethnic origin or immigrant status	*Racial Discrimination Act 1975* (Cth)
Discrimination based on sex, pregnancy, marital or relationship status, family responsibilities or breastfeeding status	*Sexual Discrimination Act 1984* (Cth) *Equal Opportunity for Women in the Workplace Act 1999* (Cth)

For additional information on equity and discrimination in Australia, visit the Australian Human Rights Commission website:

aspirelr.link/human-rights-commission

Example

Comply with legal and ethical responsibilities and discuss difficulties with supervisor

Madina is a youth worker who works with young people in transitional housing. She goes grocery shopping for the house with 17-year-old Sharnie. Sharnie grabs a few items for herself that don't fall within the household budget. At the check-out Madina pays for the household shopping, then looks at the items Sharnie is holding and says, 'Don't forget to pay for those'. Sharnie shakes her head and walks toward the doors, clearly not intending to pay for her items.

Madina realises that Sharnie has the right to make her own choices, regardless of her personal values or opinions. Madina is also aware that if Sharnie were alone, she could choose to shoplift. Madina doesn't want to infringe on Sharnie's independence, however, since she is aware of what Sharnie intends to do, by not intervening Madina is enabling an illegal act. Madina decides that her own obligation to uphold the law and her legal responsibilities to Sharnie as a person under 18 mean that she needs to intervene.

Madina calmly says, 'You need to pay for those items'. When Sharnie shakes her head again, Madina looks at her and repeats the statement. Sharnie swears at Madina, throws the items on the check-out and storms out of the shop. They return to the group house, where Madina writes clear case notes about what happened. Sharnie is angry for the rest of the evening. Madina discusses the situation with her supervisor Jye, who confirms that she made the right decision.

Practice Task 12

Question 1

Match each term to its definition.

Mandatory reporting	A moral responsibility to take reasonable care to avoid someone being injured where workers have a reasonable expectation that an action will affect another person.
Duty of care	A legal requirement of workers or individuals to report suspected cases of abuse and neglect.
Conflicts of interest	When an individual is treated less favourably than others because they belong to or identify with a particular group, even if that perception is incorrect.
Discrimination	When the personal interests of a worker conflict with their professional responsibilities.

Question 2

Which of the following can impact ethical decision making? Tick all that apply.

❑ Personal judgements as to what is right or wrong

❑ Personal values, relationships and loyalties

❑ Legislation and regulations, e.g., anti-discrimination laws

❑ Organisational policies and procedures

❑ Personal skill level

Question 3

Which of the following statements are correct? Select yes or no for each one.

a. Workers are responsible for clarifying any uncertainties with appropriate management staff when required.	Yes / No
b. Workers need to have clearly defined work boundaries and to understand the responsibilities and limitations of their role.	Yes / No
c. Position descriptions, workplace policies and procedures, and other organisational documents provide informaton on legal and ethical responsibilities in the workplace.	Yes / No
d. Workers can rely on the organisation's code of ethics to cover what they need to know and do when on the job.	Yes / No
e. Workers may need to request assistance or make referrals to other services when issues arise that are outside of the scope of role and/or organisation service provision.	Yes / No

Question 4

List five signs that indicate a child is being abused or neglected or is at risk of being abused or neglected.

Question 5

Which of the following statements are correct? Select yes or no for each one.

a. Professionals only have a duty of care to children if they are their client.	Yes / No
b. The laws around duty of care to children who are not your clients vary depending upon your work role and the type of service and the state/territory where you are working.	Yes / No
c. When working with a client and they disclose childhood experiences of abuse, you only have an ethical responsibility to report this disclosure to your manager.	Yes / No
d. Any childhood experiences of abuse disclosed by adults must be reported to the police for further investigation.	Yes / No

4B Refer breaches and adverse events to the appropriate people

Community service organisations have standard procedures in place to protect the rights and safety of their workers and the people accessing their services.

The legislation that informs organisational policies and procedures helps to protect worker and client rights and safety. Therefore, it is important for workers to adhere to procedures, policies and codes of conduct.

A breach of a policy, procedure, guideline, code or law can place workers and clients at risk of harm. For example, if an organisation breaches the privacy of an employee by accidentally publishing their home address online, that employee could be at risk of harm if their violent ex-partner uses that information to stalk them.

Breaches can cause 'adverse events.' Adverse events are incidents that result in harm to a person. To be considered an adverse event, the harm to the person must have been caused by an intervention and not as a result of a condition that a person is receiving services for.

Understanding breaches

One of the most common forms of breaches in health services is a data breach. Most of these breaches are due to human error. Data breaches are more common in the healthcare sector than many other sectors including finance, education and retail.

Examples of other types of breaches are outlined below.

Breach of duty of care
Duty of care is the obligation of a person to act in a way that does not cause harm. A breach of duty of care is to act in any way that a reasonable person (based on their experience and training) considers may cause harm. It is still a breach of duty of care if harm does not actually occur.

Breach of confidentiality
A breach of confidentiality is intentionally or unintentionally collecting, storing or using confidential information in a way that does not adhere to privacy legislation or an organisation's confidentiality and privacy policy. A breach of confidentiality is sharing private information about a person without their consent.

Breach of professional ethics / boundaries
A breach of professional ethics or boundaries is behaviour that is contrary to a professional code of conduct, code of ethics, expressed values of an organisation or commonly upheld professional standards within the community services sector. A worker pursuing a friendship or intimate relationship with a person accessing services is breaching professional ethics and boundaries.
Breach of organisational procedure
A breach of organisational procedure is any action or non-action that is not aligned with organisational procedures. Two examples are not following guidelines for petty cash and expenditure, and using a work car for private use.

The impact of breaches and non-adherence

Any breach or non-adherence to legislation, policies and guidelines in community services will have an impact on the people or workers involved; however, the severity of the impact will vary.

Most people accessing community services are vulnerable in some way. Legislation, policies and ethical guidelines are designed to protect everyone who accesses services, especially those who are vulnerable.

When these types of procedures are not followed, or breached, there are a range of potential impacts on workers, workplaces and clients.

Breaches may:
• put the person accessing services at risk
• be confusing to the person accessing services
• cause the person accessing services to become disillusioned with the organisation or with help-seeking in general
• interfere with or compromise a person's rights
• undermine the dignity of the person accessing services
• disempower a person from making choices
• discredit the organisation
• contravene funding agreements and jeopardise the reputation and future of the organisation.

Recognising a breach

In some cases, it might be difficult to determine whether someone's conduct or behaviour is a breach. Asking yourself the following questions below could help you with this task.

If you are still unsure whether a breach has occurred, check your organisational policies and procedures and seek advice from your supervisor.

Questions to ask to identify a breach
• Would a reasonable person (with the same level of knowledge and training) behave in this way?
• Is there legislation that governs the specific situation?
• Does this action align with our professional code of ethics?
• Is the behaviour consistent with organisational policy and procedures?
• Is the person's behaviour in accordance with their job description and the scope (boundary) of their role?

Referring a breach

If you observe or become aware of a breach or non-adherence, you need to refer it to the appropriate person. Your organisation will have policies and procedures for referring breaches. If you are unsure about the process, speak with your supervisor.

If you are concerned that your supervisor is breaching a procedure or other guideline, follow your organisational policy, or seek assistance from an appropriate person, such as a trusted colleague or senior staff member.

Referring an adverse event

The harm from an adverse event ranges from minimal to severe (e.g., permanent disability, death). Adverse events can be caused by individual error or other factors, such as workload, inadequate systems, inadequate training and management issues.

In some circumstances and settings, staff and/or organisations are required to report adverse events. Some organisations will have a formal incident management system that is used to record adverse events.

Make sure you are aware of your obligations regarding the referring and reporting of adverse events.

Example
Refer breaches and adverse events to the appropriate people

Helene is an aged care worker at a low-level care residential aged care service. One morning she arrives at Mrs Kavah's unit to assist her with administering her morning medication. Helene notices that the blister pack from the previous evening still has tablets in it. Helping Mrs Kavah take her evening medication is the responsibility of the worker on afternoon shift.

Helene talks to Mrs Kavah about the tablets. Mrs Kavah tells her that the worker on the afternoon shift was in a rush and probably forgot about her medication. Helene calls her supervisor to report the breach. One of the medications Mrs Kavah takes helps to control her seizures. By skipping this medication, Mrs Kavah may be more susceptible to a seizure over the next few hours. Helene's supervisor organises for a support worker to monitor Mrs Kavah for the rest of the morning.

Practice Task 13

Read the case study, then answer the questions that follow.

Case study

Emily works for a community services organisation that provides help to people in their own homes. Emily provides support to Barbara, a 55-year-old lady who is living with some mobility difficulties as a result of a stroke. Barbara is an artist and has several nude prints of herself in her house.

Emily is not the only community services worker from her organisation who visits Barbara. Last week Emily walked into the staff room and overheard Miranda talking to Chelsea about Barbara's nude prints. Although Chelsea works in their team she is not directly involved with Barbara's care.

Miranda told Chelsea, 'If I had a body like that, I would rather die than pose nude and then put it up for everyone to see. Maybe the stroke affected her eyesight too'.

At first Emily is shocked about these unprofessional and inappropriate comments. The more she thinks about the situation the more she realises that Miranda has breached the organisation's workplace policies in more than one way. Emily decides that she needs to report the situation to her supervisor.

Question 1

Which of the following are possible breaches that Emily might report to her supervisor? Tick all that apply.

❑ A worker has acted in any way that a reasonable person (based on their experience and training) considers may cause harm

❑ A worker has treated another person unfavourably based on their gender and physical impairment

❑ A worker is intentionally or unintentionally collecting, storing or using confidential information in a way that does not adhere to privacy legislation or an organisation's confidentiality and privacy policy

❑ A worker's behaviour is contrary to a professional code of conduct, code of ethics, expressed values of an organisation or commonly upheld professional standards within the community services sector

❑ A worker has performed any action or non-action that is not aligned with organisational procedures

Question 2

What steps can Emily take to report workplace breaches?

4C

Refer issues impacting on the rights and responsibilities of employees, employers or clients

You need to know about your own rights and responsibilities in the workplace, as well as the rights and responsibilities of the people you provide services to, and those of your employer.

Rights and responsibilities can be legally mandated – such as mandatory reporting responsibilities and adhering to privacy laws. Rights and responsibilities are also incorporated into organisational policies and procedures and professional standards.

Employee and employer rights and responsibilities

Some rights are common across all Australian workplaces. For example, Federal discrimination laws protect employees from discrimination in the workplace based upon characteristics such as their race, sex, age and sexuality. Employers have a responsibility to ensure employees are treated fairly.

Employee rights are also outlined in the National Employment Standards (NES). These standards are applicable to all employees in Australia and include:

- 4 weeks paid leave per year (pro-rata for part-time employees)

- 2 days paid compassionate leave (per occasion)

- 1-5 weeks' notice of termination (based on length of employment and age).

> You can find out more about the National Employment Standards at the Fair Work Ombudsman website: aspirelr.link/fair-work-employee-entitlements

Many employees working in health and community services work in situations that can put them at risk and cause stress. These include:

- shift work

- working in people's homes

- driving to and from remote locations.

Each of these conditions must be clearly stated in a position description.

Client rights and responsibilities

Client rights are protected by statutes and laws, such as basic human rights relating to freedom of movement, thought and expression. Clients' rights can be legally mandated – such as their right to privacy. Client rights and responsibilities are also incorporated into organisational policies and procedures and professional standards.

Here are some examples of client rights and responsibilities.

Client rights	Client responsibilities
• The right to be treated respectfully • Privacy and confidentiality • To make a complaint about the service they have received	• Following through on tasks that have been agreed to • Respecting and abiding by the rules of the service

Factors preventing the achievement of workplace rights and responsibilities

These factors can be unintentional or deliberate. For example, a worker might forget to inform a client about their rights, which then impacts upon the client's ability to advocate for their rights. Or an employer might intentionally discourage employees from lodging a report about harassment, which then means employees cannot achieve the right to a workplace free from harassment.

Here are some other factors that can prevent the achievement of employer, employee and client rights and responsibilities.

Budgetary constraints
Poor communication lines
A culture of not reporting issues
Lack of training, skills and knowledge about rights and responsibilities

If you are aware of factors that are impacting upon the ability of employees, employers or clients to achieve their rights and responsibilities, you should follow your organisation's policies and procedures for reporting those problems. In some cases, you may need to report those problems to an external governing body, such as the Fair Work Ombudsman.

Example

Refer issues impacting on the rights and responsibilities of employees, employers or clients

Jenny works as a personal care assistant, and one of her clients is Anthea. Anthea needs two workers to help her get in and out of bed, shower and dress on a daily basis.

Anthea has a manual handling plan that outlines the safety requirements for the personal care assistants who work with her.

Last week a worker named Cindy was working with Jenny on the evening shift when she noticed that the hoist used to transfer Anthea to and from her bed was broken. Cindy told Jenny that she knew of another way for transferring Anthea into her bed which was not outlined in the manual handling plan.

Jenny politely refused to help Cindy with her proposed alternative method because it was not outlined in the manual handling plan.

Jenny later discussed the issue with her supervisor, Mala, who supported her decision. Mala told Jenny that by not following the manual handling policies and procedures, Cindy was breaching her duty of care under the Work Health and Safety Act, and thereby placing herself, her fellow workers and clients at risk.

Practice Task 14

Question 1

Which of the following are employee rights in the community services sector? Tick all that apply.

❑ Employees have the right to work in an environment that is free from any forms of discrimination, harassment or abuse.

❑ Employees have the right to dress and act in a way that adheres to their religion and beliefs.

❑ Employees have the right to be paid correctly and fairly.

❑ Employees have equal opportunity for employment and promotion within a company.

❑ Employees have the right to take six weeks of leave.

Question 2

Match each responsibility to the correct individual.

Have a position description describing shift work, working in people's homes or driving to and from remote locations	Employee
Follow through on tasks that have been agreed to.	Employee
Play an active role in keeping themselves, their work environment, co-workers and people accessing services healthy and safe.	Client
Work within the boundaries of relevant legislation and work within organisational policies, procedures and guidelines.	Client
Ensure employees are treated fairly.	Employer
Respect and abide by the rules of the service.	Employer

Question 3

List three possible barriers to achieving worker rights and responsibilities in a community services workplace.

Question 4

List two parties that issues impacting employee and clients' rights can be reported to.

Summary

- The legal responsibilities of workers in health and community services are built into organisational documents such as policies, guidelines and practice manuals.

- Mandatory reporting laws mean that some workers in health and community services are legally required to report child abuse and neglect (or potential child abuse and neglect).

- A conflict of interest occurs when the personal interests of a worker conflict with their professional responsibilities.

- Maintaining professional boundaries means keeping to the specifications of your role and maintaining appropriate relationships with your clients.

- 'Duty of care' is a worker's legal and moral responsibility to keep their clients safe.

- A breach of a policy, procedure, guideline, code or law can place workers and clients at risk of harm.

- Employee rights are also outlined in the National Employment Standards (NES). These standards are applicable to all employees in Australia.

- Client rights are protected by statutes and laws, such as basic human rights relating to freedom of movement, thought and expression.

- If you are aware of factors that are preventing the fulfilment of rights and responsibilities, you should follow your organisation's policies and procedures for reporting those problems.

Learning Checkpoint 4

Report problems to supervisor

Part A

1. Which of the following statements describe duty of care requirements? Tick all that apply.

    ❑ The legal obligation that people and organisations have to anticipate and act on possible causes of injury and illness that may exist in their workplace or as a result of their actions.

    ❑ The person or organisation is required to do everything they can to remove or minimise possible causes of harm.

    ❑ The legal and ethical responsibility organisations have to prevent workplace health and safety incidents from occurring.

    ❑ Only those in management or supervisory roles have a duty of care to visitors and people accessing community and health services

    ❑ Everyone has duty of care responsibilities to themselves, colleagues, visitors and people accessing services.

2. Provide two examples of ways workers can prevent discrimination in their workplace.

3. Which of the following apply to mandatory reporting across all health and community services? Tick all that apply.

❑ Although reporting requirements differ across states/territories, health and medical practitioners have a duty to report suspected physical or sexual abuse of children.

❑ A health or medical professional's suspicions of emotional abuse or neglect might be based on a child's poor standards of hygiene, extreme longing for adult affection, behavioural disorders (e.g., aggression, bullying) or extreme attention seeking or risk-taking behaviour.

❑ A health or medical professional only has a duty of care to report suspected physical or sexual abuse of a child, if that child is his/her client.

❑ Indicators of risk that provide 'reasonable grounds' for reporting child abuse include tiredness, temper tantrums, lack of concentration and refusal to participate in certain sporting activities.

❑ As a health or medical professional, when adults disclose childhood experiences of abuse, it is a requirement to report this abuse to the relevant authorities.

4. List three sources of information that workers can access to determine their mandatory reporting responsibilities.

5. Give three examples of situations that involve a possible conflict of interest.

6. List three workplace breaches that a worker might report to their supervisor.

7. Which of the following questions could assist a worker to identify a breach of a workplace procedure? Tick all that apply.

- ❑ Would a reasonable person (with the same level of knowledge and training) behave in this way?

- ❑ Is this action aligned with the organisation's code of conduct and the profession's code of ethics?

- ❑ Is there legislation that governs the specific situation?

- ❑ Is the behaviour consistent with organisational policy and procedure?

- ❑ Is my behaviour justifiable?

Part B

Read the case study, then answer the questions that follow.

Case study

Jason works for a community services organisation within a team responsible for developing and updating workplace procedures. Jason is currently updating several procedures that are in place to help workers meet their ethical and legal workplace responsibilities.

Jason develops a draft of the new workplace procedures and sends it out to all the workers that will be affected by the changes, requesting their feedback.

Jason understands that these procedures provide good general advice to workers but can't always be used to resolve complex work situations and conflict.

Jason speaks to the Human Resource manager Justine and asks for her advice on what situations should be referred to a supervisor. Together they update the workplace procedures to reflect best practice as well as support workers to meet their workplace rights and responsibilities.

1. Which of the following information should Jason include in the procedures regarding ethical decision making? Tick all that apply.

   ❑ The term 'ethics' refers to standards of right and wrong designed to protect rights.

   ❑ Being ethical involves applying relevant legislation, asking, 'What does the law say I should do?' or 'What am I legally required to do?'

   ❑ Values can influence decision making as people have a strong attachment to their values.

   ❑ It is important for a worker to recognise their personal values and the impact these may have on their approach to work and the decisions they make.

   ❑ Individual values are not always universally shared.

2. List three sources of information Jason is referring to as part of the 'ethical framework'.

3. List three laws Jason may refer to in the anti-discrimination policy.

4. Which of the following information should Justine use to describe worker boundaries, responsibilities and limitations? Tick all that apply.

❑ Every worker is responsible for understanding the requirements and scope of their own work and to clarify any uncertainties with appropriate management staff when required.

❑ Workers may need to request assistance or make referrals to other services when issues arise that are outside of the scope of their service or expertise.

❑ Workers should only make referrals to other services when they are under time pressure or have a heavy caseload.

❑ It is important for workers to have clearly defined work boundaries and to understand the responsibilities and limitations of their role so that they don't place themselves and others at unnecessary risk of harm.

❑ Limitations only exist in a worker's role because they lack the appropriate resources (physical, financial) to fulfil their responsibilities.

5. List three steps Justine might include in procedures for workers to meet their obligations to respond to and report workplace breaches.

6. List four possible barriers to achieving employee rights and responsibilities that Jason should address in the workplace procedures.

7. Which of the following employee responsibilities and rights might Justine tell Jason to include in the workplace procedures? Tick all that apply.

❑ Employees should respect their employer, co-workers and people accessing their organisation's service.

❑ All employees have the right to dress and represent the cultural or social group they belong to.

❑ Employees must carry out their jobs to the best of their abilities.

❑ All employees have the right to work in a safe environment, complete with occupational health and safety.

❑ Employees have the right to report issues regarding their ability, or that of their employers or clients, to achieve their rights and responsibilities to an external governing body, e.g., Fair Work Ombudsman.

8. List four employer rights and responsibilities that Justine might tell Jason to include in the workplace procedures.

Topic 5: Complete workplace correspondence and documentation

5A Complete documentation according to legal requirements and organisational procedures

5B Use clear, accurate and objective language when documenting events

5C Follow organisational policies and procedures for using digital media
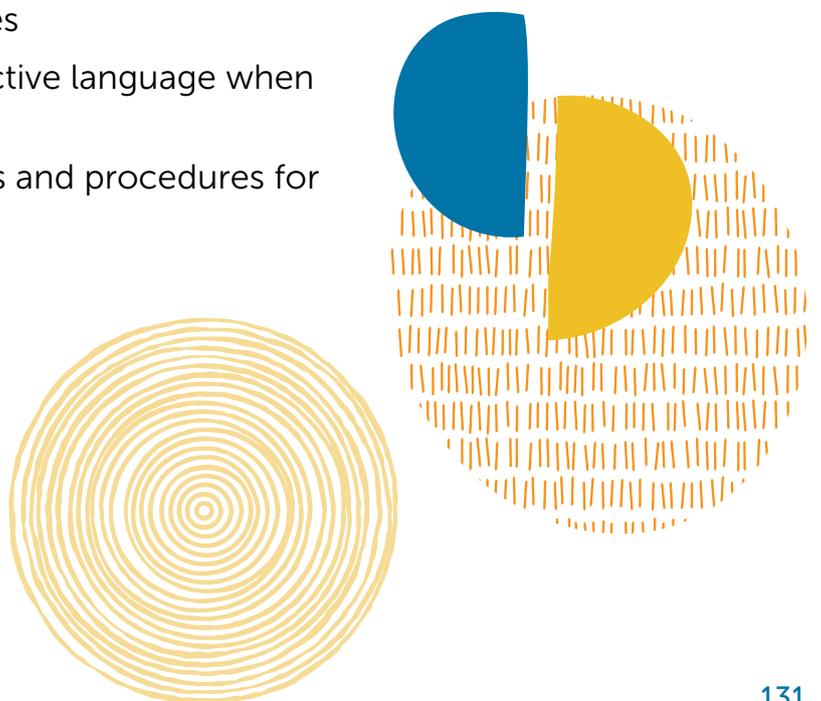
5A Complete documentation according to legal requirements and organisational procedures

Most health and community services workers need to complete documentation on a regular basis.

The documents that workers complete are used for a range of purposes including evaluation, research and reporting to service users, funding bodies, governments and other stakeholders. These documents provide evidence of compliance with industry standards and ethical and legal requirements.

Most organisations will have standard templates and formats for documentation that workers must use. These templates and formats are usually set up so they prompt the user to include all the required information.

Types of documentation

It is important that you understand the documentation standards, including the format, style guide, content, language, submission timeframe and security requirements for each type of document.

Here are some examples of documents you may need to complete in your role.

Examples of client-related documentation	Examples of staff-related documentation
• Client case notes • Client plans and goals • Incoming and outgoing referrals • Incident reports • Fact sheets and brochures • Documentation pertaining to medication • Programming documentation • Consent forms for participation • Client files • Correspondence pertaining to clients • Waiting lists • Documentation from case conferences	• Staff contact details list • Rosters and staffing • Staff schedules providing location details (team diary/electronic calendars) • Time sheets and payslips • Leave applications • Workplace health and safety forms • Internal information • Staff and team meeting agendas and minutes • Professional development plans • Position descriptions • Work contracts

Here are some examples of specific documents you need to complete.

WHS reports	All community services workers have workplace health and safety responsibilities. Communicating with others about risks is part of these responsibilities. If you witness a workplace accident involving a person, you may be required to fill out an accident report form. Recording near misses or incidents also assists in making improvements to workplace safety to minimise hazards or risks.
Service data	Service data includes hours spent on each activity, with each person, in each program area, and usually entered directly into an electronic database as required by the funding body/ government department/organisation's board. The data is often collected daily and submitted quarterly.
Organisational reports	Organisational reports include annual reports, strategic plans and business plans. These are generally produced on an annual basis. Projects and programs must complete progress reports at intervals throughout delivery. Evaluation reports are provided following the completion of a project or program.

Comply with procedures and requirements

Some of the procedures that you may need to follow include using a specific format for a document, including specific content and submitting documents within a specific time period.

These procedures help to ensure that organisations have access to accurate information which allows them to respond to client needs and provide quality services. Inaccurate or incomplete information can lead to ineffective or disjointed service provision.

Documentation standards

Documentation standards are used within organisations to ensure the accuracy, integrity and quality of the information they collect. Documentation standards provide workers with guidelines to ensure they information they provide is concise, legible and accurate.

If you are producing informational material on behalf of your workplace then it is also important that you remember to follow the organisational style guide.

Here are some examples of documentation standards for written and electronic documents.

Written	• Letters should be clear, non-cursive and legible.
	• Use correct spelling and grammar.
	• Only use accepted industry abbreviations.
	• Use correct industry terminology.
	• Use objective language.
	• Avoid use of jargon and explicit language.
	• Follow the required format.
	• Use clear, concise and sequential sentences and paragraphs to express information and ideas.
	• Document who the entry is by, including role and contact details/department.
	• Rule off any blank spaces in case notes.
	• Note the time and date in case notes and care plans.
Electronic	• Follow the corporate style guide.
	• Use clear and aesthetically pleasing formatting.
	• Leave ample white space for promotional material.
	• Use approved fonts and appropriate font sizes.
	• Note file pathways.
	• Note version number.
	• Note approval line and dates of consultation if required.
	• Use watermarks where appropriate.
	• Ensure image and video content do not violate copyright laws.

Video: Writing clearly

Watch the following video for tips and tricks on how to make your handwriting clearer and more legible: aspirelr.link/writing-clearly

This is particularly important for workers who need to document events and record information in physical files. Examine your own writing and consider the simple changes you can make to improve legibility. Perhaps write a couple of sentences in your normal handwriting, then reproduce the text with some of the improvements identified in the video. Do a comparison and ask others to read both texts. Which do they find easier to read?

Example

Complete documentation according to legal requirements and organisational procedures

Malcolm is updating a brochure for the community-based health service where he works. The brochure is an important source of information for the community by letting people know what services the organisation provides and how to access them.

Malcolm presents the first draft of the brochure to his supervisor, Robyn, for feedback. Robyn informs Malcolm that although the document is well written and presented according to the organisational style guide, it includes some technical language that the audience may not understand. Robyn reminds Malcolm that in their organisation using plain English is a standard requirement when presenting information to external audiences.

Practice Task 15

Question 1

List three types of information that you may be required to document as a worker in a community service organisation.

Question 2

List three reasons why community services workers need to comply with organisation documentation standards.

Question 3

Match each of the following organisational standards to either format choice.

Note the time and date in case notes and care plans	Written
Note file pathways	Written
Follow the corporate style guide	Written
Letters should be clear, non-cursive and legible	Electronic
Rule off any blank spaces in case notes	Electronic
Use approved fonts and appropriate font sizes	Electronic

5B Use clear, accurate and objective language when documenting events

In the health and community services environments, documents completed by staff are important records.

Health and community service organisations are required to keep records about significant events, such as adverse events involving clients and workplace injuries. You may be required to complete documentation about such events. The language used in these documents must be clear, accurate and objective.

Accuracy

Organisations have different policies regarding record-keeping. Different sectors also have different requirements and standards. Some common principles for good record-keeping in health and community services are listed below:

Record the information as soon as possible after the interaction – this helps to ensure the record is accurate.
Record the date and time of the interaction.
Focus on facts and avoid emotive language.
Do not use abbreviations or jargon.
Record all relevant information.
Try to avoid errors and omissions – if you do make a mistake, you might need to write a new case note or follow the relevant organisational procedure for amending a record (e.g. signing and dating an amendment).
Write legibly/enter data correctly (electronic records).
Sign and date the record.

Clear writing

Every part of the health and community services sector has its own language and jargon. To ensure clarity and accuracy, use plain English and complete words rather than abbreviations.

Here are some other tips for clear writing.

- Use short sentences.

- Cut out unnecessary words (e.g. don't say 'the issue was carefully considered', just say 'the issue was considered').

- Don't use long words when a shorter word can be used instead (e.g. "use" instead of "utilise").

- Be precise – avoid vague terminology, such as "the current circumstances".

- Avoid 'flowery' language (i.e. elaborate and flamboyant language).

Documenting events

Workers within health and community services may witness or become involved in events affecting themselves, their colleagues or their clients. These events will need to be documented in line with organisational standards and procedures.

By documenting events, organisations can review the effectiveness of their policies and procedures and demonstrate compliance with organisational and legislative requirements.

Here are some examples of what you need to document when reporting events.

Information to include when reporting events
When the event took place (time/date)
What you observed (include specific details)
Where the event took place (include details of the location and the environment)
Who was present (include details of what they were doing at the time)
Why the observed event took place (include any relevant behavioural triggers)
Any outcomes or consequences that occurred as a result of the observed event

Objective language

When documenting events, you must use objective language and statements based on fact.

Objective language describes what you have observed or heard, while subjective language is based on feelings, emotions or opinions. Objectivity is important for

accuracy and ensures that documentation is unaffected by judgements, stereotypes, assumptions or opinions.

Here are some examples of objective versus subjective language.

Objective versus subjective language
Objective language: Mrs Smith stated, 'I am feeling depressed'. **Subjective language:** Mrs Smith seemed depressed.
Objective language: Alex rose quickly, slammed the door and raised his voice. **Subjective language:** Alex acted aggressively.
Objective language: When Tam was asked about her parents, she avoided the question. **Subjective language:** Tam didn't want to answer when I asked about her parents.
Objective language: Mark stated that he uses heroin regularly. **Subjective language:** Mark is a drug addict.

Example

Use clear, accurate and objective language when documenting events

Donna is a personal care worker in a residential aged care home. This morning Donna was providing care to Irene, a 70-year-old lady with mild dementia.

Irene's daughter was present at the time, and Donna noticed that Irene seemed uncharacteristically subdued and frightened of her daughter. She also noticed some bruises on Irene's arm. When Donna asked Irene about the bruises, Irene's daughter told her to mind her own business.

Donna felt that she should report what occurred. She was feeling nervous as she did not want to make any false accusation or assumptions.

Donna spoke to her supervisor about the situation. Donna's supervisor informed her that according to their workplace policies and procedures, Donna had a duty of care to report what she had observed, and to do so within 24 hours.

Donna's manager reminded her to record the information in an objective way, based on what she observed.

Practice Task 16

Read the case study, then answer the questions that follow.

Case study

Kathryn is a support worker, and as part of her role she showers and dresses Sammy who lives with an intellectual disability with his parents.

Each time Kathryn provides support to Sammy, she documents the support he receives. Kathryn also documents his behaviour and any events that have taken place while she is with him.

Some days, Sammy can be distressed and is combative towards Kathryn. On those days, she cannot safely assist him to shower. During these episodes, she refers to the the strategies in Sammy'sehaviour management plan to calm him and divert his mood. However, on the days where she cannot safely administer support, she must document that care was not provided and outline the reasons why.

Question 1

List three reasons why it is important for Kathryn to document observed events that take place while she is providing support to Sammy.

Question 2

Which of the following statements relating to objective writing are correct? Select yes or no for each one.

a. Objectivity is important for accuracy and accountability.	Yes / No
b. Professional standards require that reports and documents use objective language based on fact and observation.	Yes / No
c. Objective language used when documenting events, but it is not as important when completing case documentation, such as hazards reports or safety checklists.	Yes / No
d. Objective language describes what has been observed or heard, while subjective language may be based on feelings, emotions or opinions.	Yes / No

Question 3

Which of the following pieces of information should Kathryn document when reporting observations during Sammy's support? Tick all that apply.

❑ The legislation and workplace procedures followed or applied during the event

❑ When and where the observation took place (time/date and details of the location and the environment)

❑ What she observed (including specific details) and who was present

❑ Any outcomes or consequences that occurred as a result of the observed event

❑ Why the observed event took place (include any relevant behavioural triggers)

5C Follow organisational policies and procedures for using digital media

Digital media is any media that relies upon an electronic device for distribution and dissemination.

Digital media includes audio such as music files and podcasts, videos that can be transmitted in a digital format, digital photos, social media posts and broadcasts, such as television and radio, that can be delivered using digital technology.

In a society dominated by digital content and technology, it is important that health and community service organisations use digital media for communication and other purposes. For many people, digital media are the preferred way of communicating, accessing and receiving information.

Your workplace will have communication policies and procedures in place regarding the use of digital media. The aim of these policies and procedures is to ensuring that digital media is used in an appropriate and ethical way that maintains the integrity and credibility of the organisation.

Policies and procedures for digital media

Digital media can be used by community services workers to communicate with colleagues, other professionals, other services and clients themselves. Digital media can also be used for professional development purposes, such as online learning, networking and service promotion.

Although digital media are highly effective tools, there are some specific challenges related to their use. Because they are easily accessible to many people, it is easy to breach privacy and confidentiality laws when using digital media. Such occurrences can result in damage to the reputation of the organisation. Furthermore, while social media pages are a great tool for communication, they can also undermine professional boundaries if they are not used correctly and appropriately by staff.

For these reasons, most health and community service organisations will have digital media policies and procedures which outline the appropriate and acceptable use of digital media and digital technology. Here are some examples of these.

Internet use	• Workers must not use streaming services at work for non-work purposes.
	• Workers cannot use computers or laptops owned by the organisation to access restricted content (e.g., pornography)

Intranet use	• Intranet passwords must not be shared among employees. • All information on the company intranet must be written in a respectful and professional way.
Email use	• 'Reasonable use' policies must be adhered to when using email for non-work purposes • Work emails should incorporate a standard electronic signature • Work emails must include an information disclosure statement.
Social media use	• Workers must not include work-related images, text or other content on their personal social media pages • Only designated personnel can respond to public enquires posted on the workplace social media page • 'Reasonable use' policies must be adhered to when accessing personal social media during work hours
Other policies and procedures for digital media	• Podcast and video content must be approved by the relevant senior staff before it is distributed by the organisation. • Media release forms must be used whenever images of individual staff or clients are included in newsletters and broadcasts. • Tablets, laptops and smartphones owned by the organisation must not be used for non-work purposes during work hours. • 'Reasonable use' policies must be adhered to when using technology owned by the organisation outside of work hours.

Example
Follow organisational policies and procedures for using digital media

Afra works for Empower, a community-based service that provides social support and organises activities for young adults with intellectual disabilities. The service uses social media to showcase and promote activities and connect with existing and potential clients, their families and the local community. Multiple staff are connected to service's social media site via their personal social media accounts.

Afra is responsible for monitoring Empower's social media accounts. This morning, she noticed that aone of the staff had uploaded a photo of himself onto her personal social media account. The photo featured the person at the office with a comment that read, 'Is this what hell looks like? Because it sure feels like it'.

The social media policy states that staff must not post images and references to their work on their personal social media networks. Afra reported the incident to her supervisor who immediately contacted the worker, requesting that he remove the inappropriate content from his account. The worker also received an official warning for breaching the workplace communication policy regarding digital media.

Practice Task 17

Question 1

Which of the following are examples of digital media that may be used in the community services environment? Tick all that apply.

❑ Video informational logs

❑ Audio information recordings such as podcasts

❑ Social media on social network platforms

❑ Email and intranet

❑ Internet browsing for personal interest and research

Question 2

Match each of the following instructions to one of the three choices.

Only designated personnel can respond to public enquires made through this medium.	Web page instructions
This may need to contain an electronic signature.	Web page instructions
Access to explicit or high risk sites may be blocked.	Email instructions
There is a need to adhere to the style guide and contain clear, concise and accurate information.	Email instructions
This may require an information disclosure statement.	Social media instructions
Workers must not display any work-related images, text or other content on their personal accounts	Social media instructions

Summary

- Workers need to follow specific procedures when completing documentation in the workplace.

- Documentation standards are used within organisations to ensure the accuracy, consistency, integrity and quality of the information they collect.

- When documenting events, it is important to be clear and accurate and use objective language.

- Digital media is any media that relies upon an electronic device for distribution and dissemination.

- Most workplaces have policies and procedures in place to ensure the appropriate, ethical and reasonable use of digital media.

- The accessibility of digital media means it is easy to breach privacy and confidentiality laws when using these digital devices and technology.
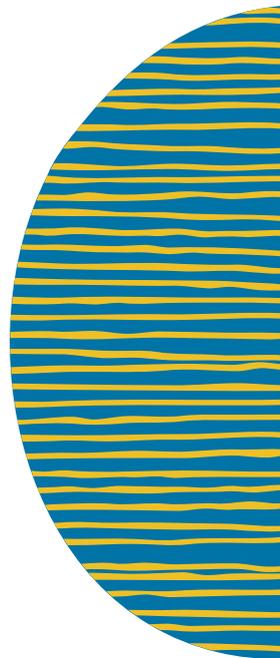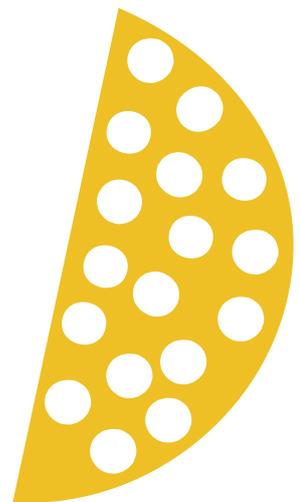
Learning Checkpoint 5

Complete workplace correspondence and documentation

Part A

1. Which of the following apply to the use of digital media in the community services sector? Tick all that apply.

   ❑ Access to explicit or high risk sites requires written permission from supervisor.

   ❑ Types of digital media can include websites, email, internet, intranet, social media, vlogs, podcasts, newsletters and broadcasts.

   ❑ Internet browsing is for professional development and research.

   ❑ Online learning platforms may be accessed for mandatory training modules.

   ❑ Restrictions apply to the download and installation of programs and software.

2. List three reasons why staff may need to document observed events while they are providing services to their clients.

Part B

Read the case study, then answer the questions that follow.

> ### Case study
>
> Ben often sends group emails of images or jokes that he finds humorous to the people he works with. Sonia is his colleague and thinks his jokes are culturaly insensitive. Sonia also thinks that Ben shouldn't be using his work email account for this purpose. She is concerned that, by receiving emails, she will also be breaching the organisation's policy for the use of email. Sonia is not friends with Ben outside of work on any social media networks, but she has heard from other workers that he makes comments about work and describes clients, people and work events on there as well.

1. Provide an example of a policy or procedure statement for each of the following digital media used at the service where Ben and Sonia are employed:

- Social media

- Email

- Podcasts and video

- Intranet

2. Provide three examples of both written and electronic documents Sonia may be required to complete as a worker in a community services environment.

3. Which of the following are examples of standards for written documentation? Tick all that apply.

❑ Use clear, concise and sequential sentences and paragraphs to express information and ideas.

❑ Use language that describes how you and others were feeling at the time.

❑ Document who the entry is by, including role and contact details/department.

❑ Rule off any blank spaces in case notes.

❑ Note the time and date in case notes and care plans.

4. List five electronic documentation standards Ben should be aware of and comply with.

5. To demonstrate objectivity, list five pieces of information Sonia should document when reporting observed events that have taken place in her workplace.

Topic 6: Contribute to continuous improvement

6A Contribute to identifying improvements in work practices

6B Promote and model changes to improve work practices and procedures

6C Seek feedback and advice on developing skills and knowledge

6D Consult with manager regarding access to skill development opportunities
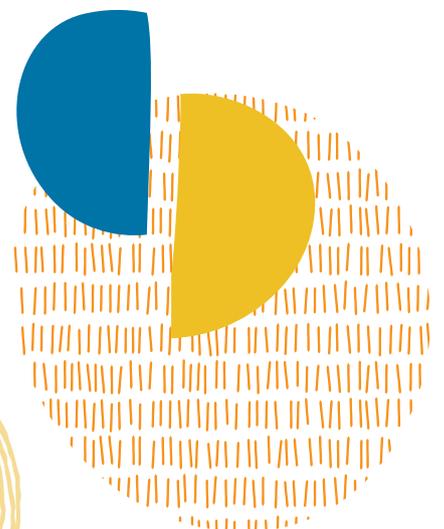
6A Contribute to identifying improvements in work practices

Workers who deliver services have an important role in identifying and voicing improvements to work practices.

Workers' knowledge and experience of the day-to-day practice means that they can provide important insights into what's working and what could be improved in service provision.

To contribute to improvements in work practices, employees need opportunities to share their knowledge and experiences. They also need to feel comfortable and confident about contributing their insights and ideas.

Areas for improvement

Potential areas for improvement could relate to staff, management, relationships or processes. Everyone within an organisation, regardless of their role, will be aware of at least some areas for improvement. Here are some examples:

- Individual team members' understanding of roles and responsibilities
- Employees knowledge and skills
- Communication and relationships between workers and between workers and clients
- Barriers to effective communication and communication breakdowns
- Staff morale and motivation among staff
- Delegation of tasks (e.g. some people have too few tasks, others have too many)

Well-run organisations provide employees with opportunities to identify potential improvements to work practices.

Organisations use ongoing review and evaluation processes to ensure they are providing quality programs and services. This is often referred to as **continuous improvement**.

Continuous improvement
An iterative process that involves an ongoing cycle of identification, planning, implementation and review.

The activities that organisations rely upon to encourage employees to identify potential improvements include:

- informal 'check-ins' between employees and managers
- regular team meetings
- brainstorming sessions
- staff surveys.

You can contribute to identifying improvements to work practices by considering the following questions as you go about your daily work.

- Is there a better way this activity could be done?

- Could this activity be done more efficiently?

- Are there any wasteful or redundant elements to this activity?

- Is the activity achieving what we want it to?

- What would we have to do to improve the process?

Here are some other ways you can contribute to identifying improvements to work practices:

- Ask clients for feedback about the services your organisation provides and share this feedback via the appropriate channels and forums (e.g., team meetings).

- Encourage clients to provide feedback to your organisation via formal channels (e.g., feedback forms).

- Encourage your colleagues to identify and discuss potential improvements in work practices.

- Participate in activities designed to identify and resolve problems (e.g., brainstorming sessions, evaluation activities).

Sharing ideas about improvements

It can be difficult to share your ideas about areas for improvement.

When you share ideas for improvement, you are acknowledging that there are some things your organisation could do better. This may make you feel uncomfortable, disloyal or vulnerable.

Here are some tips for sharing and contributing ideas about improvements in the workplace.

Be specific	Clearly outline the problem. Identify how it affects you, the client and/or the organisation.
Be respectful	Actively listen to other people's perspectives of the problem and potential improvements; acknowledge the merit of other people's viewpoints.
Avoid criticising	Avoid unnecessary criticism of people, teams or the organisation as a whole – focus on the facts and the opportunities for improvement.
Check-in with a trusted colleague	If you're anxious about sharing your ideas for improvement, run it by a trusted colleague first and ask for feedback.
Watch your body language	Your body language can influence how your message is received; avoid defensive body language, speak confidently and maintain eye contact with the person/people you are speaking to.

Sources: https://work.chron.com/share-opinions-coworkers-work-19310.html https://camdenkelly.com/how-to-confidently-share-your-ideas-at-work/

Remember that the ultimate purpose of sharing ideas for improvement is to provide high quality services to clients. It may be difficult to speak out about the things that aren't working, but it is part of your role as a professional in the health or community services sectors.

Video: Continuous improvement

The following video looks at how the employees at a children's service apply the principles of continuous improvement in their everyday practice: aspirelr.link/continuous-improvement

Can you see any similarities between the actions of the staff at this service compared to your own organisation? What actions could your organisation take to improve continuous improvement practices?

Example
Contribute to identifying improvements in work practices

Pia provides home-based respite care to adults with disabilities who live in the community with their carers and families. Pia's supervisor uses a range of strategies for involving staff in continuous improvement activities, such as using brainstorming sessions to discuss ideas for improvements during team meetings.

When she is working with clients, Pia thinks about improvements to work practices. When she has time, she records these ideas in her phone and reviews her notes prior to her regular team meetings. Although Pia believes that her organisation's work practices are generally effective and efficient, she recognises that there is always room for improvement.

Pia shares her ideas about improvements to practices but recognises that she needs to be respectful of her colleagues' points of view.

Practice Task 18

Question 1

Which of the following are examples of potential areas for improvement? Tick all that apply.

❑ Individual team members' understanding of their roles and responsibilities and that of others within the service

❑ Employees' knowledge and skills relevant to their role, organisation and sector

❑ Communication and relationships between workers and between workers and clients

❑ Employees' uptake of sporting and recreational activities for health and wellbeing

❑ Staff morale and motivation among staff

Question 2

List three ways you can help identify improvements to work practices.

Question 3

Which of the following are appropriate ways to share work practice improvements to your manager? Tick all that apply.

❑ Make generalisations and speak vaguely about the problem to avoid upsetting anyone.

❑ Run your ideas by a colleague first, and ask for their feedback to ensure what you are saying is relevant and appropriate.

❑ Be respectful and listen to other people's perspectives of the problem and potential improvements; acknowledge the merit of other people's viewpoints.

❑ Identify the people, teams or the organisation as a whole that are contributing to lagging results or progress.

❑ Use positive body language by speaking confidently and maintaining eye contact with the person/people you are speaking to.

6B Promote and model changes to improve work practices and procedures

Continuous improvement processes help to ensure that services and programs are responsive to the needs of the people and communities who access services.

Change may create stress, anxiety and resistance for employees and for the people who are accessing services. Therefore, it is important for staff to demonstrate flexibility and responsiveness and respond positively to changes in work practices and procedures.

It is important for workers to promote changes designed to improve work practices and procedures, and to model those changes in their everyday practice.

Identify barriers to change

Barriers to change can be categorised into five groups based on the factor causing the resistance to the change process.

The following table outlines some of common barriers to change:

Comprehension	Awareness and understanding are an essential first step in any change process. Being unaware of what needs to change and not understanding why it should change will be a barrier to improvement.
Motivation	An individual will not be motivated to change unless their current circumstances are more uncomfortable than the proposed change, or unless they fear the current circumstances more than the proposed change. Alternatively, a person will be motivated to change if the incentive is large enough to cause them to desire the change.
Beliefs	An individual's beliefs will impact on the way that they behave. If they believe that the proposed change is not worth the effort or financial cost required to achieve the change, then they will resist the change process.
Skills	If an individual does not have the skills or coping strategies required to implement a proposed change, then they may resist any and all changes.
Logistics	Lack of time, money, resources, equipment, infrastructure, scope and priority can also be barriers to improvement.

Promote change

Having a plan and setting realistic expectations can help employers, employees and people accessing the services understand, accept and implement the changes. To promote change in a positive and encouraging manner:

Develop a plan
Having a plan will help you set out and understand the short-term and long-term implications of the changes you are wanting to implement. The plan will help you to understand your vision more clearly and let you present this vision to colleagues and managers more clearly and succinctly.

Research and prepare
You need to be prepared to answer questions that people will inevitably have when you propose and promote changes. Questions around effectiveness, costs or reasons for change will need to be answered with facts in order to encourage support for the change. For example, if you are wanting to implement a manual handling training for employees, research how such initiatives can improve productivity and efficiency, reduce injury or improve employee retention.

Communicate your vision
Use effective communication to promote changes to work practices and procedures. Pay attention to your body language, expression, word choice and tone when communicating face to face. Ensure your verbal communication matches your non-verbal cues. Choose words that your audience will understand and speak at a pace that allows others to understand what you are saying.
Be aware of the different communication channels available to you which can also be used to communicate changes. Pick channels that are appropriate to your audience and purpose. For example, a small procedural change may be communicated via email to management but would best be communicated to your team in a meeting to explain implications and required actions.

Expect resistance
It is only realistic to expect some form of resistance from those impacted by the change. To ease resistance and encourage support, it might be best to promote incremental change – change that is implemented slowly or over time. This can help people warm to the idea and eventually accept it, instead of stressing about all the new things they need to see, do and know.

Ask for feedback
Ask individuals for their thoughts and reactions to the implemented changes. Even if things are running smoothly and people seem receptive to the change, there will still likely be complaints or resistance. While changes can appear good in theory, in real settings they may be problematic. Encouraging individuals to provide ongoing feedback will allow workplace changes to evolve and succeed.

Model change

By modelling changes to work practices, you can help to motivate your co-workers to adopt and adapt to change.

Here are some ways you can model changes to work practices in a positive and supportive way:

Offer to help colleagues who need help with implementing changes by demonstrating what the change looks like in practice.

Speak with your manager about the possibility of mentoring staff who need additional support.

Focus on the positives; if your team is resistant to or cynical about the change, highlight how it will improve service delivery and/or help clients.

Challenge other people's misconceptions about change by explaining the purpose of the change and the ultimate desired outcome.

Participate in team discussions about the progress of and barriers to the workplace change(s).

Source: https://smallbusiness.chron.com/positive-modeling-workplace-35099.html

Example
Promote and model changes to improve work practices and procedures

The service where Pia works has introduced a new requirement for staff to attend a regular all-staff meeting. The all-staff meetings are designed to improve communication between the different teams within the organisation.

Some of Pia's colleagues are critical about the new requirement, arguing that they prefer to be out in the community with clients rather than attend staff meetings. Pia reminds her colleagues to focus on the positives. "If we get to know the other teams better, it will mean we can draw on expertise from across the organisation when we have issues or problems," she argues.

At the next regular team meeting, Pia explains the concerns her colleagues have about attending a regular team meeting at the office when they spend most of their time 'on the road.' Pia is respectful of her colleagues' different viewpoints but again highlights the positives of the change.

Practice Task 19

Read the case study, then answer the questions that follow.

Case study

Kaveh works as an outreach worker at a service proviring allied health services in the community. Kaveh has been asked to investigate why the administration staff have been reporting a significant increase in calls from clients wanting to clarify their appointment times or rescheduling missed appointments.

Kaveh discusses the issue with the managers of the service, who suggest that they use an appointment management system that generates and sends automated appointment reminder text messages to mobile phones.

Kaveh in asked to work with the admin staff and implement the new system.

Question 1

Which of the following techniques can Kaveh use to promote the change to work practices? Tick all that apply.

❑ Ensure the process is carefully planned and not haphazard.

❑ Allow appropriate time is allowed for transition and reflection.

❑ Ensure information about processes is clear, accessible and transparent.

❑ Plan the communication process with staff to ensure information about the process is communicated clearly via email.

❑ Seek feedback from all people affected by the change.

Question 2

List two ways Kaveh could model the improved work practices and procedures.

6C

Seek feedback and advice on developing skills and knowledge

Feedback is a useful way of learning about what you can do to develop your skills and knowledge.

Feedback
Information on a person's performance or task, that can form the basis for improvement.

How you gather **feedback** on your skills and knowledge will depend upon the standard practices in your workplace. Some options include formal performance development processes and individual face-to-face or phone conversations with your manager and colleagues.

As well as providing you with ideas and options for developing your skills and knowledge, feedback sessions can also help you establish connections with your team.

Requiring new skills and knowledge

Any change made to the way you work, the procedures you follow or the systems or equipment you use will require new skills and knowledge. Oftentimes, these skills and knowledge can be easily acquired through informal processes such as coaching or mentoring. Other times, more formal development processes will be required.

The skills and knowledge you need to develop, and the type and duration of the development you require should be discussed with your supervisor or manager. They will have the insight to provide you with details regarding the implications of the work change on your job role and existing competencies. For example, if your organisation was moving away from face-to-face training delivery to a learning management system that delivers training in online modules, you would need to speak with your supervisor to learn about what new skills and knowledge you will need. This would not only involve learning how to access and log in to the LMS, but how to use the various functions of the system, how to record attendance and/or completion of modules, and how to locate your training schedule.

How to seek feedback

Your supervisor and your colleagues will be able to provide you with feedback and advice on your skills and knowledge.

Remember to be respectful when you seek feedback. For example, be aware of people's commitments and competing demands; in most cases it would be appropriate to set up a time to meet with them, rather than expecting them to provide feedback immediately.

Your organisation may also have its own processes and procedures for providing employees with feedback about their skills and knowledge; here are some examples.

Processes and procedures for providing feedback
• Formal performance appraisals
• Regular meetings between employees and managers
• Feedback from people who use the service
• Feedback from other workers
• Informal self-reflection activities.

Receiving feedback can be challenging. For example, it can be difficult to hear that you need to improve a skill that you believed you did competently. Despite those challenges, is important to be respectful during the feedback process. Make sure you thank the person for their feedback, even if you don't agree with it.

Here are some other tips on how you to seek feedback in an effective and efficient way:

Be specific about what you want feedback on (e.g., 'I was wondering if I can get some feedback on my communication skills with clients').

Prepare a set of questions to ask the person you want feedback from and, where feasible and appropriate, give them the opportunity to read the questions before you meet with them.

Ask open questions when seeking feedback. Open questions cannot be answered with a simple 'yes' or 'no' and often begin with the word 'why' or 'how'. Answers to open questions will provide you with a more in-depth and nuanced understanding of what you did well and what needs to be improved upon.

Be aware of how you are feeling when you listen to the feedback and manage your emotional responses appropriately.

Ask for specific examples if you need help understanding the feedback, e.g. 'What would have been a better way of communicating the information?', 'What do you think I should do differently next time?'

Source: https://www.cmtedd.act.gov.au/__data/assets/pdf_file/0003/463728/art_feedback.pdf

Example

Seek feedback and advice for skill and knowledge development

One month ago, Aaron met with his supervisor Cindy to review his performance as part of his organisation's probation period process. During the meeting, Cindy discussed with Aaron that he could improve his performance by collaborating more with his team members.

Aaron found Cindy's feedback difficult to take on. He had always seen himself as naturally collaborative and a team player. Although he feels a bit upset, Aaron thanks Cindy for the feedback and asks her about some tips for improving his skills in this area.

Since that meeting with Cindy, Aaron has worked hard to implement some of the advice she gave him. He involves his co-workers more in his decision-making processes and is more vocal in team meetings, sharing his thoughts and ideas.

Practice Task 20

Read the case study, then answer the questions that follow.

Case study

Kayla has worked as a community services worker for 20 years. The organisation she works for has recently been taken over by a bigger company. As part of the takeover, the new company has implemented its supervision and feedback policies.

Kayla has not received much feedback during the latter part of her career and feels very nervous and uncomfortable about the change. She speaks to her supervisor Douglas about the new procedures and voices her concerns. Douglas assures Kayla that the supervision and feedback processes are actually there to support her and ensure that she is given the learning opportunities that she needs to improve within her current role, and maybe even pursue more experienced positions in the future.

Question 1

List two reasons why Kayla should seek advice and feedback relating to her skill and knowledge development.

Question 2

Which of the following will provide Kayla with feedback that will enhance her knowledge and skill development? Tick all that apply.

- [ ] Discussions held during all-staff meetings
- [ ] Formal performance appraisals
- [ ] Feedback from people who interact with Kayla at work
- [ ] Feedback from Kayla's colleagues
- [ ] Informal self-reflection

6D Consult with manager regarding access to skill development opportunities

Having systems that enable workers to develop their skills is an important part of continuous improvement in the workplace.

The ongoing development of employee skills aligns with the values, principles and standards of the health and community services sectors and is also critical to the overall efficiency and quality of service delivery.

It is important that workers take an active role in their own skill development and consult with relevant staff to identify and access skill development opportunities.

Options for skill development

Formal professional development typically involves some kind of 'classroom-based' learning (e.g. tutorials, lectures, presentations) that is led by a designated 'expert' (or 'experts'). Informal professional development is typically more connected to direct service delivery (e.g. occurring in an actual workplace) and is more self-directed.

Here is a description of some of the most common options for skill development.

Method	Type	Description
Fomal	• Postgraduate university course (e.g. Graduate Certificate/Diploma, Master's degree) • VET sector qualification (e.g. Certificate, Associate Diploma, Diploma) • Non-accredited short-course training	• Typically undertaken by people who have completed an undergraduate degree; full-time courses take 1–2 years to complete • Competency-based qualifications ranging in duration from 6 months – 2 years • Short-term training delivered within a workplace of off-site; may take less than a day and typically not longer than 1 week

Method	Type	Description
Informal	• Supervision	• A formalised relationship between a senior and less senior employee involving helping staff achieve organisational outcomes
	• **Mentoring**	• A supportive relationship between an experienced, knowledgeable practitioner and a less experienced, knowledgeable practitioner
	• **Coaching**	• A peer-to-peer relationship where one practitioner helps another develop skills or develop their practice
	• Communities of practice	• Groups of practitioners who come together to impart knowledge and experience about a shared professional interest

Mentoring
The sharing of knowledge and skills by an experienced person with a less-experienced person.

Coaching
The training and guidance provided by an experienced person to help a learner achieve their goals.

* Adapted from a Practice Sheet produced by the Australian Institute of Family Studies, entitled 'Building the capacity of professionals through post-qualification development and training' (2010)

Consulting with your manager

Be aware of these support systems and actively consult with your manager on skill development options.

The most common workplace tool used to initiate skill development is a performance development appraisal (PDA). A PDA is a strategic meeting that takes place annually between a worker and their manager. The meeting aims to discuss work-related achievements, challenges, changes and developments in the worker's role and skills, and then agree on development strategies to achieve new skills.

Often the initiation of skill development will require support or action from your manager. For example, your manager may need to approve funding for a training course, organise informal work-based development opportunities or revise your work schedule.

Initiate action

The following table provides examples of actions that you could take to initiate action for your own skill development.

Initiating skill development actions
• Request a performance delivery appraisal.
• Identify areas of skills development that align with organisational needs.
• Set specific, measurable, achievable, realistic and time-specific goals.
• Identify internal learning opportunities within the workplace.
• Identify external learning opportunities outside the workplace.
• Seek regular feedback.
• Request a workplace mentor.
• Be accountable to the skill development plan.
• Document your learning.

Example

Consult with your manager regarding options for accessing skill development opportunities and initiate action

Lan has just started working as a disability support worker for an organisation that provides a range of community-based services for adults who have disabilities. Many of the services are provided to people with autism. Lan would like to learn more about the latest ideas and research on how to deliver services effectively to people with autism and is keen to pursue further professional development.

Lan speaks with her supervisor, Della, about the professional development opportunities she is aware of and also speaks to some of her colleagues about the professional development activities they have undertaken that have helped them work effectively with clients. She also contacts an autism awareness organization and asks them if they know of any upcoming workshops or seminars relating specifically to working with adults with autism in community-based settings.

Lan takes some time to review the service delivery outcomes of her organization and takes a proposal to Della outlining why she and the organization would benefit from Lan attending an upcoming one-day workshop. Della agrees that the workshop would benefit Lan and the organization and says she will check with the Finance team about paying for a few of the staff to attend.

Practice Task 21

Question 1

Match each skill development option to its definition.

Coaching	Competency-based qualifications ranging in duration from 6 months–24 months
Mentoring	Short-term training delivered within a workplace of off-site; may take less than a day and typically not longer than 1 week
VET sector qualification	A supportive relationship between an experienced, knowledgeable practitioner and a less experienced, knowledgeable practitioner
Non-accredited short-course training	A peer-to-peer relationship where one practitioner helps another develop skills or develop their practice

Question 2

Which of the following actions could you take to initiate your skill development? Tick all that apply.

❑ Identify my areas of interest that align with organisational needs.

❑ Identify any internal learning opportunities in my workplace.

❑ Research external learning opportunities outside of my workplace

❑ Seek regular feedback from senior colleagues and my supervisor.

❑ Request a transfer becuase I am not being shown new ways to do things.

Summary

- Potential areas for improvement in the workplace could relate to a range of factors including staff, management, relationships or processes.

- Continuous improvement is the ongoing process that organisations use to review and evaluate their services.

- Changes in the workplace can create stress, anxiety and resistance among employees and clients.

- It is important for staff to demonstrate flexibility and responsiveness and respond positively to changes in work practices and procedures.

- Seeking feedback from your supervisor and colleagues is a useful way to identify the skills and knowledge you could build upon.

- Options for skill development are either formal or informal.

- Organisations have support systems in place to help employees with skill development.

- It is important for workers to dedicate time and effort to initiating skill development opportunities.

Learning Checkpoint 6

Contribute to continuous improvement

Part A

1. Which of the following statements are correct? Select yes or no for each one.

a. Formal learning is effective when there is an industry standard or qualification that is required or recognised by the community services sector or your organisation.	Yes / No
b. Informal learning is required when a worker needs to develop industry level skills or knowledge.	Yes / No
c. Coaching is a good option if a worker is interested in progressing to a higher role within their organisation and require further skills and knowledge for the role, or if they are acting in a higher position.	Yes / No
d. Completing a formal course of study learning is a quick method for developing skills when a person needs to acquire them in a short period of time.	Yes / No
e. Conferences and workshops enable workers to keep abreast of current issues and developments in the sector.	Yes / No

2. List three potential areas for improvement in health and community services organisations?

3. Which of the following actions can help identify improvements to work practices. Tick that apply.

- ❑ Conducting brainstorming sessions with staff

- ❑ Asking clients for feedback on services and support

- ❑ Participating in formal learning opportunities

- ❑ Holding and participating in regular team meetings

- ❑ Sending out staff surveys

4. Suggest three things to consider when voicing your suggestions for improvements in work practices to your manager.

Part B

Read the case study, then answer the questions that follow.

Case study

Aarav is developing a training session for community services workers that will explain ways in which they can contribute to improvements in their workplace. Aarav wants to make sure that he doesn't exclude any important information that relates to the community services sector, so he asks Vivaan to review his training content. Vivaan has been working across the community services sector for over 30 years and has a wealth of information on links between services, service models, feedback processes and opportunities for skill and knowledge development.

1. Suggest three ways Aarav can encourage attendees at the training to promote improvements in workplace practices.

2. Which of the following actions can Aarav take to model workplace improvements to the people attending the training? Tick all that apply.

   ❑ Ensure information about processes is clear, accessible and transparent.

   ❑ Conduct brainstorming sessions.

   ❑ Ensure appropriate time is allowed for transition and reflection.

   ❑ Acknowledge and respond to individual needs of workers and people accessing support.

   ❑ Promote incremental change to overcome resistance and ease people's apprehension.

3. Suggest at least three strategies Vivaan could recommend for staff to seek feedback and advice on their knowledge and skill development.

4. Which of the following are advice that Aarav could provide about giving and receiving feedback? Tick all that apply.

❑ Provide positive comments about areas the worker is performing well in.

❑ Describe the situation or issue that you want to provide feedback about.

❑ Focus comments on examples of poor work performance.

❑ Ask the person for their view of the situation.

❑ Agree on a summary of the situation or issues.

5. Provide at least two reasons why Aarav might recommend that a worker consult with their supervisor about skill development options.

Glossary

Active listening

Concentrated listening and non-verbal encouragement indicating an understanding of what is being said.

Clarification

Checking to make sure a person has correctly understood what another person is communicating.

Coaching

The training and guidance provided by an experienced person to help a learner achieve their goals.

Coercive approach

Strategy to encourage change that relies upon external motivations, including the communication of adverse consequences.

Collaboration

An approach that involves people working together to accomplish common goals.

Confidentiality

The principle of keeping personal information private, unless the person consents to sharing the information with other parties.

Confrontation

Bringing people together face to face to address a conflict.

Consent

To give permission or to agree to something.

Continuous improvement

An iterative process that involves an ongoing cycle of identification, planning, implementation and review.

Culture

The social behaviour and norms found in human societies, which are influenced by race, religion, economic status, family life, health, educational or governmental system of their members.

Debriefing

Asking a series of questions in a structured way immediately following an exercise or event that looks to review or evaluate the actions taken.
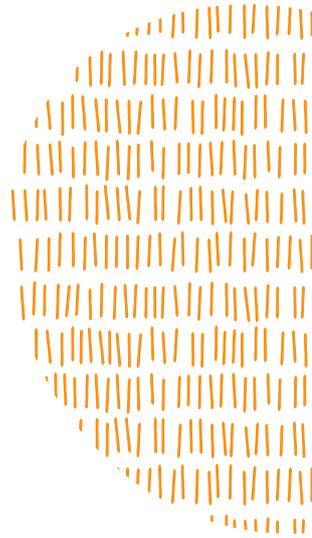
Dignity of risk

A person's right to dignity and choice, upheld in legislation and service standards, to ensure that duty of care or safety is not used as a reason to limit a person's freedom of personal choice.

Disclosure

The act of sharing or releasing private or personal information.

Duty of care

A moral or legal obligation to ensure the safety and wellbeing of other persons.

Ethics

Moral principles that govern a person's behaviour.

Feedback

Information on a person's performance or task, that can form the basis for improvement.

Interpreter

A person or technology that translates speech from one language to another to assist another person's understanding.

Mentoring

The sharing of knowledge and skills by an experienced person with a less-experienced person.

Motivational interviewing

A method that encourages a person to identify their own motivations for change and strengthen their commitment to a specific goal.

Person-centred

Getting to know each person and taking time to learn about their individual preferences, needs and goals.

Privacy

A fundamental human right designed to protect people from intrusion and to selectively express themselves.

Rights-based

Situates the rights of service users at the centre of service provision, with a focus on accessibility, autonomy and equity.

Unresolved conflict

Conflict that keeps recurring, or escalates, and the parties involved are unable or unwilling to come up with constructive solutions to the conflict.