

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. **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.

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.

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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.

References for Module 4: Effective and Respectful Communication

Alzheimer's Association. Living with Alzheimer's: Caring for Alzheimer's, Daily Care, Communication. http://www.alz.org/living_with_alzheimers_communication.asp (accessed June 2, 2008).

Legacy Caregiver Services. 2006. *The caregiver helpbook: powerful tools for caregivers*. Legacy Health System: Portland, Oregon.

Mental Health America. Depression: What You Need to Know. <http://www.nmha.org/go/information/get-info/depression/depression-what-you-need-to-know/depression-what-you-need-to-know> (accessed June 2, 2008).

National Aging Information & Referral Support Center. Aging I&R/A Tips: The Art of Active Listening, Washington, DC 2005.

National Institute on Aging. Working with Your Older Patient: A Clinician's Handbook. <http://www.nia.nih.gov/HealthInformation/Publications/WorkingwithYourOlderPatient/> (accessed June 2, 2008).

National Senior Corps Association. <http://www.nscatogether.org/>.

Vision Australia. Communicating Effectively with People who are Blind or Vision Impaired. <http://www.visionaustralia.org/info.aspx?page=822> (accessed June 2, 2008).

Zukerman, Rachele, Ph.D. 2003. *Eldercare for dummies*. Hoboken: Wiley Publishing, Inc.

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.

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.

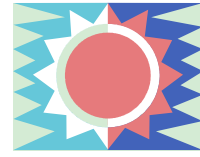
The following suggestions apply to any situation:

- 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.

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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!