MISSOURI LTCO



PICKLE PREPARATION TRAINING

(Getting Ready to Deal with Difficult Issues)

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."

The Great White Man-Eating Shark by Margaret Mahy



Who Are You?

SCORING

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:

- •Solving:
- Resolution:

DEFINITIONS

- •Miscommunication:
- •Conflict:
- Divergent:

HOW DO YOU FEEL?

Happy

Sad

Excited

Bored

Silly

Tired

• 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.

• AUTONOMY: 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.
 Boundary areas include confidentiality, touch and privacy.

• CHOICES: Being mindful of choices sounds and looks like caring.

 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.

• DEPENDABILITY: Our ability to be trustworthy and reliable gives us credibility.

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

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 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:

Courtesy:
helpful and polite (the ability to say thank you and I'm sorry)

verbal and physical aggression, hostility, avoidance, dishonesty, withdrawal and disinterest, silence and distancing, resistance

Honesty: truthfulness

HOW
CAN
WE
GAIN
TRUST?

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 listening 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..."

How Do We Communicate With The

Sensory Impaired and Confused?

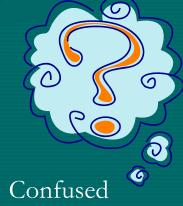








Speech Impaired



Difficult People Matching Game

- 1. b
- 2. e
- 3. g
- 4. a
- 5. i

- 6. f
- 7. j
- 8. d
- 9. h
- 10. c

DEALING WITH DIFFICULT PEOPLE

Coping Strategies

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, listenbe persistent and supportive, use friendly-silent-stare technique

The Exploder

Let them run down and gain selfcontrol, 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

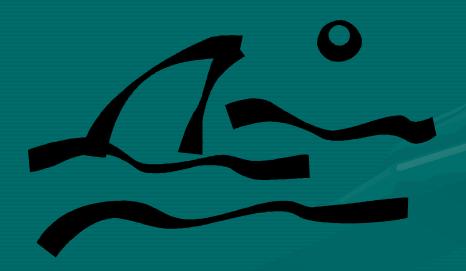
The Super-Agreeable

Try to surface underlying facts and issues, let them know you value them, listen to human-there are hidden messages, compromise

WORDLES

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



Problems/Resolutions

COMMON PROBLEMS IN FACILITIES

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 SolutionsGenerate alternative solutions or approaches. Who should beinvolved? When? How?Why? Remember to stay focused on what the resident wants.Identify ObstaclesAnticipate 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.

Problem Solving Scenario

A resident feels unsafe while sleeping in the facility.

Satisfaction and Fatigue Test Scoring Guide

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

Satisfaction and Fatigue Test Scoring Guide

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

Satisfaction and Fatigue Test Scoring Guide

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."