

MISSOURI LTCOP



PICKLE PREPARATION TRAINING

(Getting Ready to Deal with Difficult Issues)

Presenter Material
PICKLE PREPARATION TRAINING

PREPARATION

This training may be used during a LTC Ombudsman quarterly meeting, at a community education meeting or at an in-service for facility staff. This training is approximately 2.5 hours long.

Read through the training.

1. Determine how much time you have allotted to do the training.
Decide which exercises you will do if there is not time to do them all.
2. Read the definitions below, and make sure you feel comfortable in using your own words to define problem, solving, resolution, miscommunication, conflict, and divergent.
3. Read through The Great White Man-Eating Shark by Margaret Mahy.
4. Take time to do each exercise so you will fully understand what you are asking the participants to do. (For example, you may not have time for participants to fill in the trust boxes. You might want to have an already filled in sheet for them if you feel there isn't time for that activity.)
5. Relativity: Problems often arise that residents are afraid to ask for help with. Problems also arise from a miscommunication and can turn into conflict. Conflict is a natural part of daily life, but it should not be allowed to build up.
6. Make copies of handouts and answer keys and have the necessary audio/visual equipment prepared for the presentation. Make sure to have a copy of the answer key to the scenario.

Objective of the Training: To help ombudsmen be better equipped to handle problems with which residents need help by:

- ~Creating a self-awareness to problem solving
- ~Identifying ways to work with different types of residents when solving problems
- ~Identifying potential problems that may arise
- ~Understand the problem solving process

This training leads into the training created by Sara Hunt, *The Problem-Solving Process Investigation*

Definitions of Terms: Definitions taken from Merriam-Webster Online

Problem: an intricate unsettled question

Solving: to find a solution, explanation, or answer for a problem

Resolution: the act of answering: SOLVING

Miscommunication: failure to communicate clearly

Conflict: competitive or opposing action of incompatibles: antagonistic state or action (as of divergent ideas, interests, or persons)

Divergent: differing from each other or from a standard

Resources: The Great White Man-Eating Shark book, Who Are You survey, Personality Types, Definitions, Tools for Trust, Trust Boxes, Communicating with the Sensory Impaired and Confused, Difficult People Matching Game and Answer Key, Dealing with Difficult People, Wordles and Answer Key, The Great White Man-Eating Shark Problem/Resolution, Common Problems, Eight Step Problem-Solving Process, Six Step Problem-Solving Process, Stages in the Problem-Solving Process (example and blank sheet), Scenario, Stages in the Problem-Solving Process Answer Key, Satisfaction & Fatigue Test, Story on Conflict Resolution

Materials Needed: Overhead/PowerPoint, Index cards, Pens/Pencils, Flipchart, Copies of Participant Packet

PRESENTATION

In order to make your job as a presenter easier, following are instructions for you and for you to give to the participants. The left hand column contains the activities and PowerPoint slide or transparency number that coincides with the information you are giving during the presentation. The information in the right hand column contains directions for you and what to say to the participants.

PowerPoint #1- Title Page

Hello and welcome. My name is _____, and we are going to spend some time today preparing for all of those “pickles”, or messes, that can arise when dealing with people.

Hand out packets and pencils.

PowerPoint #2
Joke

Read the joke out loud to participants.

We often feel a little tense when dealing with problems. Today, we will work for a couple of hours on how to be better prepared to deal with these “pickles”.

Activity: The Great White-Man Eating Shark

PowerPoint #3 -Book Title Page

Please listen carefully to the book, The Great White-Man Eating Shark, as I read it to you. We will be referring back to the book during the rest of the presentation today.

Estimated Activity Time: 20 Minutes

Activity: Who Are You?

PowerPoint # 4

5-10 Minutes

PowerPoint # 5

PowerPoint # 6-assertive

PowerPoint #7-socially compliant

PowerPoint #8-passive/aggressive

PowerPoint #9-assertive/aggressive

PowerPoint #10-passive

Estimated Activity Time: 15 Minutes

You know, we all deal with problems in different ways. In order to better understand how you handle problems, I want you to turn to page 2 in your packet. Take a few minutes to answer the questions honestly by marking an X beside the best answer for each question. (You may want to read the questions and choices to them if you want to save time.)

Now, if you haven't already done so, on page 4 of your packet, from the 12 questions, total the number of times you placed an X next to each initial. Your highest score is how you handle conflict most often. Let's look at the different personality types.

Talk about each type as you show them.

Although all personality types exist, and there isn't a correct answer, as ombudsman, we are striving to be assertive.

Activity: Definitions

PowerPoint #11-12

Now that we better understand how we, ourselves, handle conflict, let's look at some definitions. Who has a good definition for *problem*? How about the others?

Solving, resolution, miscommunication, conflict, divergent

There are definitions for each of these on page 5 of your packet.

Estimated Activity Time: 5 Minutes

Activity: Feelings

PowerPoint #13

Estimated Activity Time: 5 Minutes

Okay, as I hand out this index card to you, I want you to be thinking about how you feel right now.

Write one word on the card that describes how you are feeling right now. Okay, now hold up your card for everyone to see. Look around at the variety of responses.

You see, not all of you are feeling the same right now. Just as you have different feelings, many residents have different feelings each time you visit.

Even if there is a common problem, residents will have different feelings about that same problem. It is good to keep this in mind. And even though we all have different feelings, we all are better prepared to deal with issues when we trust the people we are working with.

Activity: Trust

PowerPoint #14-17

Go over each tool.

PowerPoint #18-22

Go over each box. Read them aloud as participants write down the answers.

PowerPoint #23

5-10 Minutes for group discussion

Write ideas on a flipchart.

PowerPoint # 24-26 or

Estimated Activity Time: 20 Minutes

Turn to page 6 in your packet as we talk about the different Tools For Trust.

Now turn to page 7 in your packet. Please fill in the trust boxes as we go over each one.

We, as ombudsman, definitely want to have trust.

So, how do we create trust? You know the tools for trust and the results for gaining trust. We can gain trust in many ways. In your group, come up with a list of as many trust gaining ways you can think of.

What are some ideas you have?

Now let's put out ideas together in one big list. (Do so) And now let's look at how we can combine some of these trust ways into areas. The areas we are going to look at are showing interest, listening and offering dignity and respect.

Another area we need to work on to better be prepared to deal with problems is communication.

Activity: Communicate
PowerPoint #27

In order to work on a problem solving, each of us needs to have working knowledge of how to communicate with residents. One type of resident is the sensory impaired and confused patient. Turn to page 8 in your packet for some suggestions on how to better communicate with them.

Questions for discussion:

Do any of these suggestions surprise you?

Is there anything you would like to add to these?

Not all residents have impairment issues that make communication more difficult. Sometimes residents are difficult. Or the people with whom we are trying to resolve things are difficult. We all have bad days, and many people exhibit difficult behaviors at times. Residents may have medical issues that cause unusual difficult behaviors. However, we are talking about the true “difficult person” who exhibits specific difficult behaviors most of the time.

5-10 minutes

PowerPoint #28

Turn to page 9 in your packets and see if you can match the difficult person with his/her correct behavior. The first one has been done for you.

Okay, let's look at the answers.

Does anyone know a person from one of the categories? You don't have to tell us out loud, but most of us are able to come up with one name for each of the difficult people behavior types. The good news is there are some strategies, helpful hints, of how to deal with, or cope with, the different types of difficult people. Turn to page 10 in your packet as we look at each strategy.

PowerPoint 29-39

Can you think of a situation where you were able to use these techniques?

I hope these hints will be helpful to you as you work through problems with your residents.

Estimated Activity Time: 15 Minutes

Activity: Wordles

PowerPoint #40

Estimated Activity Time: 5 Minutes

We have looked at a lot of good material so far. If you would please turn to page 11 in your packet, I would like for you to work on these wordles, as they will help you to see why preparing for “pickles” is important. The first one has been done for you.

Let’s look at the answers together.

Activity: Great White Man-Eating Shark

PowerPoint # 41

10-15 Minutes

Estimated Activity Time: 20 Minutes

Now that we have created self-awareness in problem solving and identified how to work with residents, it is time to discuss how to identify potential problems and come up with resolutions. Begin by identifying the different problems in The Great White Man-Eating Shark. Turn to page 12 in your packet. The problems are there. In your groups, come up with a resolution for each problem. (You may want to assign a different problem to each group to save time)

Now let's go over what resolutions you have. (Refer to resource p. 32)

Not all resolutions are the best answer, but Norvin tried his best.

Activity: Problem Solving

PowerPoint #42

What are some different problems you may have to deal with as an ombudsman in a facility? (Have participants give answers orally, and write the responses on a flipchart or overhead.) Remember the issues of gaining trust, communicating and dealing with difficult residents. Turn to page 13 in your packet for a general list of issues you may come into contact with.

PowerPoint #43

There are different Problem-solving methods that we can use. Page 14 shows you a ten- step process. Page 15 demonstrates a six-step process. Page 16 is the stages in the problem-solving process that we, as ombudsman, use. We will be referring to this process as it is found in the Missouri Long-Term Care Ombudsman Program Training and Resource Manual.

PowerPoint #44

From the past few hours, you should have a better understanding of how you feel about dealing with problems, be better informed about how to visit with residents in order to work with the resident on issues, and know how to implement the problem solving process. In order to make sure you are comfortable with the problem-solving process, please turn to page 17 in your packet.

15-20 Minutes

Using the following scenario, take it through the process by writing down what you would do for each step.

Scenario Answers

Now let's go over the scenario step by step. What do you have for *receive the complaint*?

(Do this for the remainder of the steps)

What assumptions did you make when filling out this sheet?

(Once you complete each step, hand out the answer sheet to participants. Remind them that how each of the steps is handled depends on what the problem is. These answers are for training purposes only.)

If there is time, you may want to ask for other issues (problems) that the ombudsman has to work out and take it through the process.

Estimated Activity Time: 25-30 Minutes

Activity: Satisfaction and Fatigue Test

10 Minutes

PowerPoint #45-47

Activity: Conflict Story

PowerPoint #48

Estimated Activity Time: 15 Minutes

The most important thing to remember is to be as prepared as you can be to help residents; you are their voice. Are you ready to work at problem solving? Okay, turn to page 18 in your packet. Let's look at the directions for this test together.

Helping others puts you in direct contact with other people's lives. As you probably have experienced, your compassion for those you help has both positive and negative aspects. This self-test helps you estimate your compassion status: How much at risk you are of burnout and compassion fatigue and also the degree of satisfaction with your helping others. Consider each of the following characteristics about you and your **current** situation. Write in the number that honestly reflects how frequently you experienced these characteristics in the last week. Then follow the scoring directions at the end of the self-test.

Okay, take a few minutes to answer each question.

Let's go over the scoring together.

You must be rested and ready to be a helper in order to make a difference.

Thank you so much for participating today in preparing for all of those "pickles" we will deal with. I want to leave you with this story.

This training is a prequel to the training created by Sara Hunt on *The Problem-Solving Process Investigation*.

RESOURCES

Solving a Problem

A guy goes to a psychiatrist. "Doc, I keep having these alternating recurring dreams. First I'm a teepee; then I'm a wigwam; then I'm a teepee; then I'm a wigwam. It's driving me crazy. What's wrong with me?" The doctor replies: "It's very simple. You're two tents."

Who Are You?

(When It Comes to Handling Conflict)

When it comes to conflict, we all handle things differently. Answer the following questions honestly by making an X beside the best answer for you to each question.

1. You are requested to give a talk to a civic group on something you have no interest in. You...

- T Refuse the request but offer to speak on another topic
- M Familiarize yourself with the topic in order to give the speech since it is a privilege to be asked
- S Reluctantly agree to the request
- N Agree to give the speech even though you will probably try to get out of it at a later time
- D Reply that you can't be bothered giving speeches to their organization

2. You have made reservations at a restaurant for yourself and two friends. While you are dressing, another friend unexpectedly arrives, asks if he/she can come along, and you don't want to include him/her. You...

- S Invite him/her anyway to eat with you and your friends
- D Tell him/her that he/she should have called first
- N Allow him/her to come but don't pay much attention to him/her for the rest of the evening
- M Invite him/her because you don't want to hurt his/her feelings
- T Tell him/her that you have been planning to be with your other friends tonight, and ask if you could make plans for another time

3. You are in a hurry and have been waiting in the grocery checkout line for five minutes. A slight acquaintance asks if she can cut ahead of you. You...

- T Refuse the person's request and point out that you are in a hurry
- S Reluctantly allow her to cut in
- M Allow her to cut in so as to save her from embarrassment
- N Make a comment about people who cut ahead in line
- D Insist that she move to the back like everyone else

4. You are asked by a friend to help out in a crisis situation. You feel you have already done your share. You...

- T Tell the friend what you have done and indicate that you feel you have contributed enough
- M Help out more since everyone should contribute as much as possible in a crisis
- S Reluctantly offer to be of more help
- N Agree to help out further, but participate minimally
- D Tell your friend that you have already contributed enough

5. Your boss gives you a “satisfactory” rating, but you think your work is well above average. You...

- _____ S Do nothing but feel unfairly treated
- _____ D Tell him his rating is unfair
- _____ N Gripe to co-workers about how unfair the boss is
- _____ T Ask the boss to explain why you received a lower rating; if you still disagree, attempt to convince him that you deserve a higher rating
- _____ M Accept the rating and try to improve his perception of you

6. Your “significant other” has been throwing his/her clothes all over the bedroom during the past week. You...

- _____ D Confront him/her about this sloppiness
- _____ S Put up with the mess as best you can
- _____ T Tell your significant other you would appreciate it if he/she would try to keep those clothes hung up
- _____ N Hint around about how you don’t care for messy rooms
- _____ M Pick up the clothes because you want to help out

7. A month ago a friend borrowed a small sum of money from you and he has not paid you back. You...

- _____ N Tell your friend how broke you are
- _____ T Remind him of the unpaid debt and ask for payment
- _____ M Say nothing in order not to embarrass your friend
- _____ D Tell your friend it is irresponsible not to pay his debts
- _____ S Say nothing and hope your friend eventually remembers the debt

8. A friend invites you to a party you do not wish to attend. You...

- _____ M Accept the invitation so as not to offend your friend
- _____ N Pretend you had another engagement
- _____ T Tell your friend that you would rather not go to the party
- _____ S Reluctantly accept the invitation
- _____ D Tell your friend you’re no longer accepting such invitations

9. A person with whom you do not wish to associate asks you to go to a movie. You...

- _____ D Tell the person that you would rather not go anywhere with him/her
- _____ N Tell the person you are busy with other things
- _____ M Accept the invitation in order not to hurt the person
- _____ S Go to the movie with the person, because you like movies anyway
- _____ T Tell the person you would rather not go to the movie with him/her

10. A casual friend constantly teases you in a joking but unfriendly way. This is beginning to annoy you. You...

- _____ T Express your annoyance at this behavior
- _____ S Feel hurt and/or annoyed but do not express your feelings
- _____ M Pretend to enjoy the humor so as not to offend your friend
- _____ N Respond in-kind, that is, return the teasing comments
- _____ D Tell your friend that he/she is insensitive

11. Your neighbor, who is chairperson of a charity bake sale, asks you to please contribute a homemade cake. You really are quite busy. You...

- _____ N Tell your neighbor you will think about it
- _____ M Bake the cake since it is for a worthy cause
- _____ S Rearrange your activities so you will have time to bake the cake soon
- _____ T Explain that you are quite busy and tactfully refuse this request
- _____ D Tell your neighbor he/she should know better than to ask you

12. You are engaged in a project with a friend and must prepare a joint report. When you discuss the report your friend suggests that you do most of the work because she is not good at that sort of thing. You...

- _____ T Insist that she do her fair share
- _____ N Jokingly suggest she is shirking her responsibility
- _____ M Agree to do most of the work because you really enjoy doing it, as well as helping your friend
- _____ S Agree to do most of the work yourself
- _____ D Tell your friend that it is irresponsible for her not to do her share of the work

To find your personality type, total the number of times you have checked each of the letters in the left-hand column. Your highest score is who you are (most of the time). Other scores will indicate how your behavior may vary in different situations.

T _____ M _____ N _____ D _____ S _____

T = Assertive (you know how to set limits, take care of yourself)

M = Socially compliant (possible “rescuer” or co-dependent)

N = Passive/Aggressive (indirect, seem agreeable, will “get even” later)

D = Assertive/Aggressive (direct, but occasionally insensitive)

S = Passive (a martyr, a sacrificial lamb, a perfect doormat)

DEFINITIONS

Problem: an intricate unsettled question

Solving: to find a solution, explanation, or answer for a problem

Resolution: the act of answering:
SOLVING

Miscommunication: failure to communicate clearly

Conflict: competitive or opposing action of incompatibles: antagonistic state or action (as of divergent ideas, interests, or persons)

Divergent: differing from each other or from a standard

TOOLS FOR TRUST

ATTITUDES: As an ombudsman, our manner of acting, feeling, talking and even the way we stand or walk shows our disposition, opinion or mental state. We can present ourselves as compassionate, kind, sincere or angry, irritable and having no time to spare.

AUTONOMY: Resident independence is sacrificed when he/she enters a nursing home. It is easy to forget the same person who has forgotten his name used to be the mayor or local librarian. We can help an individual feel independent in our manner of speech and solution suggestions.

BOUNDARIES: Healthy limits help us to define our roles and responsibilities. Lines need to be drawn for both emotional and physical boundaries to ensure respect from the resident. Boundary areas include confidentiality, touch and privacy.

CHOICES: Being mindful of choices sounds and looks like caring. Often the respect you show for a resident's individual choices will avoid problems even when those choices are not immediately available.

COMMUNICATION: Verbal and nonverbal communication skills can improve relationships and avoid conflicts.

CONTINUITY: Being as consistent as possible helps those around us to know what to expect and often establishes needed routine and security.

DEPENDABILITY: Our ability to be trustworthy and reliable gives us credibility and others feel they can rely on our words and actions. Being dependable includes timeliness and honesty.

RESPECT: Our willingness to be courteous and show consideration and regard for a resident will avoid interfering with their affairs and expresses concern.

TRUST BOXES

<u>WHEN THERE IS TRUST THERE IS:</u>	<u>WHEN THERE IS NO TRUST THERE IS:</u>
Understanding:	Suspicion:
Empathy:	Fear:
Communication:	Paranoia:
Confidence:	Competition:
Caring:	Stress:
Creativity:	Ambiguity:
Esteem:	Complexity:
Patience:	Behaviors:
Courtesy:	
Honesty:	

TRUST BOXES

<u>WHEN THERE IS TRUST THERE IS:</u>	<u>WHEN THERE IS NO TRUST THERE IS:</u>
Understanding: sympathetic awareness and mutual knowledge; comprehending	Suspicion: suspecting wrongfulness or harmfulness
Empathy: the identification and understanding of another's situation, feelings and motives	Fear: the feeling of anxiety or agitation caused by nearness of danger or pain
Communication: both verbal and non-verbal	Paranoia: over suspiciousness; delusions of persecution
Confidence: assurance and belief in one's own abilities and the abilities of others	Competition: territorial behavior
Caring: concern and interest	Stress: strain, tension and the feeling of being forced to do something against your will
Creativity: stimulation and intellectual inventiveness	Ambiguity: operating with different sets of information
Esteem: value and honor	Complexity: situations lose simplicity and become more difficult than they need to be
Patience: steadiness, perseverance and endurance	Behaviors: actions that would normally be absent if not for the lack of trust include: verbal and physical aggression
Courtesy: helpful and polite (the ability to say thank you and I'm sorry)	hostility avoidance dishonesty
Honesty: truthfulness	withdrawal and disinterest silence and distancing resistance

Ways to Gain Trust:

(This List is for Resource Information and Not All Inclusive)

Show sincere interest to the resident by:

- leaning forward when listening
- facing the person
- maintaining eye contact
- relaxing and acting natural
- using facial expressions
- wait for pauses
- listen without interrupting

Show you are following what is being said by:

- nodding your head
- using minimal responses such as “oh”, “so”, “and”
- paraphrasing what you heard
- asking open questions by beginning with words such as who, what, when, where, why, how
- restating what you heard in sentence form
 - “I hear you saying...”
 - “It sounds like...”
 - “It appears as though...”

Offer dignity and respect by:

- getting permission to seek a solution
- giving permission for a resident to feel a certain way
 - “It’s okay to feel sad...”
 - “There is nothing wrong with being angry right now about...”
 - “It’s alright to talk about being afraid...”
 - “Tell me more about...”

COMMUNICATING WITH THE SENSORY IMPAIRED AND CONFUSED

Hard of Hearing:

- ~Lower the pitch of your voice.
- ~Talk at a moderate rate.
- ~Speak as clearly and accurately as possible.
- ~Don't over articulate.
- ~Keep the volume of your voice even.
- ~Change subjects at a slower rate.
- ~Don't talk with any substance in your mouth.
- ~Face the person you are speaking to.
- ~Use gestures.

Blind or Sight Impaired:

- ~When you enter the room, identify yourself.
- ~When leaving, announce your departure.
- ~Speak naturally.
- ~Never rearrange familiar objects.
- ~When handing something, speak before you place it in his/her hand.
- ~Describe your surroundings during conversation.

Speech Impaired:

- ~Regard as a communicating adult.
- ~Don't bombard with too much speech or rush response.
- ~Don't talk about him/her in their presence.
- ~Don't assume the person **can't** understand because they **can't** speak.
- ~Don't assume the person **can** understand because they **can** speak.
- ~Keep communication short and simple.
- ~Speak in a natural tone.
- ~Give the person adequate time to respond.
- ~Be alert to delayed responses.
- ~Ask questions that can be answered with a yes or no.
- ~Don't correct errors.
- ~Let him/her know when you don't understand.
- ~Don't be frightened by periods of silence.

Confused:

- ~Remind resident of the time and date.
- ~Follow a set routine with visits.
- ~Relate to the person as an adult, avoiding baby talk.
- ~Be honest.
- ~Make use of touch.
- ~Honestly listen.
- ~Keep subjects simple and clear.
- ~Don't give up. Communicating may take time.
- ~Remember there is a live, thinking, feeling person underneath the confusion.

Difficult People Matching Game

Match the classic difficult behavior type in the left hand column by drawing a line to the associated behaviors in the right hand column. The first one has been done for you.

Classic Type	Behavior
1. The Know-It-All	a. temper tantrums, loses temper easily, anger to the point of throwing things and shouting
2. The Tank	b. legitimately knowledgeable, self-centered, superior attitude, use facts and logical arguments
3. The Clam	c. strong need to be liked and accepted, conflict with negative aspects of reality, say yes too often
4. The Exploder	d. have great ideas that are not well thought out, lack follow through, think they're right, want respect
5. The Complainer	e. bullies, charges, takes over, strong values on what is right and wrong, appears confident, abusive, abrupt
6. The Wet Blanket	f. feels anything out of their control will fail, makes statements such as "it won't work" or "it's no use"
7. The Procrastinator	g. is silent, grunts, doesn't respond, uses silence as a weapon, won't talk
8. The Fake Know-It-Alls	h. quick with verbal missiles, never in the open, want you to look bad, looks down at problems
9. The Sniper	i. finds fault with everything, blames and accuses others, has opinions on how others should behave
10. The Super-Agreeable	j. indecisive, fears losing respect, lacks follow through, cannot make up their minds

Difficult People Matching Game

(answer key)

Match the classic difficult behavior type in the left hand column by drawing and arrow to the associated behaviors in the right hand column. The first one has been done for you.

Classic Type	Behavior
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Dealing With Difficult People

Classic Type	Coping Strategy
The Know-It-All	Actively listen, be prepared, avoid overgeneralizations, build a trust relationship, ask expository questions, paraphrase main points
The Tank	Maintain eye contact, state your point of view with conviction, call them by name, don't argue with what they say, remain calm & firm
The Clam	Ask what, where, when and how questions, wait for response, listen-be persistent and supportive, use friendly-silent-stare technique
The Exploder	Let them run down and gain self-control, break into the tantrum with neutral phrases such as "stop" or "quiet", maintain composure
The Complainer	Listen to the complaint, paraphrase what is said, avoid accusing and becoming defensive, state the facts without comment, don't agree
The Wet Blanket	Don't be pulled down, make optimistic but realistic statements about past successes in solving similar problems, don't argue
The Procrastinator	Listen for unspoken hints, question to try to uncover reasons for stalling, give lots of support, examine facts of the situation
The Fake Know-It-Alls	Try not to make them look foolish, pick up on any part of the statement that is accurate, ask them for details
The Sniper	They count on you to not make a scene, draw them out into the open, ask questions about what they have said, don't be drawn in
The Super-Agreeable	Try to surface underlying facts and issues, let them know you value them, listen to human-there are hidden messages, compromise

WORDLES

Solve the following word puzzles about problem solving. The first one has been done for you.

WORDLE	ANSWER	IMPORTANCE
LAL	All Mixed Up	Residents need help or their lives are difficult
HE'S/HIMSELF		
YOU/JUST/ME		
THHAENRGE		
DEAL		

WORDLES

(answer key)

Solve the following word puzzles about problem solving. The first one has been done for you.

WORDLE	ANSWER	IMPORTANCE
LAL	All Mixed Up	Residents need help or their lives are difficult
HE'S/HIMSELF	He is beside himself	Without conflict resolution, a resident is frustrated
YOU/JUST/ME	Just between you and me	Remember that what the resident shares is confidential unless you have permission to share it
THHAENRGE	Hang in there	Patience will help get through the problem solving process. Sometimes it takes time.
DEAL	Big deal	Each resident issue is important

The Great White Man-Eating Shark

By Margaret Mahy

Problem/Resolution Chart

Problem	Resolution
Norvin had to share the beach with other swimmers, which made him cross and resentful.	
Mrs. Scorpio yelled that there was a real shark swimming next to her.	
The swimmers were tired of watching Norvin swim by himself.	
Norvin dressed up again like a shark to scare swimmers away so he could have the beach to himself.	
Norvin saw a real shark and couldn't swim anyway. (He learned his lesson, which was to not be so greedy.)	
The female shark wouldn't leave the water.	

The Great White Man-Eating Shark

By Margaret Mahy

Problem/Resolution Chart (Answer Key)

Conflict	Resolution
Norvin had to share the beach with other swimmers, which made him cross and resentful.	Norvin dressed up like a shark to scare swimmers away.
Mrs. Scorpio yelled that there was a real shark swimming next to her.	Everyone got out of the water.
The swimmers were tired of watching Norvin swim by himself.	They joined Norvin and went back into the water.
Norvin dressed up again like a shark to scare swimmers away so he could have the beach to himself.	Everyone got out of the water for one week.
Norvin saw a real shark and couldn't swim anyway. (He learned his lesson, which was to not be so greedy.)	Norvin didn't swim all summer.
The female shark wouldn't leave the water.	People put a net across Caramel Cove.

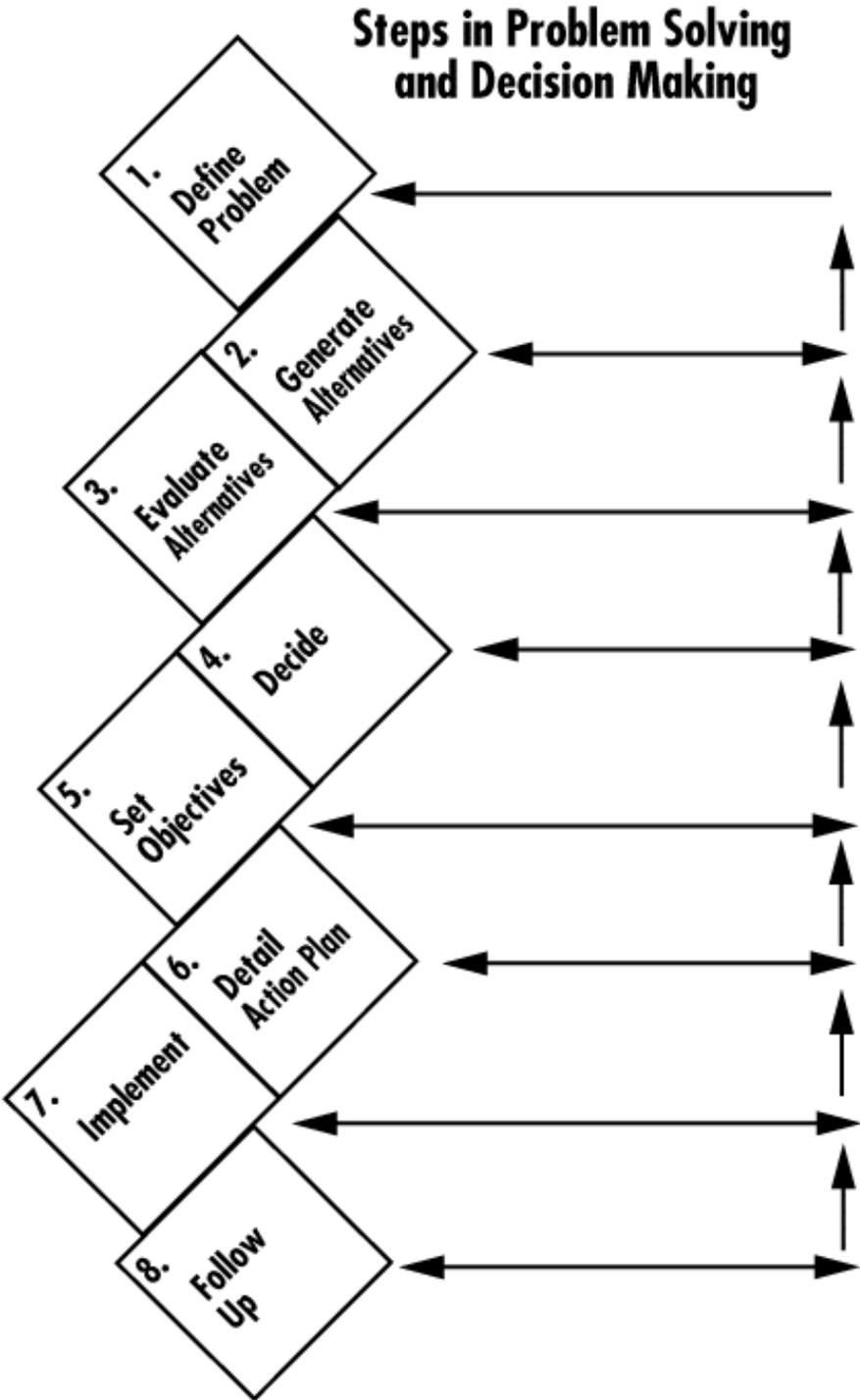
Common Problems

(Taken from Missouri's Long-Term Care Ombudsman Program
Training and Resource Manual, Chapter 7, The Problem-Solving Process)

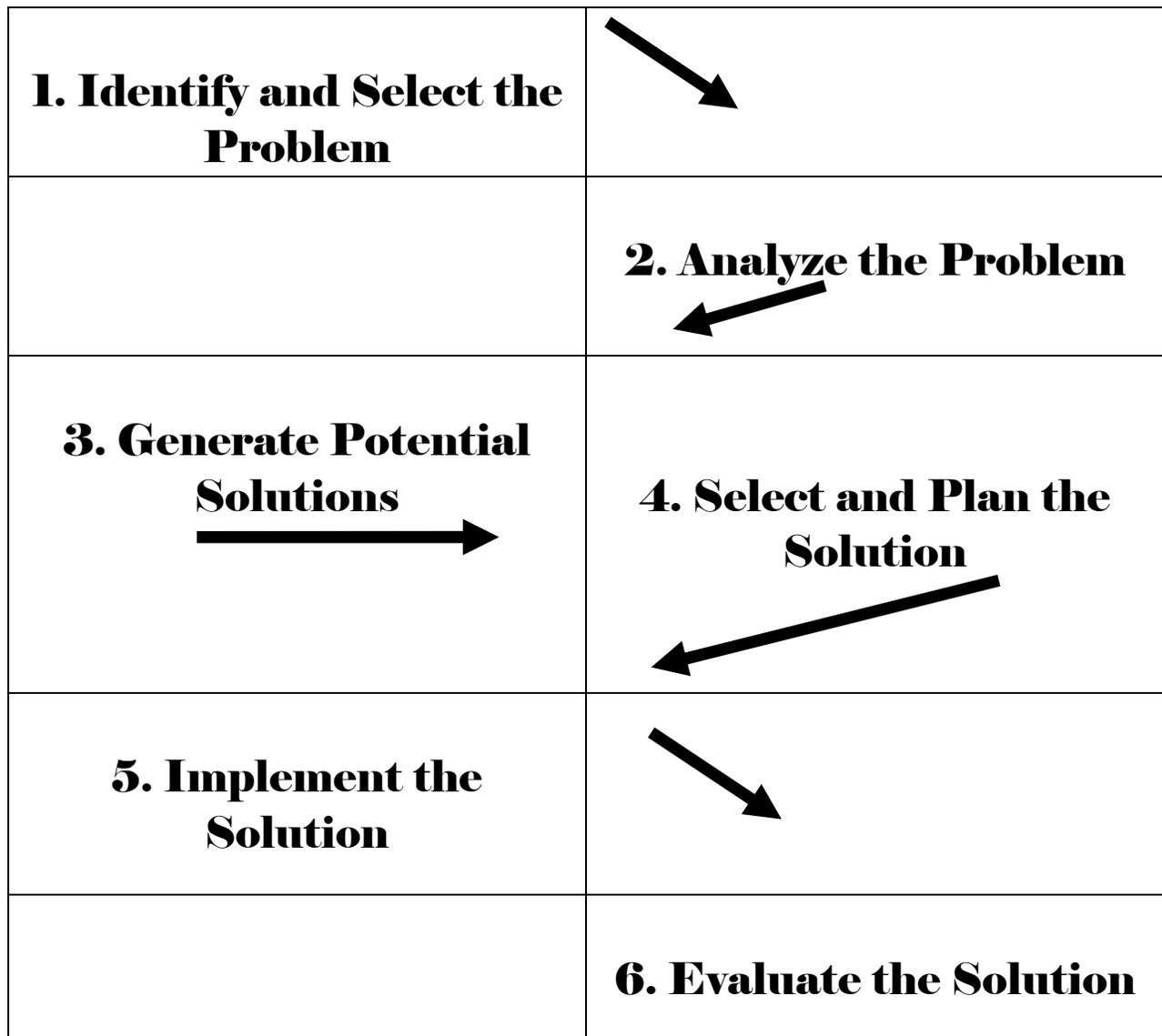
Common problems likely to surface in facilities include:

- ~ loneliness, the need for someone to talk to
- ~ boredom, not enough social or personal activities
- ~ problem with roommate
- ~ lack of privacy
- ~ poor food service or quality
- ~ inability to get services, care, or attention because of physical or communication problems
- ~ physical or chemical restraints
- ~ neglect
- ~ transfer from one room to another without notice
- ~ transfer to another facility because of change from private pay to Medicaid
- ~ need for assistance to document or make complaints
- ~ inability to live independently coupled with a desire on resident's part to leave the facility
- ~ use, accounting, and safe-keeping of personal funds and personal possessions
- ~ limited opportunities to go outside the facility for community activities
- ~ guardianship issues
- ~ insufficient medical or nursing care
- ~ need for legal assistance to make will or to make arrangements for disposing of personal funds or possessions abuse
- ~ physical or mental abuse
- ~ no rehabilitative care
- ~ need for assistance to find or purchase services
- ~ loss of dignity and self-respect based on general treatment of facility
- ~ additional or high charges for "extra" services

8 Step Problem Solving Process



6 Step Problem Solving Process



Stages in the Problem-Solving Process

Table 4

STAGE 1 INTAKE AND INVESTIGATION	
Receive the Complaint	Receive problems, complaints, or concerns.
Get Permission	Obtain resident's permission to work with problem AND permission whether or not to use resident's name
Gather Information	Collect information from interviews, records, or observations.
Verify the Problem	Review information gathered. Assess what seems to be at the root of the problem. The complaint may be only a symptom.
STAGE 2 ANALYSIS AND PLANNING	
Analyze the Situation	Once you identify the problem, consider the causes.
Consider Solutions	Generate alternative solutions or approaches. Who should be involved? When? How? Why? <u>Remember to stay focused on what the resident wants.</u>
Identify Obstacles	Anticipate obstacles to help select an appropriate approach.
STAGE 3 RESOLUTION AND FOLLOW UP	
Choose an Approach	From your list of alternative solutions; choose the most efficient way to proceed, keeping any obstacles in mind. Identify alternative strategies in case you need them.
Act	Proceed with the selected plan, but be prepared to use an alternative.
Evaluate Outcome	Check back with the persons involved to evaluate the outcomes. Is the problem solved? Is it partially solved? If not, look for new approaches or information and start again.

Excerpt from Chapter 7 of the Missouri Long-Term Care Ombudsman Program Training and Resource Manual

PROBLEM SOLVING SCENARIO

A resident
feels unsafe
while sleeping
in the facility.

Problem-Solving Process Worksheet

Table 4

STAGE 1 INTAKE AND INVESTIGATION
Receive the Complaint
Get Permission
Gather Information
Verify the Problem
STAGE 2 ANALYSIS AND PLANNING
Analyze the Situation
Consider Solutions
Identify Obstacles
STAGE 3 RESOLUTION AND FOLLOW UP
Choose an Approach
Act
Evaluate Outcome

**Excerpt from Chapter 7 of the Missouri Long-Term Care
Ombudsman Program Training and Resource Manual**

Problem-Solving Process Answer Key

Table 4

STAGE 1 INTAKE AND INVESTIGATION
<p>Receive the Complaint: Listen to a resident about his/her concern.</p> <p>Get Permission: Ask if you can use his/her name.</p> <p>Gather Information: Seek specifics. Find out what the resident means by he/she doesn't feel safe. Ask specific questions: Is someone watching her? Is he having nightmares? Did she have this problem at home? How long has this been going on?</p> <p>Verify the Problem: Gather specific information. Document dates and times of concerns. Ask to whom the resident has told this-family member or staff. Talk to the roommate and see if he/she feels unsafe. Has the resident heard of anyone else feeling unsafe?</p>
STAGE 2 ANALYSIS AND PLANNING
<p>Analyze the Situation: Consider causes. Is this a new resident? Has something major happened recently? Do they have a new roommate? Moved to a new room? New Staff person taking care of them at night?</p> <p>Consider Solutions: Ask the resident what he/she thinks should happen. Maybe a staff member is dressing in black and it scares the resident. Perhaps the resident just wants his/her things locked up. Decide with whom this needs to be discussed (depending on what the cause is).</p> <p>Identify Obstacles: You suggestions could be ignored. Nobody is addressing the issue. The resident is confused.</p>
STAGE 3 RESOLUTION AND FOLLOW UP
<p>Choose an Approach: Ask if the resident wants to go with you. If found to be a serious issue, bring it up to the resident council.</p> <p>Act: Document in your report all that you have done. Express concern for and to the resident. Set up and hold any necessary meetings. Reassure the resident. Keep resident informed of progress.</p> <p>Evaluate Outcome: Check back with the resident to determine if issue is resolved to his/her satisfaction (or not). DOCUMENT THIS!</p>

Compassion Satisfaction and Fatigue (CSF) Test

Helping others puts you in direct contact with other people's lives. As you probably have experienced, your compassion for those you help has both positive and negative aspects. This self-test helps you estimate your compassion status: How much at risk you are of burnout and compassion fatigue and also the degree of satisfaction with your helping others. Consider each of the following characteristics about you and your **current** situation. Write in the number that honestly reflects how frequently you experienced these characteristics in the last week. Then follow the scoring directions at the end of the self-test.

0=Never	1=Rarely	2=A Few Times	3=Somewhat Often	4=Often	5=Very Often
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Items About You

-
- _____ 1. I am happy.
 - _____ 2. I find my life satisfying.
 - _____ 3. I have beliefs that sustain me.
 - _____ 4. I feel estranged from others.
 - _____ 5. I find that I learn new things from those I care for.
 - _____ 6. I force myself to avoid certain thoughts or feelings that remind me of a frightening experience.
 - _____ 7. I find myself avoiding certain activities or situations because they remind me of a frightening experience.
 - _____ 8. I have gaps in my memory about frightening events.
 - _____ 9. I feel connected to others.
 - _____ 10. I feel calm.
 - _____ 11. I believe that I have a good balance between my work and my free time.
 - _____ 12. I have difficulty falling or staying asleep.
 - _____ 13. I have outburst of anger or irritability with little provocation.
 - _____ 14. I am the person I always wanted to be.
 - _____ 15. I startle easily.
 - _____ 16. While working with a victim, I thought about violence against the perpetrator.
 - _____ 17. I am a sensitive person.
 - _____ 18. I have flashbacks connected to those I help.
 - _____ 19. I have good peer support when I need to work through a highly stressful experience.
 - _____ 20. I have had first-hand experience with traumatic events in my adult life.
 - _____ 21. I have had first-hand experience with traumatic events in my childhood.
 - _____ 22. I think that I need to "work through" a traumatic experience in my life.
 - _____ 23. I think that I need more close friends.
 - _____ 24. I think that there is no one to talk with about highly stressful experiences.
 - _____ 25. I have concluded that I work too hard for my own good.
 - _____ 26. Working with those I help brings me a great deal of satisfaction.
 - _____ 27. I feel invigorated after working with those I help.
 - _____ 28. I am frightened of things a person I helped has said or done to me.
 - _____ 29. I experience troubling dreams similar to those I help.
 - _____ 30. I have happy thoughts about those I help and how I could help them.
 - _____ 31. I have experienced intrusive thoughts of times with especially difficult people I helped.

0=Never	1=Rarely	2=A Few Times	3=Somewhat Often	4=Often	5=Very Often
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- _____ 32. I have suddenly and involuntarily recalled a frightening experience while working with a person I helped.
- _____ 33. I am pre-occupied with more than one person I help.
- _____ 34. I am losing sleep over a person I help's traumatic experiences.
- _____ 35. I have joyful feelings about how I can help the victims I work with.
- _____ 36. I think that I might have been "infected" by the traumatic stress of those I help.
- _____ 37. I think that I might be positively "inoculated" by the traumatic stress of those I help.
- _____ 38. I remind myself to be less concerned about the well-being of those I help.
- _____ 39. I have felt trapped by my work as a helper.
- _____ 40. I have a sense of hopelessness associated with working with those I help.
- _____ 41. I have felt "on edge" about various things and I attribute this to working with certain people I help.
- _____ 42. I wish that I could avoid working with some people I help.
- _____ 43. Some people I help are particularly enjoyable to work with.
- _____ 44. I have been in danger working with people I help.
- _____ 45. I feel that some people I help dislike me personally.

Items About Being a Helper and Your Helping Environment

- _____ 46. I like my work as a helper.
- _____ 47. I feel like I have the tools and resources that I need to do my work as a helper.
- _____ 48. I have felt weak, tired, run down as a result of my work as helper.
- _____ 49. I have felt depressed as a result of my work as a helper.
- _____ 50. I have thoughts that I am a "success" as a helper.
- _____ 51. I am unsuccessful at separating helping from personal life.
- _____ 52. I enjoy my co-workers.
- _____ 53. I depend on my co-workers to help me when I need it.
- _____ 54. My co-workers can depend on me for help when they need it.
- _____ 55. I trust my co-workers.
- _____ 56. I feel little compassion toward most of my co-workers.
- _____ 57. I am pleased with how I am able to keep up with helping technology.
- _____ 58. I feel I am working more for the money/prestige than for personal fulfillment.
- _____ 59. Although I have to do paperwork that I don't like, I still have time to work with those I help.
- _____ 60. I find it difficult separating my personal life from my helper life.
- _____ 61. I am pleased with how I am able to keep up with helping techniques and protocols
- _____ 62. I have a sense of worthlessness/disillusionment/resentment associated with my role as a helper.
- _____ 63. I have thoughts that I am a "failure" as a helper.
- _____ 64. I have thoughts that I am not succeeding at achieving my life goals.
- _____ 65. I have to deal with bureaucratic, unimportant tasks in my work as a helper.
- _____ 66. I plan to be a helper for a long time.

Directions for Scoring the *Satisfaction and Fatigue Test*:

Mark the items for scoring as follows:

Your potential for compassion satisfaction (X):

Put an X by the following 26 items: 1-3, 5, 9-11, 14, 19, 26-27, 30, 35, 37, 43, 46-47, 50, 52-55, 57, 59, 61, 66

Add the numbers you wrote next to each number with an X, and note the following

118 and above = extremely high potential

100-117 = high potential

82-99 = good potential

64-81 = modest potential

below 63 = low potential

Your potential risk for burnout (Check Mark):

Put a check by the following 16 items: 17, 23-25, 41, 42, 45, 48, 49, 51, 56, 58, 60, 62-65

Add the numbers you wrote next to each number with a check mark, and note the following

36 or less = extremely low risk

37-50 = moderate risk

51-75 = high risk

76-85 = extremely high risk

Your potential risk for compassion fatigue (Circle):

Circle the following 24 items: 4, 6-8, 7, 12, 13, 15, 16, 18, 20-22, 28, 29, 31-34, 36, 38-40, 44

Add the numbers you wrote next to each number you circled, and note the following

26 or less = extremely low risk

27-30 = low risk

31-35 = moderate risk

36-40 = high risk

41 or more = extremely high risk

Two sons were left a large piece of property by their father. For months they fought over how the land should be divided. Finally, they brought their problem to their rabbi and asked him to solve it.

"Come back tomorrow," said the rabbi, "and we'll talk."

The next day the sons returned and the rabbi gave them his solution.

"Toss a coin," he said to one of the brothers. "You call it, heads or tails," he said to the other. "The one who wins the toss divides the land."

"That's no solution," said one of the brothers. "We're right back where we started from."

"Not so," said the rabbi. "The one who wins the toss divides the land; but the other gets first choice."