

Providing Independent Living Support: Training for Senior Corps Volunteers

Module 4

Effective and Respectful Communication

*Providing Independent
Living Support:
**Effective and Respectful
Communication***



Trainer: _____

Date: _____

PROVIDING INDEPENDENT LIVING SUPPORT: TRAINING FOR SENIOR CORPS VOLUNTEERS

Module 4: Effective and Respectful Communication

Introduction

Many clients are frail and may be dealing with several chronic conditions in addition to taking a number of medications. Depression, anger, confusion, and hearing difficulty are some of the many issues that affect how they communicate. This 60-75-minute session will review tips and techniques volunteers can use to respectfully and effectively engage and interact with their clients. In addition to a short lecture, this session includes a small group exercise and a brief reflection activity. We recommend you do this session with, or shortly after, *Module 3: Understanding the Physical, Emotional, and Social Challenges Experienced by Clients*.

Objectives

By the end of the session participants will:

- Strengthen their understanding of how to be an “active listener” and why this is important.
- Learn strategies for communicating with clients in various challenging situations.

Visual Aids (PowerPoint) and Facilitator’s Notes

If you are using the PowerPoint slides included with this curriculum, Facilitator’s Notes are provided under each slide (to see them, select “View...Notes Page” from PowerPoint’s main menu). These notes provide the same information as the Facilitator’s Notes included in this document, however, they are not as detailed; the PowerPoint Facilitator’s Notes identify the main points for the presenter.

If you do *not* use the PowerPoint slides, we suggest you create selected visual aids such as handouts or transparencies from the PowerPoint slides, or copy the information on easel paper and post it on walls or an easel for participants to see. The information on Slide 9 (exercise instructions) would be the most useful slide to duplicate and post.



Handouts

The handouts for this session follow the Facilitator’s Notes and Instructions. Handouts 1-5 should be distributed during the session; this symbol in the Facilitator’s Notes will cue you as to when: 📄. Handout 6 should be distributed at the end of the session.

1. Aging I&R/A Tips: The Art of Active Listening
2. Client Role: Communication Challenges Exercise
3. Volunteer Role: Communication Challenges Exercise
4. Tips and Suggestions for Improving Communication with Clients
5. Reflection: Setting Limits
6. Training Feedback Survey

Session Outline

Discussion Topic	Estimated Time	Method/Activity	Slide Numbers
I. Welcome and Introduction	10 min.		1
A. Learning Objectives	5	Lecture	2
B. Warm up: Hearing-Impaired Clients	5	Large group discussion	3-5
II. Communication Challenges	60 min.		
A. Common Contributing Issues	10	Lecture, Large group discussion	6-7
B. Active Listening  <i>Aging I&R/A Tips: The Art of Active Listening</i>	10	Lecture, Large group discussion	8
C. Practice Exercise: Role Play  <i>Client Role: Communication Challenges Exercise</i>  <i>Volunteer Role: Communication Challenges Exercise</i>  <i>Tips and Suggestions for Improving Communication with Clients</i>	30-40	Two-person role play (15 min.) Debrief (15-25 min.), large group discussion	9
D. Reflection: Setting Limits Politely but Firmly  <i>Reflection: Setting Limits</i>	10	Individual, pairs	10
III. Closing	5 min.		
Last Thoughts  <i>Training Feedback Survey</i>	5	Feedback	11

Facilitator's Notes and Instructions



I. Welcome and Introduction

Show slide 1 – the title slide.

Explain the purpose of this training session: "Your elderly clients may be dealing with a variety of challenges that make communication difficult. This session will help you learn to better communicate with your clients."

A. Learning Objectives

Show slide 2.

LEARNING OBJECTIVES

By the end of the session, participants will:

- Strengthen their understanding of how to be an "active listener" and why this is important.
- Learn strategies for communicating with clients in various challenging situations.

Read the learning objectives to the group. By the end of the session participants will:

- Strengthen their understanding of how to be an "active listener" and why this is important.
- Learn strategies for communicating with clients in various challenging situations.

B. WARM UP: Hearing Impaired Clients

Show slide 3.

WARM UP CHALLENGE

Your client is hard of hearing but doesn't like to wear his hearing aid. You feel you are doing a lot of shouting and gesturing but communicating little.

What can you do?

Tell the group you would like to start out by getting their suggestions on a common challenge to communication: Let's say you have a client who is hard of hearing. He has a hearing aid, but he doesn't always wear it. When you visit, you feel like you are doing a lot of shouting and gesturing but communicating little.

Large group callout: "Has anyone experienced this before, with a client or someone else? What did you do?"



TIP: ADDRESS TRAINING EXPECTATIONS. As participants enter, consider having easel paper with the question, "What do you hope to learn today?" and instructions to put one or two of their expectations for the session on a "Post-It". Post the notes on an easel and review them later, while participants are doing the exercise. Try to address these expectations during the session. Inform participants on how you will follow-up later on any questions that were not addressed during the session. For instance, promise to get requested information to a particular participant by a certain date.

After participants have responded, show slides 4 and 5. Reinforce the group's suggestions as you go through the list and note others that did not come up during the discussion.

TIPS FOR BETTER COMMUNICATION WITH HEARING-IMPAIRED CLIENTS

- Keep a notepad handy.
- Speak slowly, in a normal tone.
- Face the person directly, at eye level.
- Limit background noise interference.
- Give cues when changing the topic.
- Enunciate. Don't block your mouth with hands, or muffle words by chewing, smoking, or yawning.

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TIPS FOR BETTER COMMUNICATION WITH HEARING-IMPAIRED CLIENTS

- Try paraphrasing instead of repeating.
- Find out if one ear is better than the other (the "good side")
- Make sure the hearing aid fits properly and has batteries.



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- **Keep a note pad handy** and use as needed.
- **Speak slowly and in a normal tone**; a raised voice distorts sounds further and can be misinterpreted as anger. A high pitched voice is harder to hear than a low voice.
- **Face the client directly, at eye level**, so he/she can see facial cues, including reading your lips. Be sure to keep hands away from your face so as not to hinder visual cues.
- Be aware that **background noises** can be another hearing obstacle for the client (e.g. television or radio, a loud fan or air conditioner).
- **Give cues when you are going to change the topic.** Pause briefly, gesture toward the topic of discussion if possible. Gently touch the client to get his/her attention, if appropriate, or begin by asking a question or simply state that you are going to change the topic.
- **Never yell from another room.** When you are speaking, try to sit or stand about three feet from the client, facing him/her, and get his/her attention before speaking.
- **Enunciate clearly**, and don't talk while chewing, smoking, or yawning, as this muffles your words.
- **If you need to repeat, try paraphrasing** instead. Use one-sentence explanations, and be sure to give the client time to respond.
- **Speak toward the "good side"**. The client may have a "good side"; one ear may work better than the other. If he/she is not sensitive about it, you can ask him/her if they can hear better on one side.
- **Help the client pick up visual cues.** If you are in a group setting, try to seat your hearing-impaired client where he/she can see everyone and pick up on visual cues. Make sure he/she is wearing glasses if needed.

If the hearing aid is the problem:

- Suggest to the client that he/she always wear his/her hearing aid during visits. Explain how it is important for the client to get the most out the companion visits.
- Perhaps the hearing aid is not fitted properly; offer to take the client to a provider for a check up.
- Make sure the client has extra batteries available.

Sources: National Senior Corps Association, Legacy Caregiver Services (2006), Zukerman (2003), National Institute on Aging (2007)

Point out that participants already know much about communicating with the elderly: “Now let’s cover a few more common challenges, and learn from each other.”

II. Communication Challenges

A. Common Contributing Issues

Show slide 6

COMMON ISSUES THAT CAN AFFECT COMMUNICATION

- Hearing impairment
- Vision impairment
- Confusion or memory problems
- Anger, frustration
- Withdrawn, not communicating
- Anxiety, agitation
- Paranoia
- Repetition of speech or actions

These are some of the common issues volunteers might see with their clients - situations that will present a challenge to communication.

Vision or hearing impairment: Sensory changes such as vision or hearing impairment are a common challenge. A client’s apparent confusion may actually stem from his/her diminished ability to pick up important cues (visual, auditory) that assist in communication.

Confusion or memory problems vary in severity; the volunteer’s assessment of the seriousness of the impairment will help determine how to communicate with the client.

Anger and frustration are understandable reactions to losing abilities and independence.

Withdrawn and uncommunicative behavior might be temporary or a sign of something more serious such as depression.

Anxiety and agitation might happen when a client is confused and uncomfortable or unable to articulate a need. It may be the result of changes in the brain or medications. It might be alleviated by a volunteer’s calming presence.

Paranoia or unwarranted suspicions may be a result of short term memory loss, dementia or mental illness.

Repetition of speech or actions may be due to poor memory or early dementia. It is usually harmless, and sometimes the person’s attention can be redirected.

COMMON ISSUES THAT CAN EFFECT COMMUNICATION

- Personality Differences
- Cultural Differences



Show slide 7.

Regardless of any physical or mental challenges a client may experience, volunteers should be sensitive to *personality and cultural differences* between themselves and the client. Note that “cultural differences” can include ethnic backgrounds, education and economic levels, age and generation, religion, regional backgrounds within a country, etc. For example, the quiet client who seems withdrawn to a talkative volunteer may simply be slow to warm up to people they do not know, or, part of their cultural background values reserved, quiet people.

EXAMPLE FOR DISCUSSION

Share this example of how personality and cultural differences might affect communication (or develop your own example about a difference that is pertinent in your setting):

“Here is a situation to illustrate the need for sensitivity: We have a client, “Mai”, and a volunteer, “June.” Mai and June have different cultural backgrounds; Mai was raised in Vietnam and June was raised in the Midwest. Lately, there have been misunderstandings (for example, Mai took offense at a joke that June told her). June feels the misunderstandings are due to Mai not knowing enough English, but Mai’s daughter has said that June’s manner is sometimes too forward and direct for her mother.”

Large group callout: “June really likes Mai and wants to improve their communication. What would you advise she do?”



TIP: DO A SESSION ON CULTURAL SENSITIVITY. Consider doing a whole session on cultural differences and issues around cultural sensitivity. Focus on the cultures in the communities you serve and some of the communication challenges you have seen. You may want to invite a client, family member, or a professional to share background and history.

COMMON ISSUES THAT CAN AFFECT COMMUNICATION

- Personality Differences
- Cultural Differences



Add these suggestions, if they were not mentioned:

- There is much to learn! June might attend a workshop on Vietnamese cooking, participate in cultural celebrations with Mai or read articles or a book about Vietnamese culture and history.
- June may want to talk with Mai's daughter or another Vietnamese person and ask about communication norms. Different cultures assign different meaning to an action, and to verbal and nonverbal communication including our voice, face and body language. Culture determines how comfortable we are with direct eye contact and close proximity (e.g., personal space); how we express or suppress emotions such as pride, joy, love, or disapproval; how we interpret a raised voice; when humor is appropriate, etc.
- June may want to gently ask for feedback from Mai when she believes there is some miscommunication or she is being misunderstood. Never assume that your interpretation of the situation is the only possible explanation.
- Right before her visits, June may want to take a minute to prepare by reminding herself about the communication differences.

Sources: National Senior Corps Association, Legacy Caregiver Services (2006), Zukerman (2003), National Institute on Aging (2007)

B. Active Listening

Tell participants that you would like to review the basics of good communication. An important and often challenging part of communicating with their clients is simply being a good listener.



TIP: PRIORITIZE MAIN POINTS. Read the handout *Aging I&R/A Tips: The Art of Active Listening* ahead of time and choose those skills and main points that you want to emphasize to this audience (i.e. those that will be most useful or those that need more explanation). Since you are distributing the handout for them to take home, it is not necessary to explain every point during the session.

Large group callout: “Are you familiar with the term ‘active listening’? What makes a good or active listener?”

After participants have had a chance to respond, show slide 8.

ACTIVE LISTENING

- Restating
- Summarizing
- Minimal encouragers
- Reflecting
- Giving feedback
- Emotion labeling
- Probing
- Validation
- Effective Pause
- Silence
- “I” messages
- Redirecting
- Consequences

Source: “The Art of Active Listening,” National Aging Information & Referral Support Center, 2005.

Read the list and elaborate on the skills that you feel are most important for participants to know, time permitting (e.g. reflecting, validation, silence, redirecting). Provide examples of how active listening has helped volunteers communicate with elderly clients. Here is an example: “Mai and June have become more successful in communicating and therefore, better friends over the last few months. June understands that Mai takes a little longer to express her thoughts, so she takes care not to interrupt while Mai is thinking. Instead, June uses brief, positive prompts to let Mai know that she is listening and interested, such as “Oh?” “Yes, I see”, “Good point”, etc.”

📄 Distribute the handout *Aging I&R Tips: The Art of Active Listening*. Let participants know that page 1 explains the active listening tips you have been discussing, and on page 2 there is a list of “communication blockers” that they should be aware of; conversation courtesies that show respect and encourage communication; and a short piece on the art of questioning. (Participants can read these tips at another time.)

Source: National Aging and Referral Support Center (2005)

C. EXERCISE: Role Play

The following exercise is a two-person role play, where one person plays the client and the other person plays the volunteer. The exercise will give participants practice with communication challenges that they may encounter with a client. The exercise, including debriefing, should take about 30-40 minutes.



YOU WILL NEED: Easel paper and markers to jot down main points during the debriefing, and three handouts: two to be distributed at the beginning of the exercise (*Client Role: Communication Challenges Exercise*, and *Volunteer Role: Communication Challenges Exercise*), and one to be distributed after the debrief to all participants (*Tips and Suggestions for Improving Communication with Clients*).

Show slide 9.

EXERCISE: ROLE PLAY

1. **Split into pairs.** Determine which of you will be the Volunteer or Client. The trainer will assign you a situation number.
2. **Clients:** Read the "client role": What would this individual be thinking and experiencing?
3. **Volunteers:** Read the "volunteer role". How will you begin the conversation when you visit your client?
4. **Role Play:** You will have 7 minutes to do the role play. Afterward, take a few minutes to talk and jot down your impressions.

INSTRUCTIONS

1. Ask the participants to choose a partner and spread out around the room. Instruct the paired groups to decide which one will play the role of the client and which one will play the role of the volunteer.
2.  Distribute two handouts to each pair: *Client Role: Communication Challenges Exercise* to the participant playing the client, and *Volunteer Role: Communication Challenges Exercise* to the participant playing the volunteer. Instruct participants not to show their handout to their partner until after the role play, when they are ready to discuss the experience.
3. Assign each pair a situation number (there are four situations on the handouts). Pick situations that you feel will be most relevant and beneficial for your group to discuss (e.g. communication challenges that come up frequently with your clients).



TIP: CLARIFY INSTRUCTIONS FOR THOSE WITH LITERACY OR LANGUAGE CHALLENGES. The handouts explain the roles for "clients" and "volunteers." Will some of your participants have difficulty understanding the written instructions? If yes, ask your co-facilitator or another volunteer to take half of the group to the one side of the room and explain the "volunteer" role, while you take the other half to explain the "client" role.

EXERCISE: ROLE PLAY

1. **Split into pairs.** Determine which of you will be the Volunteer or Client. The trainer will assign you a situation number.
2. **Clients:** Read the "client role". What would this individual be thinking and experiencing?
3. **Volunteers:** Read the "volunteer role". How will you begin the conversation when you visit your client?
4. **Role Play:** You will have 7 minutes to do the role play. Afterward, take a few minutes to talk and jot down your impressions.

4. Ask "clients" to take a minute to read the situation from their handout and "get into character." Ask the "volunteer" to take a minute to read the situation from their handout and think about how they would open a conversation upon arriving at a client's house. Let them know that the volunteer will start the role play.
5. Explain that they will have 5-7 minutes to role play the situation and another 5-7 minutes to discuss what they learned.
6. At 5-7 minutes, ask them to stop the role play and discuss the questions on the second page of the handout together. At this point everyone can share their handouts with their partners.
7. After 5-7 minutes of small group (pairs) discussion, start the large group debriefing.
8.  AFTER DEBRIEF, end this exercise by distributing the second handout *Tips and Suggestions for Improving Communication with Clients*.

DEBRIEF

Start with one situation and ask each group of pairs that role played the same situation to report on their experience:

- Volunteers: What was the communication challenge? What were you feeling?
- Clients: What was the communication challenge? What were you feeling?
- What did the volunteer try that worked?
- What could the volunteer have done differently?



TIPS: PREPARE FOR DEBRIEF DISCUSSION. As participants are role playing, review the second handout, *Tips and Suggestions for Improving Communications with Clients*, to see what the professionals working with seniors had to say. Work some of the strategies into the debrief discussion.

TRY AN ALTERNATIVE TO ROLE PLAY. If you feel the role play won't be productive with this group, present the situations and ask them for advice on what they would do. Using the large group "callout", note their responses on easel paper and discuss. Or ask the group to share their stories about communication issues they have had with clients and discuss. Try to keep this as interactive as possible. You want to give participants an experience that builds empathy for the clients and skills in working with them.

EXERCISE: ROLE PLAY

1. **Spit into pairs.** Determine which of you will be the Volunteer or Client. The trainer will assign you a situation number.
2. **Clients:** Read the "client role": What would this individual be thinking and experiencing?
3. **Volunteers:** Read the "volunteer role". How will you begin the conversation when you visit your client?
4. **Role Play:** You will have 7 minutes to do the role play. Afterward, take a few minutes to talk and jot down your impressions.

Use your volunteer scribe to jot down on the easel paper the main ideas that come from the responses to the last question *What did the volunteer try that worked?*

Go on to the next situation until all are covered and each pair has had a chance to tell what they learned. Point out the common themes you see across each situation (e.g. the need for patience).

 At the conclusion of the discussion, distribute the second handout *Tips and Suggestions for Improving Communication with Clients*. Tell participants: "You came up with some great ideas. Many of your suggestions, along with some from professionals who work with seniors, are in this document."



TIPS: KEEP A RESPECTFUL TONE. In addition to learning by putting yourself in someone else's shoes, role playing can be fun and help people relax with one another. However, be sure to maintain a respectful tone, since these are real problems for elderly people.

BE SELECTIVE WITH CLIENT ROLES. The exercise worksheet provides four "client role" situations to assign to pairs of participants. Consider choosing just one or two of the most pertinent examples rather than using all four. This will allow more time for debrief discussion. For each "client role" you use, expect a 7-10 minute large group debrief. Alternatively, you may want to develop your own client-volunteer roles.

REFLECTION: SETTING LIMITS

- Be clear about your limits.
- Offer choices within your limits.
- Make no excuses.

Source: The Caregiver Helpbook:
Powerful Tools for Caregivers.
Legacy Caregiver Services. 2006



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D. Reflection: Setting Limits Politely but Firmly

Show slide 10.

Tell participants that you would like to talk about one last communication skill we all need to have: the ability to set limits in a polite but firm way: “Many of us find it difficult to say ‘no’ to requests, to set limits around what we can do or give, even when saying ‘yes’ to those requests is against our better judgment. For example, agreeing to donate money we can’t really afford to give when a charity calls; agreeing to take care of a relative’s children when we are tired and need a rest; or agreeing to run errands for a client during our unscheduled time.”

Share these tips on how to say “no” in a polite but firm way:

- Be clear about your limits: Be specific and upfront about what you can and can not do.
- Express your limits along with alternatives or offer choices. “I am unable to do that, but I can do ___ or _____. Which do you prefer?”
- Make no excuses: Give factual reasons rather than excuses; excuses sound too apologetic, or worse, dishonest. Or, simply say, “That will not work for me”. It is not necessary to provide an explanation.

 Distribute the handout *Reflection: Setting Limits* and ask participants to think of times when they have trouble saying “no”. Ask them to take a few minutes (2-3 minutes) to jot down some notes and then share with a partner.

Source: Legacy Caregiver Services (2006)



TIP: PRIORITIZE LECTURE SEGMENTS AND ACTIVITIES: If you feel your group will benefit from one section of the workshop more than another, consider revising the time spent in each section ahead of time (see “Session Agenda” on page 2). There may be a segment you can omit altogether, or you may want to spread this workshop over two sessions rather than one.

LAST THOUGHTS...

"We are all very different in how we communicate, interpret and relate to one another. This means that we must sometimes set our pride aside, be patient, keep no record of wrong, have grace with one another, listen to one another, communicate our feelings and be careful of our approaches at all times. This is part of being a true servant for others. We must all be flexible enough to know that we always have something to learn."

Nancy Grim, RSVP of Jefferson County, Ohio

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III. Closing

Show slide 11.

Inform participants that the session is over, and leave them with this thoughtful advice from an RSVP program manager: *"We are all very different in how we communicate, interpret and relate to one another. This means that we must sometimes set our pride aside, be patient, keep no record of wrong, have grace with one another, listen to one another, communicate our feelings and be careful of our approaches at all times. This is part of being a true servant for others. We must all be flexible enough to know that we always have something to learn."* (Nancy Grim, RSVP of Jefferson County, Ohio).

 Distribute the *Training Feedback Survey*. Tell participants that you would very much appreciate hearing their thoughts via the *Training Feedback Survey*. Let them know their responses are anonymous (no names are required on the surveys), and that the surveys are collected to help improve future training sessions. Make sure to indicate where you would like the completed surveys to be placed.

Thank everyone for coming.



TIP: KEEP THE CONVERSATION GOING: You may want to expand on the reflection activity, "Setting Limits" by continuing the discussion at the next in-service meeting. You could develop a worksheet or handout with specific scenarios and provide examples of how a volunteer might set limits, including phrases to use (see the example of Sylvia's situation on handout *Reflection: Setting Limits*).

References for Module 4: Effective and Respectful Communication

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Handouts

The following handouts are included in this module:

1. **Aging I&R/A Tips: The Art of Active Listening**
2. **Client Role: Communication Challenges Exercise**
3. **Volunteer Role: Communication Challenges Exercise**
4. **Tips and Suggestions for Improving Communication with Clients**
5. **Reflection Exercise: Setting Limits**
6. **Training Feedback Survey**

*Providing Independent
Living Support:
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Communication***



Trainer: _____

Date: _____

AGING I&R/A TIPS

Tip Sheet 1

National Aging Information & Referral Support Center

THE ART OF ACTIVE LISTENING

Active listening is all about building rapport, understanding, and trust. Are you a good listener?

Active Listening Skills

1. Restating

To show you are listening, repeat every so often what you think the person said – not by parroting, but by paraphrasing what you heard in your own words. For example, “Let’s see if I’m clear about this. . .”

2. Summarizing

Bring together the facts and pieces of the problem to check understanding – for example, “So it sounds to me as if . . .” Or, “Is that it?”

3. Minimal encouragers

Use brief, positive prompts to keep the conversation going and show you are listening – for example, “umm-hmmm,” “Oh?” “I understand,” “Then?” “And?”

4. Reflecting

Instead of just repeating, reflect the speaker’s words in terms of feelings – for example, “This seems really important to you. . .”

5. Giving feedback

Let the person know what your initial thoughts are on the situation. Share pertinent information, observations, insights, and experiences. Then listen carefully to confirm.

6. Emotion labeling

Putting feelings into words will often help a person to see things more objectively. To help

the person begin, use “door openers” – for example, “I’m sensing that you’re feeling frustrated. . . worried. . . anxious. . .”

7. Probing

Ask questions to draw the person out and get deeper and more meaningful information – for example, “What do you think would happen if you. . .?”

8. Validation

Acknowledge the individual’s problems, issues, and feelings. Listen openly and with empathy, and respond in an interested way – for example, “I appreciate your willingness to talk about such a difficult issue. . .”

9. Effective pause

Deliberately pause at key points for emphasis. This will tell the person you are saying something that is very important to them.

10. Silence

Allow for comfortable silences to slow down the exchange. Give a person time to think as well as talk. Silence can also be very helpful in diffusing an unproductive interaction.

11. “I” messages

By using “I” in your statements, you focus on the problem not the person. An I-message lets the person know what you feel and why – for example, “I know you have a lot to say, but I need to. . .”

12. Redirecting

If someone is showing signs of being overly aggressive, agitated, or angry, this is the time to shift the discussion to another topic.

The Art of Active Listening

13. Consequences

Part of the feedback may involve talking about the possible consequences of inaction. Take your cues from what the person is saying – for example, “What happened the last time you stopped taking the medicine your doctor prescribed?”

Communication Blockers

These roadblocks to communication can stop communication dead in its tracks:

- **“Why” questions.** They tend to make people defensive.
- **Quick reassurance,** saying things like, “Don’t worry about that.”
- **Advising** – “I think the best thing for you is to move to assisted living.”
- **Digging for information** and forcing someone to talk about something they would rather not talk about.
- **Patronizing** – “You poor thing, I know just how you feel.”
- **Preaching** – “You should. . .” Or, “You shouldn’t. . .”
- **Interrupting** – Shows you aren’t interested in what someone is saying.

SOURCE: Excerpted and adapted from Lee Scheingold, “Active Listening,” McKesson Health Solutions LLC, 2003.

6 Simple Conversation Courtesies

“Excuse me...”

“Pardon me....”

“One moment please...”

“Let’s talk about solutions.”

“May I suggest something?”

The Art of Questioning

The four main types of questions are:

LEADING

For example, “Would you like to talk about it?” “What happened then?” Could you tell me more?”

OPEN-ENDED

Use open-ended questions to expand the discussion – for example, lead with: “How? What? Where? Who? Which?”

CLOSED-ENDED

Use closed ended questions to prompt for specifics – for example, lead with: “Is? Are? Do? Did? Can? Could? Would?”

REFLECTIVE

Can help people understand more about what they said – for example, someone tells you, “I’m worried I won’t remember. . .” *Reflective Q:* “It sounds like you would like some help remembering?”

FOR MORE INFORMATION

National Aging Information & Referral Support Center

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www.nasua.org/informationandreferral

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CLIENT ROLE

Communication Challenges Exercise



The purpose of this exercise is to give you some practice dealing with challenging communication situations that you may encounter when working with a client. You might also discover that you will understand your client better when you put yourself in his/her shoes!



“Client” Instructions: The facilitator will assign you and your partner one of the situations listed below. You will play the role of the client; your partner will play the role of the volunteer. ***Don’t show your partner this sheet until after your role play.***

1. Take a minute to read your “client role” and think about what this person would be feeling and experiencing.
2. You and your partner, “the volunteer”, should take about 5-7 minutes to act out the situation and see where it takes you. The volunteer is coming to your home for the weekly visit and will begin the role play.
3. When you are finished, discuss together what you have learned. Jot down some notes to the questions on page 2, and be ready to share with the group.

SITUATIONS (Client Roles)

1. You become distracted easily and lose your train of thought. For example, you start telling a story and then get lost, quickly forgetting what the original point was. You have difficulty following others when they are talking, partly because you have a hard time blocking out noises so you can concentrate.

Idea for role play: Start a story and stop in the middle. Start a different story. Ask the volunteer to repeat what they said regularly.
2. You repeat words, questions, or phrases, without realizing you are doing it. Often it is not relevant to the current conversation.

Idea for role play: You ask when lunch will be ready over and over; you repeat certain words for no apparent reason; you ask your guest “how have you been” several times, forgetting that they have already told you.
3. You feel sad today. This morning you saw someone with a dog like the one you used to have and felt suddenly nostalgic and lonely. You might feel better if you talked about it, but aren’t sure you want to. You don’t like to complain and have always had a hard time expressing “bad” feelings. Instead, you tend to express unhappiness nonverbally, with sighs and body language.

Idea for role play: Provide mumbled or no responses, slump over, sigh often, keep your head down.
4. People have told you that you have a temper and that you are “too negative.” They also tell you that you should “look on the bright side”. You feel people who say these things don’t understand your difficulties. You spend a lot of time at home alone.

Idea for role play: Tell a story of a neighbor in a heated tone, and then start another complaint about staff at the doctor’s office. For instance, “Last night that smart-alecky neighbor kid parked his car too close to my driveway again, even though I yelled at him about that just last week! And why can’t the people who answer the phone at the doctor’s office speak so I can understand them?” Complain that the volunteer is unrealistic if he/she makes optimistic suggestions.

“Client” and “Volunteer”: After the role play, discuss the following questions and jot down what you’ve learned:



1. What was the communication challenge for each of you? How did it feel?

Volunteer:



Client:



2. What did the volunteer try that didn’t work so well? What could the volunteer have done differently? Client, what did you need from the volunteer?

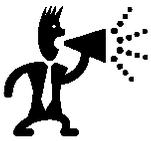


3. What did the volunteer try that worked? For example, what was said? How was it said, including nonverbal messages?

4. Any final thoughts?

VOLUNTEER ROLE

Communication Challenges Exercise



The purpose of this exercise is to give you some practice dealing with challenging communication situations that you may encounter when working with a client. You might also discover that you will understand your client better when you put yourself in his/her shoes!



“Volunteer” Instructions: The facilitator will assign you and your partner one of the situations listed below. You will play the role of the volunteer; your partner will play the role of the client. ***Don’t show your partner this sheet until after your role play.***

1. Take a minute to read your “volunteer role” and think about how you will begin a conversation with your client when you arrive at his/her home for your weekly visit.
2. You and your partner, “the client”, should take about 5-7 minutes to act out the situation and see where it takes you. You, the volunteer will start the role play.
3. When you are finished, discuss together what you have learned. Jot down some notes to the questions on page 2, and be ready to share with the group.

SITUATIONS (Volunteer Roles)

1. You arrive at the client’s home thinking about the client’s care plan, which includes help with organizing. This is the day you have agreed to work on organizing paperwork and paying bills. After greeting your client, begin to discuss working on this task together.
2. According to yesterday’s phone call with your client, you will be taking the client to a new doctor today. After greeting your client, assist with any preparations needed to be able to get to the doctor’s office for the appointment, such as finding the doctor’s name and address and a list of your client’s medications.
3. Your client has previously expressed an interest in playing cards and today you brought a deck of cards and some ideas about which games you might play together. Usually you do crossword puzzles but that has been getting old.
4. Your client has been depressed lately. Your supervisor and the client’s doctor suggested more exercise. After greeting your client, talk with your client about taking a walk or doing some other exercise to help improve mood.

“Client” and “Volunteer”: After the role play, discuss the following questions down what you’ve learned:



1. What was the communication challenge for each of you? How did it feel?

Volunteer:



Client:



2. What did the volunteer try that didn’t work so well? What could the volunteer have done differently? Client, what did you need from the volunteer?



3. What did the volunteer try that worked? For example, what was said? How was it said, including nonverbal messages?

4. Any final thoughts?

Tips and Suggestions for Improving Communication with Clients

This document contains tips and suggestions for improving communication with your elderly client in various challenging situations. The advice was collected from published resources and professionals serving the elderly, including Senior Corps program directors. We hope you will find the suggestions helpful.



Challenge: The client becomes distracted and loses his/her train of thought easily.

Try these suggestions:

- Eliminate distractions; turn off the radio or television.
- Redirect the client to an activity that he/she enjoys and has had success with before. Do simple activities that do not require too much critical thinking.
- Provide frequent reminders that are basic and clear, and do so in a kind and patient manner.
- Practice active listening and give clues, ask questions, re-state thoughts, etc. Repeating the last thing the client said often gets them back on track. Speak in short direct sentences.
- This is normal part of aging; be patient and do not make a fuss when it happens. Attempt to reorient client, but if this doesn't work, be accepting of the client without judgment.

Challenge: The client can become very confused and disoriented.

Try these suggestions:

- Remove distractions as much as possible. For example, if you are trying to have a conversation, turn off the television.
- Face the client as you talk; speak clearly and keep instructions and explanations brief. Ask short, direct questions.
- Give the person enough time to gather his/her thoughts, but patiently suggest a word or phrase if he/she seems to be stuck.
- Use visual references to help illustrate what you are saying verbally. For example, point to the chair as you ask him/her to sit down; point to the television as you ask if you may turn off the television. To demonstrate an activity or task, do it one step at a time as you explain what you are doing.
- If the client insists something is different than how it really is, use distraction by pointing them toward something else or changing the subject; don't argue.
- Before leaving on outings, talk with the client about where you will be going and what will happen. Reassure your client that you will be with him/her the whole time. Limit outings to one destination for the day, and places that are not too crowded, noisy, and disorienting.

Challenge: The client repeats words, questions, phrases, or stories without realizing it.

Try these suggestions:

- This is very common and a normal part of aging, so try to smile and be patient. Listen respectfully and attentively, as if you have never heard the story before. Remember, you are doing this for your client. (However, if it does become too frustrating for you, talk to your supervisor about reducing assignment time to avoid “burnout.”)
- Try to engage the client in a different subject to steer him/her away from the repetitive train of thought. Redirect the client to something they enjoy (*Should we put on some music? Would you like a snack?*). Do stimulating activities together like Word Find, a crossword puzzle or a jigsaw puzzle.
- Be sensitive to the fact that the client may be expressing a need; for example, repeatedly talking about food might mean he/she is hungry.
- If your client is continually asking the same question, such as when you will be back, it may help to up notes, such as “Mary will be here every Wednesday at 10 am”.
- Don’t remind the client that they already asked that or did that (unless there is some safety issue).

Challenge: The client complains frequently and expresses general unhappiness.

Try these suggestions:

- Help the client get out more often, if possible. Invite the client to do activities outside the home.
- Provide a listening ear, but do not counsel or commiserate. Practice active listening. If the unhappiness is caused by conditions that can be changed, offer to help change the condition or situation (e.g. make calls, advocate for other services).
- Try to steer the client towards talking about more positive things, but at the same time, recognize that you can not change people.

Challenge: The client is angry and frustrated.

Try these suggestions:

- Remain calm; there is already one person upset. Try to find the cause of the frustration or anger, and address it if possible. The client may be becoming increasingly forgetful or confused, or the frustration/anger may be caused by a problem with family, neighbors, or a health reason.
- Try not to take it personally. Be a friend; listen and offer support. Use humor to ease the tension *if appropriate* (you don’t want the client to think you don’t take their frustration seriously!).
- If the client becomes aggressive, calmly tell him/her that the behavior is not acceptable. If you are concerned for your personal safety, leave the situation and let your supervisor know immediately. Tell the client you will not remain in this situation and that you will come back at a later date.

Challenge: The client is sad and withdrawn, and not communicating.

Try these suggestions:

- Ask the client what is on his/her mind or talk about his/her interests, but be patient and allow the client to ease into a conversation. For example, you could read to the client for a while to provide company without pressure if he/she is not ready to talk.
- Tell the client you noticed he/she seems sad today and ask if there is something you can do to help. Use a low tone of voice and say that you understand it must be difficult; validating people's feelings helps them be open to suggestions to seek help. If the client has difficulty expressing feelings, you can try to draw him/her out gently, with statements like, "I want to understand what is troubling you. If you feel like talking, let's talk it over." Get comfortable with silence sometimes.
- After the client has had a chance to share, if appropriate, encourage the client to remember positive events and engage in activities they enjoy. Encourage activities that stimulate self-expression (e.g. art, cooking, or music). Keep a list of favorite activities to suggest when the client seems down (e.g. outings, playing cards, movies, etc.); this provides a distraction to temporary blues. Music is especially good for improving mood.
- Tell the client you noticed he/she seems sad today and ask if there is something you can do to help. Know the symptoms of depression and talk with your supervisor if you think your client is depressed. The client may need to be evaluated by a doctor. According to Mental Health America, the symptoms of clinical depression include: persistent sad, anxious or "empty" mood; sleeping too much or too little, middle of the night or early morning waking; reduced appetite and weight loss, or increased appetite and weight gain; loss of pleasure and interest in activities once enjoyed, including sex; restlessness, irritability; persistent physical symptoms that do not respond to treatment (such as chronic pain or digestive disorders); difficulty concentrating, remembering or making decisions; fatigue or loss of energy; feeling guilty, hopeless or worthless; and thoughts of suicide or death.
- If your client already takes medications for depression, see if someone is making sure they are being taken as prescribed. If professional counseling is an option, a counselor could help the client enhance coping skills and develop a less pessimistic view.
- The client may not respond much due to hearing difficulty. Observe to see if the client wears a hearing aid; offer to communicate in other ways (write on paper, sit nearer to the client, speak slowly using low tones etc.) or engage in nonverbal activities such as putting a puzzle together.



Don't forget!
Always notify
your supervisor of
a client's sudden
behavior changes!

Challenge: The client expresses unwarranted suspicion and paranoia.

Try these suggestions:

- First, rationalizing the client's fears may help (they may not have heard correctly). The client may need to have vision and hearing checked, as these can lead to misinterpretation of the environment. However, people need to have their fears and frustrations validated; they need to know that someone listens to them and takes them seriously. Don't take offense and don't argue or try to persuade the client; listen to what they are saying and let them know you care. It may also help to distract the client to another activity.
- Help look for things that are "taken" and keep some of the objects in close reach so you can look at them together for reassurance. However, if the client complains of personal items missing and implies that you are responsible, talk to your supervisor immediately about removing yourself from the situation.

Challenge: The client is anxious or agitated.

Try these suggestions:

- Talk in a calm voice and provide reassurance. Try activities like playing music, reading to him/her, or taking a walk. Redirect the client to things that he/she enjoys.
- Reduce noise and clutter in the environment if possible. Too many things going on may be causing uneasiness and anxiety.
- Do not offer caffeinated beverages like coffee.

Challenge: The client is vision-impaired.

Try these suggestions:

- Announce your presence by speaking as you enter the room and tell him/her when you are leaving.
- Use touch, if appropriate, to get the client's attention.
- Make sure there is adequate light in the room. Minimize noise distractions if possible.
- Remember not to rely on facial gestures for emphasis or nuance, or nonverbal responses like nods and head shakes. However, continue to use body language; this will affect the tone of your voice and give more information to the client.
- Speak naturally and clearly. Use everyday language. Do not avoid words like "see" or "look" or talking about everyday activities such as watching TV.
- Use accurate and specific language when giving directions. For example, "the door is on your left", rather than "the door is over there".
- If you and your client are in a group situation, introduce the other people present. Address other people by name when talking to them.

Challenge: The client is hearing-impaired.

Try these suggestions:

- Speak slowly and in a normal tone; a raised voice distorts sounds further and can be misinterpreted as anger. A high pitched voice is harder to hear than a low voice.
- Face the client directly, at eye level, so he/she can see facial cues, including reading your lips. Be sure to keep hands away from your face so as not to hinder visual cues.
- Be aware that background noises can be another hearing obstacle for the client (e.g. television or radio, a loud fan or air conditioner).
- Give cues when you are going to change the topic. Pause briefly, gesture toward the topic of discussion if possible. Gently touch the client to get his/her attention, if appropriate, or begin by asking a question or simply state that you are going to change the topic.
- Never yell from another room. When you are speaking, try to sit or stand about three feet from the client, facing him/her, and get his/her attention before speaking.
- Enunciate clearly, and don't talk while chewing, smoking, or yawning, as this muffles your words.
- If you need to repeat, try paraphrasing instead. Use one-sentence explanations, and be sure to give the client time to respond.
- The client may have a "good side"; one ear may work better than the other. If he/she is not sensitive about it, you can ask him/her if one side is easier for to hear.
- If you are in a group setting, try to seat your hearing-impaired client where he/she can see everyone and pick up on visual cues. Make sure he/she is wearing glasses if needed.

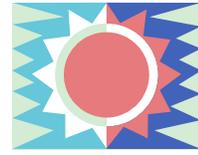
The following suggestions apply to any situation:

- Practice active listening; for example, don't interrupt, ask good questions, and paraphrase answers. Listen to the feeling behind the words. Keep good eye contact to show you are interested in what your client is saying.
- Always be respectful and never treat the client like a child.
- Be aware of the unwanted nonverbal messages you might be sending unintentionally. For example, sighing heavily or standing with your hands on your hips might show you feel impatient with the client.
- Avoid confrontation; you are there for a purpose.
- Use patience, kindness, and a sense of humor as appropriate. When in doubt, remember The Golden Rule.

REMEMBER: If you are worried about your client, talk to your supervisor. Always notify your supervisor if a client's behavior changes!

Sources: National Senior Corps Association: www.nscatogether.org; Alzheimer's Association: www.alz.org; Mental Health America.: www.nmha.org; Vision Australia: www.visionaustralia.org.
The Caregiver Helpbook: Powerful Tools for Caregivers (2006). Legacy Caregiver Services, Legacy Health System.
Eldercare for Dummies (2003). Rachele Zukerman, PhD.

Reflection: Setting Limits



Many people find it difficult to say “no” to a request, even when saying “yes” will be harmful to their mental or physical health, or finances. Communicating your limits in polite but firm way is a survival skill.

a

Think of a situation where you have had difficulty saying “no” to a request. The request may have come from a client, family member, friend, boss, or someone else. How would you/will you do things differently? Jot down some notes to the following questions and share them with a partner. This worksheet is for your own use; you do not need to turn it in.

1. What was the request?

2. For you, what were the consequences of saying “yes”? What did you believe would be the consequences of saying “no”?

3. How will you set limits next time? Give an example of something you might say politely but firmly. Remember: be clear about your limits, offer choices you can live with, and make no excuses.

Example: *Sylvia is a proud grandmother. Her son lives down the street with his wife and four young children. For the last six months during the weekdays, Sylvia has been taking care of the four children while their parents were at work. At first, this was to be a temporary arrangement until her son could find a day care center nearby. However, there has been no mention of finding a day care center for months. Sylvia has hinted that she does not have the energy she used to have, and that the kids are really a handful, to no avail. Finally, she found some quiet time with her son and daughter-in-law, and said, “As much as I love my grandchildren, I can no longer care for them every day. The physical toll is too much. However, I would be happy to baby-sit one day a week, if you like. Which day would you prefer?”*

Training Feedback Survey

Please help us improve our training sessions by providing feedback on the training you attended. Thank you!

Training/Session Name: _____ Date: _____

Lead Facilitator: _____

Program you serve with: SCP RSVP Other: _____

Please rate this session using the following scale:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
	1	2	3	4	5
1. The subject matter was presented effectively.					
2. The facilitator was knowledgeable.					
3. The facilitator responded to questions.					
4. There were enough opportunities for discussion.					
5. The written materials are useful.					
6. The session met my expectations.					
7. As a result of this training, I gained new knowledge applicable to my volunteer assignment.					
8. I plan to apply what I learned at this session.					

9. What did you like best about this session?

10. What would have improved this session?

Thank You! Your feedback will help us to improve our training!