

Unit 33: Working in Partnership with Families to Support Individuals

Unit reference number: Y/616/7350

Level: 3

Unit type: Optional

Credit value: 4

Guided learning hours: 27

Unit summary

This unit will give you the knowledge and skills required to work in partnership with families to support individuals. It is aimed at those working in a wide range of settings.

This unit gives you an understanding of how to establish and maintain positive relationship with the family and how to work with them in order to give the best care and support to the individual. The unit will enable you to help families to access the support they need in their role as carers. You will also learn how to record information and to give feedback to the family on the success, or otherwise, of the partnership and the effect on the individual.

Learning outcomes and assessment criteria

To pass this unit, the learner needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria outline the requirements the learner is expected to meet to achieve the unit.

Learning outcomes	Assessment criteria
<p>1 Understand partnership working with families</p>	<p>1.1 Analyse the contribution of families to the care and/or support of individuals</p> <p>1.2 Identify factors that may affect the level of involvement of family members in care and/or support</p> <p>1.3 Describe dilemmas or conflicts that may arise when working in partnership with families to support individuals</p> <p>1.4 Explain how the attitudes of a worker affect partnership working with families</p>
<p>2 Be able to establish and maintain positive relationships with families</p>	<p>2.1 Communicate with family members in ways that respect their culture, experiences and expertise</p> <p>2.2 Identify ways of maintaining dependability in carrying out actions agreed with families</p> <p>2.3 Outline principles for addressing dilemmas or conflicts that may arise in relationships with families</p>
<p>3 Be able to plan shared approaches to the care and support of individuals with families</p>	<p>3.1 Plan shared approaches to the care and support of individuals with families</p> <p>3.2 Agree own role, role of family members, and roles of others in supporting the individual</p> <p>3.3 Agree person-centred approaches and ways of working with family members</p> <p>3.4 Evaluate ways to manage risks associated with sharing care or support</p> <p>3.5 Agree with the individual and family members processes for monitoring the shared support plan</p>

Learning outcomes	Assessment criteria
<p>4 Be able to work with families to access support in their role as carers</p>	<p>4.1 Work with family members to identify the support they need to carry out their role</p> <p>4.2 Provide accessible information about available resources for support</p> <p>4.3 Evaluate different types of support and resources available to the family</p>
<p>5 Be able to exchange and record information about partnership work with families</p>	<p>5.1 Demonstrate the exchange of information with the individual and family members about implementing the care plan</p> <p>5.2 Record information in line with agreed ways of working about: <ul style="list-style-type: none"> • progress towards outcomes • effectiveness of partnership working </p>
<p>6 Be able to contribute to reviewing partnership work with families</p>	<p>6.1 Agree criteria and processes for reviewing partnership work with families</p> <p>6.2 Agree criteria and processes for reviewing support for family members</p> <p>6.3 Carry out own role in the review of partnership working</p>
<p>7 Be able to provide feedback about support for families</p>	<p>7.1 Provide feedback to others about the support accessed by family members</p> <p>7.2 Report on any gaps in the provision of support for family members</p> <p>7.3 Evaluate ways to challenge information or support that is discriminatory or inaccessible</p>

Content

What needs to be learned

Learning outcome 1: Understand partnership working with families

Family's contribution to the care of the individual

- An individual is someone requiring care or support.
- Regular contact with the individual.
- Explain and support treatment methods to the individual.
- Family's commitment to their relationship with care professionals.

Factors that affect the level of involvement

- Functionality of the family.
- Separation of significant members of the family.
- Language barriers.
- Cultural beliefs and expectations.
- Religious beliefs.

Dilemmas or conflicts that may arise

- Personal or cultural beliefs and values.
- Individual differences between family members regarding the treatment of the individual.
- Emotional trauma of family members.

Influence of values and attitude of the worker on working in partnership

- Conflict of personal and professional values.
- Use of communication models:
 - expectancy theory
 - Argyle theory.

Learning outcome 2: Be able to establish and maintain positive relationships with families

Communication

- Communicate in ways that respect their culture, experiences and expertise.
- Communication skills, e.g. respectful, non-judgemental, limited use of jargon.

Agreed actions with families

- Attendance and punctuality regarding agreed meeting times.
- Reliable research:
 - support groups, e.g. Alzheimer's Society, Teen Challenge UK
 - physical resources, e.g. walking frames, commodes
 - transport
 - financial support
 - training for family carers.

What needs to be learned

Principles for addressing dilemmas or conflicts

- Professional codes of conduct, e.g. promote and uphold the privacy, dignity and respect, health and wellbeing of individuals and families; work in collaboration with colleagues to ensure the delivery of high-quality, safe and compassionate healthcare and support.
- Awareness of 'Compassion in Practice', including:
 - care
 - compassion
 - competence
 - communication
 - commitment.
- Work and personal ethics and values.

Learning outcome 3: Be able to plan shared approaches to the care and support of individuals with families

Others may include the following

- Organisations providing support to family members, e.g. national organisations like the Alzheimer's Society, Age UK, Parkinson's UK.
- Local organisations, e.g. community groups, religious groups.
- Other professionals, e.g. GP, health visitor, community nurse, spiritual leaders.

Outcomes of partnership working

- Work flexibly in response to family, agree types of outcomes preferred.
- Work to achieve positive outcomes and sustained recovery, team working, agree primary roles within team.
- Joint care planning, discuss and agree care plan.
- Shared goal setting, use of SMART goals.

Roles of all those involved in partnership working

- Develop mechanisms for family members to rely on to improve life experience, e.g. establish links with health and social care professionals, local support groups, and social groups.
- Act as a liaison between families and health and social care organisations, encourage social cohesion and interaction between professionals and social groups.

Person-centred approaches

- Describe the framework of person-centred care and the benefits of this type of care plan.
- Explain the benefits of personalisation of care and the role of professionals, family carers, and others involved in this type of care plan.
- Develop a shared care plan for the individual, including input from family, and carers and other professionals.

What needs to be learned

Management of risks

- Risks associated with:
 - empowerment of individual family members, decisions regarding care of the individual, e.g. medical, financial, social involvement etc.
 - safeguarding of vulnerable adults – Safeguarding Vulnerable Groups Act 2006
 - person-centred support of the individual by family members, i.e. physical care, financial care, social support etc.

Learning outcome 4: Be able to work with families to access support in their role as carers

Processes for supporting the shared plan

- Shared meetings.
- Provide accessible information about available resources for support.
- Work with family members and others to access resources.

Resources

- Resources, e.g. materials and equipment, training, financial support, transport, support groups, therapeutic services, other professionals.

Learning outcome 5: Be able to exchange and record information about partnership work with families

- Agreed ways of working will include policies and procedures where they exist.

Exchange information

- Implementation of shared plan.
- Changes to needs and preferences.

Record information

- Progress towards outcomes.
- Changes to needs and preferences.
- Use of electronic recording systems.
- Use of non-electronic recording systems.
- Confidentiality in recording information.

What needs to be learned

Learning outcome 6: Be able to contribute to reviewing partnership work with families

Criteria for reviewing partnership working

- Constructive feedback, including achievement of shared outcomes, and completion of goals set.
- Review of shared meetings, including venue, time, attendees, agenda items.
- Processes for collecting available data, including organisational processes, and computer and paper-based processes.

Criteria for reviewing the support for families

- Discussion of support mechanisms available for family members.
- Discussion of criteria to be used for review, e.g. achievement of goals set, successful completion of agreed outcomes.
- Discussion of processes to be used for review, e.g. reflection, future monitoring, collaboration.

Own role in review of partnership working

- Negotiator, advocate, counsellor etc.
- Areas for discussion and review.
- Purpose of review.
- Roles of individual and family members in review:
 - shared meetings with individual and family members to review partnership
 - list and organise areas for review.

Learning outcome 7: Be able to provide feedback about support for families

Feedback on the support accessed by families

- Types of support accessed by the family, e.g. physical resources, training, transport, emotional support.

Gaps in the provision of support

- Day care support for the individual.
- Respite care.
- Home care support, e.g. voluntary organisations.
- Local groups, e.g. religious groups.

Information or support that is discriminatory or inaccessible

- Discrimination based on:
 - age
 - gender
 - religion
 - culture
 - disability, e.g. access to local voluntary groups providing physical and/or emotional support.
- Information that is inaccessible regarding choice and/or methods of treatment for the individual, e.g. medical notes, professional multidisciplinary meetings.

Information for tutors

Suggested resources

Books

Cape C et al – *Preparing To Work in Adult Social Care Level 3* (Nelson Thornes Ltd, 2012) ISBN 9781408518137
Nolan Y – *Health and Social Care (Adults)*, 3rd edition (Heinemann, 2011) ISBN 9780435031978

The Health Foundation – *Person-centred Care Made Simple* (The Health Foundation, 2014) ISBN 9781906461560

Other

Burbage D – *The New Social Care: Strength-based Approaches* (2020PSH in partnership with Shared Lives Plus, 2013)

Kearney P, Levin E, Rosen G – *Working with Families with Alcohol, Drug and Mental Health Problems* (SCIE Report 2, June 2003)

Websites

www.alzheimers.org.uk	Factsheets on the care of dementia patients.
www.basw.co.uk	The British Association of Social Workers – a professional association for social workers, includes a code of ethics.
www.communitycare.co.uk	Guidance for social workers on managing risks in self-directed support by SCIE 2011.
www.mindtools.com/pages/article/good-relationships.htm	Professional social worker relationships when working with clients.
www.nice.org.uk	National Institute for Health and Care Excellence – guidance on tools and resources.
www.skillsforcare.org.uk	Code of conduct for care workers.

Assessment

This guidance should be read in conjunction with the associated qualification specification for this unit.

This unit is internally assessed. To pass this unit, the evidence that the learner presents for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria, and the requirements of the assessment strategy.

To ensure that the assessment tasks and activities enable learners to produce valid, sufficient, authentic and appropriate evidence that meets the assessment criteria, centres should follow the guidance given in *Section 8 Assessment* of the associated qualification specification and meet the requirements from the assessment strategy given below.

Wherever possible, centres should adopt an holistic approach to assessing the units in the qualification. This gives the assessment process greater rigour and minimises repetition, time and the burden of assessment on all parties involved in the process.

Unit assessment requirements

This unit must be assessed in accordance with the assessment strategy (principles) in *Annexe A* of the associated qualification specification.

Assessment decisions for learning outcomes 2, 3, 4, 5, 6 and 7 (competence) must be made based on evidence generated during the learner's normal work activity. Any knowledge evidence integral to these learning outcomes may be generated outside of the work environment, but the final assessment decision must be within the real work environment. Simulation cannot be used as an assessment method for learning outcomes 2, 3, 4, 5, 6 and 7.

Assessment of learning outcome 1 (knowledge) may take place in or outside the work environment.