Unit Title: 311 - Provide support to maintain and develop skills for everyday life
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Introduction
The assignment aims at providing support to maintain and develop skills for daily life activities. The knowledge and skills that are considered while treating individuals who needs complete care and the significance of retaining, regaining and developing their everyday life skills is highlighted in this assignment. Major emphasis is provided based on the context of supporting skills for everyday life, how to support individuals in planning to maintain and develop skills for daily activities, support individuals to retain, regain and develop skills for daily activities and ultimately evaluating the support provided in developing and maintaining daily life skills and knowledge.

LO 1: Understand the context of supporting skills for everyday life

1.1 Compare methods for developing and maintaining skills for everyday life
Skills for everyday life also known as activities of daily living enables an individual in performing varied tasks so as to meet ones daily requirements and needs (Peteiro, 2015). The skills for daily life incorporates communication, safe and secure environment, food, personal activities such as cleaning and dressing, working and playing, sleeping, etc.

While looking after people and assisting them in doing their daily tasks, I ensured that such activities are performed in partnership as I recognised enhanced partnership working would facilitate in supporting individuals to take decisions of their choice regarding the take that they receive and also supports people in performing their daily tasks by themselves to their possible extend (Peteiro, 2015). Through following this method, I had been able to enable people in performing their personal tasks by themselves and develop a feeling of self-esteem within them.

Too much of care offered to people would worsen their skill of undertaking their personal activities by themselves. To resolve the issues such as individuals losing their capability of performing personal tasks alone which once they had been doing alone, individuals losing their interest in learning new skills and losing their power in regaining their skills that was performed by themselves long ago, etc, I focussed on the procedures and practices that assure that care offered to individuals is restricted and controllable.
Being a service provider at a health and social care unit, I comprehended the appropriate and best methods in availing support to people so as to enhance or sustain their daily activities. Therefore, I focussed on understanding the basic difference between doing activities for people and performing activities with people (Moss, 2015).

1.2 Why individuals may need support to maintain, regain or develop skills for everyday life

I encountered that people face with different forms of disabilities at the different stages of their life. As per the study enhanced by Glasby (2012) the major problems that would affect an individual’s daily activities are learning disabilities, physical health, frailty, mental health, social isolation and physical disability. This would apparently impact their daily activities and they might need support to retain and develop skills for everyday life. This can be anything such as accidents, strokes, illness etc which can results in physical or mental support needs. Hence, I facilitated people with sufficient care support such as physical support, emotional support etc and assistance in performing one’s personal needs and necessities by themselves. Additional support is provided to people with critical health issues such as individuals with autism in order to make them cope with situation and continue with the course they enjoys.

As per the findings of Bannister (2011) preventing an individual from doing his/her daily activities would lead to conditions such as inconvenience, discomfort, pain, distress, isolation and humiliation. In may practice, to prevent such conditions, I equipped them with the awareness based on their daily activities which availed me in understanding the difficulties faced by each individual at each stage of their life. I also reminded them about hygiene on a frequent basis and encouraged them to be self-confident and self-esteem.

I also encouraged people to do as much for their own as possible to retain their autonomy and physical capability and motivated disables to enhance their own autonomy and potential. Also, measured the people’s capability to carry on activities in daily life and set my own goals which had been agreed by care team and individuals.

1.3 Maintaining, regaining or developing skills can benefit individuals.

Maintaining, regaining and developing daily activities would function as an added advantage on the wellbeing of each individual in dynamic and varied spectrums. I gained attention of service users through creating awareness on the major benefits of maintaining, regaining and
developing everyday skills such as physical wellbeing, emotional wellbeing, social wellbeing and psychological wellbeing. A key aim of every health and social care worker is to safeguard and promote individual wellbeing. As a care taker, I assured assistance to every individual and group of individual’s and with complete support in performing daily activities and thereby, promoted wellbeing and happiness among individuals.

In addition, through helping individuals be independent, I support them in:

- Effective social wellbeing which is that experience of an individual in connection with the strength of relationship that the individual possess with others in the same society (Hall, Wren and Kirby, 2013)
- Psychological wellbeing which is the combination of positive environment, social life and functional effectiveness (Hall, Wren and Kirby, 2013).
- Emotional wellbeing which is the ability of an individual in comprehending the emotional values as well as utilising these values to further move proceed in life in a positive direction (Hall, Wren and Kirby, 2013).
- Physical wellbeing incorporates exercising, good nutrition and leading a healthy lifestyle. Being active is a significant part of indulging wellbeing in enhancing daily routines (Hall, Wren and Kirby, 2013).

The varied steps that I use in accordance to maintain retain and develop skills are:

- Efficient strategies in treating a person who is distressed.
- Efficient communication in resolving reason for distress.
- Ensure safety of the individual.

I also supported individuals to communicate their desires, needs and preferences, and to identify their present skills and ability. This in turn benefited me to determine and communicate their requirements and prioritise them in terms of skills they need to handle their livelihood in medium and short term.

**LO 2: Be able to support individuals to plan for maintaining and developing skills for everyday life**

**2.1 Work with an individual and others to identify skills for everyday life that need to be supported**

As per the observation of Atwal and Jones (2009) the everyday skills of an individual has to be identified, developed and maintained. In order to help individuals to identify the everyday
skills, I encouraged them to partner with individuals and others. I also provided them with necessary support on the basis of previous health and social care history, discussions with the others, evaluation and observations of the individual and on the basis of discussions with the individual itself.

The everyday skills of an individual include preparing meals, personal hygiene, mobility and transfers, eating, dressing and undressing. Hence, for supporting an individual to identify their skills, I assessed the health and social care history of the individual and evaluated their everyday skills that needs prime support. As stated by McKeown, Malihi-Shoja and Downe (2011) specialists, line managers, team members, family and advocates are involved in identifying the skills of an individual and are important for the individual’s wellbeing. Thus, I assured support for individuals to work with others to identify their everyday skills and also to identify and assess their daily needs. I also assessed the needs of the individual by speaking to their doctors, friends, family and mental health team which in turn assisted me in identifying their skills that are getting worse every day.

It is my duty to assess the daily activities of each individual and identify the gaps in their everyday skills that need strong support and guidance. Therefore, I examined and assessed their daily tasks to understand the everyday skills of the individual that need special care and support.

2.2 Agree with the individual a plan for developing or maintaining the skills identified

In my practice, I implemented a plan to address the everyday skills of individual that need support and guidance. Short term plans are designed for removing or lessening the risks associated with identifying the everyday skills. Also, I formulated and implemented short-term plans before formulating the long-term plans. Whether it is a long term or short term plan, I always discuss with the individual and agree with them for implementing or maintaining the skills determined.

To develop a plan for maintaining and improving the identified everyday skills of individual, I discussed with the individual on the outcomes gained by them by associating with others through which I had been able to identify their everyday skills that need support and development. Thus, by identifying the needs of the individual and by consulting with the family members or friends of the individual I designed a plan for maintaining and developing
their everyday skills. Discussion with others associated with the individual would help the health and social care worker to identify and develop plan for marinating and controlling everyday skills (Glasby, 2012).

Moreover, I also focussed on developing an effectual plan by discussing with the individual and family about the benefits they gain from following the plan formulated by me for improving the skills of the individual. I also ensured better medical and mobility aid to the individual who is weak in performing the mobility skills. Also, I was able to provide proper guidance for the individual when they feel difficult to converse with others.

2.3 Analyse possible sources of conflict that may arise when planning and ways to resolve them

One of the major reasons for the evolution of conflict is the background of the individual as per stated by Glasby and Dickinson (2009); especially in elderly person who has lived independently and are not comfortable in being cared and served for. Moreover, the denial for the necessity of support can cause pressure on the individuals as well as the caretaker. Hence, as a service provider, I identify the individual level of comfort and plan schemes in such a way that the individual does not feel pressured. Some of the general tactics that I followed in order to avoid and resolve the conflicts include respecting the feelings and opinions of the individual, creating a friendly atmosphere and hence improving the communication with the individual ad hence there by discussing the ways to meet the objectives.

In cases where the situation is uncontrollable, I also seek and prefer the opinion of senior care takers. But individually, I prefer in briefing the importance of participation and its benefits to be individuals but leaving the final choice to them.

According to the opinion of Lymberry and Postle (2015) the major situations that lead to conflict involve family, friends, colleagues and policies. To prevent these kind of situations that lead to conflicts, I consider that it is mandatory to share the ideas and opinions during the decision making process to identify the preferences and wishes of the individuals and resolve them accordingly.
2.4 Support the individual to understand the plan and any processes, procedures or equipment needed to implement or monitor it

One of the most important aspects on health and social care of elderly individuals is the surety that the individual is fully aware and understands the equipment, procedures, processes and plans that might be necessary for the wellbeing of the individual (Walsh et al., 2011). In my practice, I make sure that the care plans are discussed and implemented only under the agreement of the individuals. But I also make sure that in some critical cases, the individual’s might not be favourable to the plan strategies.

I achieved the attention of service users by visiting them regularly and understanding their progress with each visit and make the necessary changes in the plan. For those who find it difficult to understand the plan even after briefing the procedure it is recommended to provide support and guidance in each stage of the care plan (Agich, 2012). So I brief the individual about the schedule and the time the procedures will be carried out. I believe that in order to do effective work it is important to work as a team in partnership with the individuals and identify their capabilities and the skills that can be developed. Also I make a record of the performance of the individual to keep in track the progress.

LO 3: Supporting individuals to retain, regain or develop skills

3.1 Providing agreed support to develop/maintain skills

It is significant to offer assistance to retain or develop every day skills as it will motivate the active participation of the person (Atwal and Jones, 2009). Hence, I support person’s participation in care by preparing updated individual assessments which consisted details on what assistance individuals needed and what they can do for themselves. As a service provider, it is my responsibility to recognise what are the preferences and skills of individuals through frequently reviewing the care plan and maintaining effective relationship with them. Considering each person’s condition, I assure that activities are controllable. For instance, in my practice, if a person cannot able to prepare food and if had a poor diet, I provide support through delivering details on healthy food options and thus support individual participation through letting that person choose which food they would like to have. I focus on enhancing self-confidence and reducing lack of choice barriers which plays a major role in preventing the person from active participation.
As per stated by Doel (2009), one among the major factors to support individual participation in their own care is to offer encouragement and constructive feedback that develops on the person’s strength. So I focus on involving individuals while I am doing any works in which they have particular interest. In case, if I observe some person has cooking skill, I assure not to cook alone for them, rather ask to work with me so they develop these skills. However, support is provided in certain areas, like showing them on how to cut vegetables, how to grate carrots etc and having them performing the rest and then demonstrating them on how to cook. I also encourage people to write-down the steps involved so they can be referred in future. I frequently adopt this feedback practice to support in active participation through motivating individuals and enhancing communication (McKeown, Malihi-Shoja and Downe, 2011).

3.2 Providing positive and constructive feedback to the individual

I always focus on providing constructive and positive feedback to help motivate the active participation of persons so that they can develop in their new skill. To enhance this practice, I assured communication on what a person does well and how the person can enhance on a skill. This process of communicating feedback with service users were used to encourage and help individuals and to create a positive approach inside them (Rhodes et al., 2014). For instance, if a person wishes to cook a new dish they have not yet tried before, reminding them that they have prepared the ingredients before but in other dishes and assuring them how effectively they performed would be more effective feedback before their direct involvement in cooking. I also provide constructive feedback which comes in criticism category to help individuals by providing my valuable overview and new perspective into the situation. For example, if one of my service-user wish to prepare beef steak and if it got overcooked or burnt, I give feedback as ‘future to maintain it at a lesser heat, however, it was a good trial’. I support individuals through this to understand what could be improved in their present work and at which area more attention would be given in future works (Atwal and Jones, 2009).

According to Crowe et al. (2011), case studies and reviews will help to reflect on the various types of case study plan, to answer particular research question and to identify the specific pros and cons of employing any particular technique. So, I also performed frequent case reviews and investigations to help to reveal evidence on what impacts the positive and constructive feedback has had on the person and how they feel or react to the feedback in order to help myself to encourage participation of individuals in a more positive and reflective way.
3.3 Actions to take if an individual becomes distressed or unable to continue

As per Doel (2009), while doing everyday skills, some persons may become distressed or be not capable to carry on with the activity. Number of reasons could be identified for this distress behaviour such as health condition, communication, care plan activity etc.

Once I come into contact with a person who becomes unable to continue or distressed, I make sure that they will not come to damage through communicating and thereby enhancing their confidence level. For instance, if I see an agoraphobia individual who is anxious or distressed about an unfamiliar location, I accompany the individual and reassure the individual communicating that the place is very near and they require only 5 minutes to reach that place. I also communicate with the individual that I am clearly aware and recognises their distress and states how well the person is performing with the everyday skill. I also focus on enhancing the individual’s confidence and self-esteem by talking all the time with him and saying that he/she will be alright. Regarding the seriousness and risk of situation, I looked for assistance or advice from senior colleagues too to make effective decisions regarding the actions that need to be carried out. I also ensured that the person remains safe and secured.

Moreover, in certain cases, I have made an effort to suggest stopping the specific activity which is distressing the person. Stopping the distressing activity ought to generally be an option after other choices have been attempted (Bailey-McHale and Hart, 2013). So I reassess the situation twice to make effective decisions. Hence, I also keep updated record and report on the distress that the person faced for the care plan and if essential it is reassessed.

LO4: Be able to evaluate support for developing or maintaining skills for everyday life

4.1 Work with an individual and others to agree criteria and processes for evaluating support

I work with the individual and others for assessing and agreeing the criteria and process for evaluating the support needed by individual for improving everyday skills. Lloyd (2010) cited that evaluation criteria is designed on the basis of objectives set by the health and social care worker in the plan developed for maintaining and controlling everyday skills. Being a care taker, I assessed whether the needs of individual is accomplished or not. I have also analysed the extent to which the individual needs are achieved and also assessed whether the care provided to the individual is useful or ineffective. According to the observations of
Lloyd (2010) different types of care has to be provided to the individual on the basis of their everyday skill that needs to be strengthened and maintained. I focussed on the processes and criteria for evaluating the support for individual have to be personalised on the basis of needs and care plan of individual.

The care taker should be keen enough while providing care to the individual and it is necessary that the care taker should discuss with the individual and others involved in the plan about the criteria and process that is required for evaluating the support. When it comes to evaluation, I observe whether the below cited aims have been satisfied;

- Has the goal been attained?
- If not, how much improvement has been made?
- Are various types of care required?
- How will this care be offered?

Thus, as a care taker I used different forms of care for supporting the needs of the individual and worked with others to agree the process and criteria for assessing the progress in the skills of individuals.

4.2 Explain how to carry out agreed role to evaluate progress towards goals and the effectiveness of methods used

Individual’s aims and goals and agreed needs influence the evaluation criteria. I fix the process of agreeing support by means of timing, people involved, individual discussion and care review meeting.

When I have to undertake my agreed role to reach at the goals, I need to analyse the efficacy of the role and need to decide if any alterations are required for my agreed role to reach at the goal. In case, If I need to help a physically challenged individual or person with physical difficulties, the skills they needs to develop are eat food, bathing, etc for themselves and keep home clean. I support them and help them to motivate and encourage in order to positively affecting their performance level. I also visited the home of such individuals twice in a week to support and motivate them to help the patient to improve their skills and make them capable of doing their tasks and duties effectively. I involved in changing my role and taking the assistance of some experts once I found my role as improper for assisting and supporting the patient. I also involved in understanding what could be done to make them capable of
doing tasks effectively. By taking the opinion and suggestions of others, I was able to alter my role and thereby able to provide effective support to the individuals.

4.3 Agree revisions to the plan
I implement a plan for developing and maintaining the skills of individual which has to be evaluated and need to be revised by me when any part of the plan is ineffective or weak. To enhance the effectiveness of plan, I made revisions in accordance with the agreed ways of working and also ensured that the individual is able to achieve the goals with the revised plan.

As a health and social worker, I need to work with individuals to agree with the evaluation of effectiveness of care. For example: When an individual is struggling with heavy duty chores in the house and it could be agreed that they need assistance to do the chores that are riskier and physically demanding. Hence, I provide assistance to them in doing the chores in order to help them to perform the tasks easily. Assisting an individual in performing a difficult task and in developing their everyday skills would help them to actively participate in daily activities and thereby helping them to achieve their goals (Glasby and Dickinson, 2009). Thus, as a care taker I ensure that the individual is capable of achieving the goals with the aid of revised plan.

4.4 Describe how to record and report in line with agreed ways of working
It is essential to maintain plan and to revise and evaluate the same for identifying the progress in critical care provided to patients. If any change is required I replace it in right mode and proper channel in alignment with health care policies and regulations. I also document the plan prepared for delivering quality care in official manner for facilitating on duty staffs to review the same. Moreover, I explained the documented plan to patient and receive their sign on it with name and date. The plan is prepared in align with agreed ways of working with an assurance on future revision in case of urgency (Crowe et al., 2011). I do proper recording and planning to track the supporting systems provided to patients are up to the level for supporting living skills. Moreover, I take into account the feedback based on the patient improvements to make changes and I perform alternations in methods for delivering quality care. In short, I introduced proper planning and evaluation and reviewing of plans for providing quality care to patients.
Conclusion
This assignment provided key support to maintain and create skills required for daily life activities. I have discussed the supporting skills for daily life, how to help individuals to plan for developing and maintaining skills for everyday life, how to support them to retain, develop and regain skills for everyday life and evaluated support for developing and maintaining skills for everyday life.
Reference


