SEATON VALLEY HIGH SCHOOL

TOPIC AREA 3: EFFECTIVE COMMUNICATION

R032: Principles of care in health and social care settings

AIM FOR DISTINCTION*

Effective communication: sharing and understanding information, feelings and choices in ways suited to the person and situation.

3.1 VERBAL COMMUNICATION



Adapt type/method: fit age, needs, preferences and the situation. Check what works for this person.

Clarity: pronounce words clearly to avoid confusion.
Empathy: recognise feelings so users feel understood.
Patience: allow replies without interrupting.
Vocabulary: use familiar words; explain jargon.
Tone: calm and respectful, to reassure.
Volume: audible and discreet; avoid shouting.
Pace: allow processing time and check understanding.
Team working: willingly contribute relevant, accurate information so colleagues coordinate care.

3.2 NON-VERBAL COMMUNICATION



Adapt type/method: suit personal needs, culture and situation; never force eye contact or humour.

Eye contact: appropriate to the person; show interest.
Facial expressions: a warm smile can reassure.
Gestures: point to a diagram to support meaning.
Positioning: face the user at a suitable height; allow comfortable space and respect personal space.
Positive body language: open, relaxed posture; avoid crossed arms/legs.
Sense of humour: use sensitively, when appropriate, to build rapport.

3.3 ACTIVE LISTENING



Listen, check meaning and respond; show that the person has your attention.

Open, relaxed posture: be approachable.
Eye contact/interest: focus on the speaker.
Nodding agreement: acknowledge appropriate points.
Empathy: reflect feelings: "You seem worried."
Clarify: ask questions to check meaning.
Summarise: repeat key points in your own words.

Benefits: checks accuracy; helps users feel valued.

3.4 SPECIAL METHODS OF COMMUNICATION



Advocate
Helps users express wishes and understand rights so they can influence care.



Braille
Raised-dot tactile code gives Braille readers with sight loss access to information.



Voice-activated software
Spoken input creates text or commands for users with limited hand mobility.

Interpreters
Convert between languages so users understand information and express choices.

Makaton
Speech, signs and symbols aid expression for users with communication difficulties.

British Sign Language (BSL)
Complete visual language; a BSL interpreter helps a BSL user join a consultation.

3.5 WHY COMMUNICATION MATTERS



Good: Informed users can choose (**empowerment**). Listening builds **trust** and helps people feel **valued and respected**. Jargon-free explanations **reassure**; shared needs guide care and protect rights.



Poor: Unclear or fast speech causes misunderstanding or missed information. Inaccurate records risk errors or harm. Patronising language can cause distress or upset.

AIM FOR DISTINCTION*: identify the skill + describe the action + explain the effect + link to the scenario

ANSWER THE COMMAND

Identify/state: name it.
Describe: give relevant detail.
Explain: show how or why.
Analyse: connect cause and effect.
Discuss: explore relevant points.
Evaluate: weigh factors and justify a judgement.

ORIGINAL PRACTICE: EXPLAIN TWO BENEFITS

Scenario: Sam has hearing loss and is anxious at a hospital appointment.
Question: Explain two benefits of suitable non-verbal skills.

Gestures: The nurse points to a diagram while explaining. Visual cues help Sam understand information he may not hear clearly.

Positioning: Sitting facing Sam at the same height avoids standing over him. This can help Sam feel respected and more confident to ask questions.

EXAMINER CHECKS

Use the **category** asked for. BSL, Makaton and Braille are **special methods** in R032.
Give the number of **distinct examples** requested; space and height are both positioning.
Develop each point using relevant scenario facts.

Sources (click): OCR J835 v6, pp.21-22; SAM Q1/Q3; June 2025 MS Q2/Q3/report; Jan 2025 report Q4; NHS; RNIB; Makaton/BDA; Microsoft.