

Low self-esteem is the enemy of a confident and skilled workforce

Care home staff: is there a more belittled and vilified section of the workforce? At the start of the year four care workers were sentenced for abuse of elderly residents at a care home in Lancashire. And in March, a court heard that residents at a Sheffield care home were subjected to 'systematic bullying' of slapping, teasing, pushing, taunting, ridiculing - and being barked at like a dog.

But these are, of course, the grotesque, and distressing, exceptions to the rule. My colleagues and I spend much of our working lives on site in care homes all over the country, delivering skills training. We see what's going on, and most of it is very impressive indeed. I would go as far as to say that I've never observed a member of staff doing anything other than an excellent job.

And yet, and yet. As last year's Cavendish Review pointed out, 'for workers in this sector, "I'm only a carer" is too common a refrain. The phrase "basic care" dramatically understates the work of this group. Helping an elderly person

to eat and swallow, bathing someone with dignity and without hurting them, communicating with someone with early onset dementia; doing these things with intelligent kindness, dignity, care and respect requires skill.'

The report added: 'Too many workers do not see caring as a career, with opportunities to progress. The fragmented nature of the sector, lack of faith in qualifications and lack of portable skills do not help.'

Far too often being a care home worker is seen as 'just' an entry-level job. Those that fill these roles often suffer from very low self esteem. Yet when their basic skills are enhanced, either as stand-alone maths and English, or wrapped around courses such as safeguarding, dementia care, infection control or safe handling of medicines, a transformation often takes place.

Suddenly, staff realise that their ability level is higher than their self esteem. I've seen personalities truly transformed, and once their basic skills are improved their attitude to their

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jobs alters, too. Instead of being content in their role as 'just' a carer, they begin to look towards career advancement. And that's very good, news for employers.

There's another byproduct: we've noticed that these workers' empathetic skills improve. The residents they work with are often depressed and feel neglected by their families. Once their carers have overcome their own lack of self-belief, their rapport with them strengthens.

Confident learners with good basic skills are safer and more engaged workers. Let's not forget it. **CT**

■ Harvey Young is director of NCC Skills, one of the biggest providers of English and maths to adults in England.

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The art of active listening

Whether communicating with residents, their families, or colleagues, listening is at the heart of effective care. The NHS Institute highlights active listening as being a key standard in improving the service user experience and anyone who works in the health and social care sector can appreciate this emphasis. However, for listening to be effective, it is essential to recognise that it is an active rather than passive process.

According to the famous American psychologist, Carl Rogers, active listening involves listening "not only with our ears, but with our eyes, mind, heart and imagination, as well." It means paying complete attention during conversations - not only do you hear the words spoken by a resident, but you also tune into the feelings behind those words. Care professionals who can do this have a magical effect on those they listen to, making them feel heard, appreciated, significant, and respected.

There are two types of active listening - paraphrasing and reflective listening. Paraphrasing, or repeating back to the speaker what has been heard provides a chance to correct any misunderstandings and keeps the communication two-way.

Reflective listening, on the other hand, is less about summarising facts and more about understanding the emotions and feelings that are being conveyed. An example of reflective

listening might be noting that the client looks worried. Both paraphrasing and reflective listening demonstrate that the listener is emotionally invested in the process.

Body language

Listening only with the ears is ineffective. Active listeners draw on all of their senses by using more than their ears - they also take in information with their eyes and are conscious of their own body language and that of the speaker. A huge amount of communication is through body language.

Also, a listener's body language can be used to provide reassurance and feedback to the speaker. For example, sitting upright or leaning slightly forward, smiling, and mimicking the other person's facial expression communicates an interest and motivates the speaker to continue. Such non-verbal feedback is registered mostly subconsciously, but goes a long way in helping people to feel heard.

Making and maintaining appropriate eye contact, head nodding, and providing verbal responses when required is also part of active listening. One study on the communication practices of physicians with high patient satisfaction ratings showed that active listening involving utterances such as "Uh huh," "I see," "okay," and other such remarks made clients feel heard and understood. Research has also shown that those who have been actively

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listened to feel more understood than those who receive advice.

Active listening isn't all about keeping quiet, however.

Questions can be important tools in communication and asking clarifying questions can prompt the speaker to say more so that the listener can understand better. The most effective questions are open-ended, rather than closed, as they require more than a one-word answer and encourage the speaker to continue sharing their thoughts and feelings. An example might be, "Can you tell me some more?"

Active listeners emanate calm and patience by not interrupting the speaker and also by respecting silences. When short pauses or silences occur, active listeners let them be, and don't talk to fill the silence. A sense of comfort can come from the fact that the listener allows the speaker time to process their own thoughts and feelings.

Everyone listens, but not everyone actively listens. It is in the world of health and social care where active listening is vital in meeting the needs of service users. **CT**

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