



Training Overview

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The CHATO Training

Goal. The goal of this course is to increase awareness of the importance of effective communication with older adults and to use evidence-based person-centered communication during interactions with older adults in nursing homes and other health care settings.

Intended Audience. This course is designed for staff in nursing homes, independent and assistive living, and health care settings in the community that include registered nurses, nursing assistants, nursing home dietitians, direct care professionals, other administrations and support employees.

Length. The total program is approximately 3 hours, split into 3 modules. Each module is approximately an hour, depending on the individual user. Upon completion of all three modules and 70% on a posttest, a certificate of completion (3 nursing contact hours) will be awarded.

Learning Outcomes

After completing the CHATO program, participants will:

1. Identify the importance of communication in nursing care of older adults.
2. Identify barriers to communication in care of older adults.
3. Distinguish effective and ineffective communication strategies.
4. Identify elderspeak and its negative effects.
5. Revise communication to reduce elderspeak and increase person-centered messages.

Module 1

Upon completion of this module, you will be able to:

- Recognize the importance of communication to older adults.
- Identify barriers to communication in care of older adults.
- Distinguish between effective and ineffective communication strategies.

Module 2

Upon completion of this module, you will be able to:

- Identify elderspeak and its potential negative messages.
- Contrast effective and ineffective communication strategies.
- Revise transcripts to reduce elderspeak and ineffective communication.

Module 3

Upon completion of this module, you will be able to:

- Identify affirming communication.
- Critique communication in video recordings of nursing home staff-resident communication.
- Rewrite transcripts to reduce elderspeak and ineffective communication.

The course content is presented by Dr. Kristine Williams, RN, PhD. There are learning activities, discussion forums, list of resources, pre and posttests, and evaluations at the end of the course. The practice activities were designed to provide opportunities to apply the knowledge and skills presented in the course and a virtual discussion forum is available to share experiences and reflect with others.

A Certificate of Completion (3 nursing contact hours) will be awarded on successful completion of this course and scoring 70% or higher on the posttest. If a participant does not receive 70% or greater on the posttest, he or she may review the material and re-take the posttest.

The CHATO Training: Content Overview

An overview of content in each module and examples of learning activities are provided.

Module 1

Welcome to the Changing Talk (CHAT) Training Module 1

- Learning Outcomes
- Outcome Statement

Craft Video

The participant watches the Craft video and rates the staff speaker's communication. The discussion breaks down the interaction and identifies the ineffective communication, both verbal and nonverbal. The discussion also includes what she could have done differently and what the staff speaker does well.

The Importance of Communication

The importance of communication is discussed in general and in the nursing home setting. Communication helps us to exchange information and to communicate our needs as well as to meet the needs of others. This includes physical needs, social needs, and emotional needs.

Benefits of Effective Communication and Practice Activity

The slide discusses 8 benefits of effective communication: reducing problem behaviors, preventing mistakes, increasing job satisfaction, decreasing power struggles, increasing resident satisfaction, encouraging independence and self-care, enhancing self-esteem, and improving quality of care. The participant then completes a practice activity reinforcing who benefits from effective communication.

Elizabeth Layton

Elizabeth Layton was a woman who suffered a stroke and used art work as a way to cope with her depression while living in a nursing home. She developed a series of drawings entitled "The Motherless Child" that dramatically show how an older adult experiences living in a nursing home. Elizabeth Layton's drawings in this series are used through the training and in the posters to illustrate the resident's perspective about communication and life in the nursing home. Two prints are discussed and resistiveness to care and elderspeak are introduced.



Communication Activity Checklists

The participant is asked to think about past successful and unsuccessful communication encounters and to reflect on specific characteristics that make the encounter successful and unsuccessful. These include

the environment, shared language, common frame of reference, mental abilities, openness, expectation of response, and respect and trust.

Components of Ineffective Communication

Ineffective communication strategies are discussed. These include: ignoring talk, changing the subject, using platitudes or being judgmental, elderspeak, using closed questions, giving advice, and asking why questions.

Effective Communication – Verbal and Nonverbal

Positive verbal strategies include: addressing resident by their preferred name, paraphrasing or restating what the residents says in your own words as way to check that your understanding, reflecting the resident’s feelings, asking for more information, and responding on topic. Nonverbal strategies discussed include: eye contact, tone, body position, and posture.

Doctor Appointment Video Activity 1-3

The participant watches three videos which depict interactions between staff and a resident, based on a real staff-resident interaction in a nursing home. This is the situation: A resident with a broken ankle is waiting to be taken to the clinic to get a new cast. The staff is preparing the resident for the trip. In Video 1 and Video 2, the activity has the participant identify the ineffective communication strategies in the video script, and in Video 3, the activity has the participant identify the effective communication strategies in the video script.

Video 1

Video 2

Video 3

Practice Activity 2 – Identify the Ineffective Communication

Directions: Click on the words where you think ineffective communication has been used. There should be seven ineffective communications in this exercise.

Aide: Arn't you the lucky girl today. You get to go outside.

Mrs. X: Where are we going?

Aide: You're going to Doc Butler's office so you can get a new cast.

Mrs. X: A new cast? Why do I need a new cast? This cast is just fine.

Aide: We're going to go get a new cast so you can start walking on your legs so you can get up on your feet.

Mrs. X: I don't want to walk on it yet.

Aide: Oh sure you do. You want to get up and walk. You know Sweetie, the doctor knows what's best and we want to get you up walking as soon as we can. Okay? You know after we go to Dr. Butler's office we can stop and get some ice cream.

Mrs. X: Okay.

Aide: Alright.

Mrs. X: But I still don't want to walk on it.

Aide: Oh don't be silly.

Correct! Using "Sweetie" is elderspeak and should be avoided.

Practice Activity 3 – Identify the Ineffective Communication

Directions: Click on the text where you think ineffective communication has been used. There should be five ineffective communications in this exercise.

Aide: Are you ready to go? The driver will be here soon. We need to be on our way.

Mrs. X: Where are we going?

Aide: We're going to Dr. Butler's office. Don't you remember? We're going to get a new cast on your foot.

Mrs. X: A new cast? Why? I don't need a new cast.

Aide: We need to get a new cast so you can be up and walking on it. We need you to start using your leg again.

Mrs. X: I don't want to walk on it.

Aide: Why not?

Mrs. X: I'm not ready to do it.

Aide: Oh don't be lazy. It's a good thing to get up and walk on it. You need to get going. To get working and to get that leg exercised.

Mrs. X: I don't want to walk on it yet.

Aide: You know we can't help you around here forever. We can't keep you in a wheel chair when you are perfectly capable.

Mrs. X: I know that. I'll be ready one day.

Correct! Using "Don't be lazy," is judgmental.

Practice Activity 4 – Identify the Effective Communication

Directions: Click on the text where you think effective communication has been used. There should be five effective communications in this exercise.

Aide: Well let's wait here for the elevator so we can get going. How are you doing Mrs. Thompson. Are you ready to go?

Mrs. Thompson: Where are we going?

Aide: You're going to Dr. Butler's office. Don't you remember? We're going to get a new walking cast.

Mrs. Thompson: Well what's wrong with this one? This cast is fine. I don't see anything wrong with it.

Aide: (Gets down to patient's level) Don't you want to get a new cast so you can get up and walk around or are you afraid about falling again? I know it was a frightening experience for you.

Mrs. Thompson: Yeah. I'm just scared to walk on it.

Aide: That's perfectly normal. After all you did have a bad fall. The Physical Therapist will work with you and I'll be here to help you. We'll start slowly. Why don't you talk about it with Dr. Butler? Okay?

Mrs. Thompson: Okay

Aide: Alright.

Mrs. Thompson: Do you think I need to do it today?

Aide: I think you'll be alright with it, you'll see.

Correct! The nurse aide addresses the resident with her preferred name.

Discussion Questions

Homework from the module: Identify one effective or ineffective communication strategy and practice using or avoiding it with residents.



Additional Discussion Questions:

1. How do you use communication when working with residents? What are the benefits to using effective communication from your perspective?
2. What are the characteristics of successful communication? What have you noticed when communicating with residents?
3. What ineffective strategies have you seen when working with residents? How have residents responded or reacted?
4. How does your nonverbal communication impact your ability to interact with residents?
5. What do you see in the Elizabeth Layton prints? How is the resident feeling?

Module 2

Welcome to the Changing Talk (CHAT) Training Module 2

- Learning Outcomes
- Outcome Statement

Professional Communication Style Questionnaire

The participant completes the professional communication style questionnaire and is asked to reflect on their own style of communication.

The Motherless Child by Elizabeth Layton

Another Elizabeth Layton print is presented and discussed.



Communication Challenges of Aging

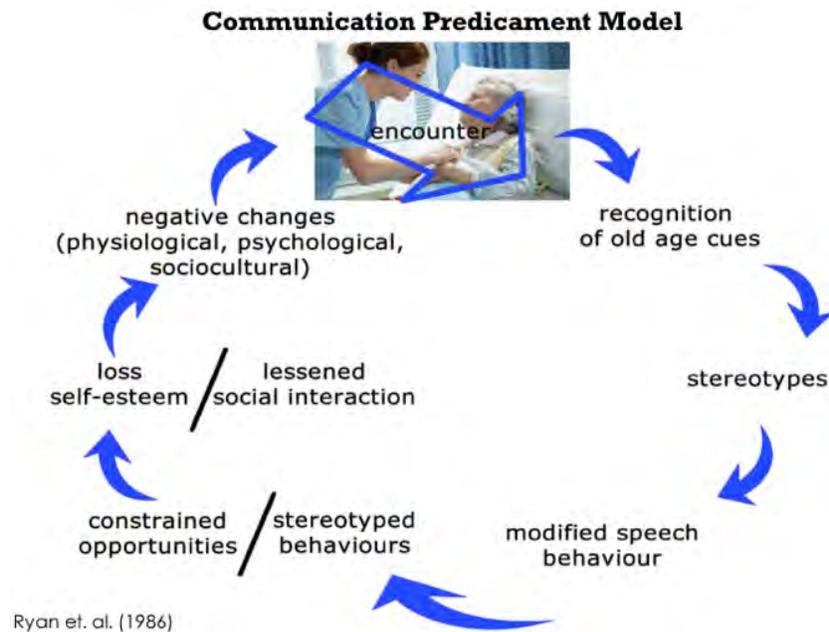
Normal vs. abnormal communication challenges that occur with aging are discussed. The participant is asked to use their own expertise to think about how residents adjust, successfully or not to normal changes of aging as well as disease specific changes that may make communication more challenging.

Nursing Home Communication Challenges

Four types of common, problematic nursing home communication are explored: lack of interaction, ignoring talk, task talk, and elderspeak. Illustrations and examples include video (Lost for Words Video and Discussion) and audio recordings of actual nursing home communication.

Communication Predicament Model

The participant is guided through the Communication Predicament Model that explains elderspeak use and its negative effects. The model provides insight into how stereotypes tend to negatively impact communication and how the recipient behavior changes to align with the stereotyped message.



Elderspeak Activity - Lost Videos 1-3

Three videos of the same CNA/resident interaction are presented to illustrate differences due to underlying messages. The video shows a lost resident and a CNA assisting her with locating her room. The CNA language and communication style varies across videos. Videos one and two identify two characteristics of elderspeak: baby talk and controlling talk. The third video demonstrates affirming communication. After each of the videos the participant analyzes the script of Video 1 and 2 to identify inappropriate language and communication style or the appropriate language and communication style in Video 3.

Video 1

Lost 1 – Let’s Analyze the Script

Aide: Where do you think you’re going?
That’s not your room you **silly girl**.
Mrs. W continues to enter the room
Aide: Are you lost? You are lost aren’t you?
We can’t have that. Here, why don’t you come with me and I’ll take you back to your room so you can feel all comfortable, okay? Come on **sweetie. Honey**, that’s not your room. You want to come with me and I’ll take you to your room. Why don’t you grab my hand and I’ll take you to your room. It’s just down the way.

Video 2

Lost 2 – Let’s Analyze the Script

Aide: Beulah, that’s not your room. You don’t have any business being there. What are you doing? You know that residents can’t go in and out of other people’s rooms.
Mrs. W pauses.
Aide: Come on. Let me take you to your room. You don’t need to be here. You don’t need to be out of your room. Come on. Let’s go. Come on. This way. Your room is down here. Don’t you remember where you live?

Video 3

Lost 3 – Let’s Analyze the Script

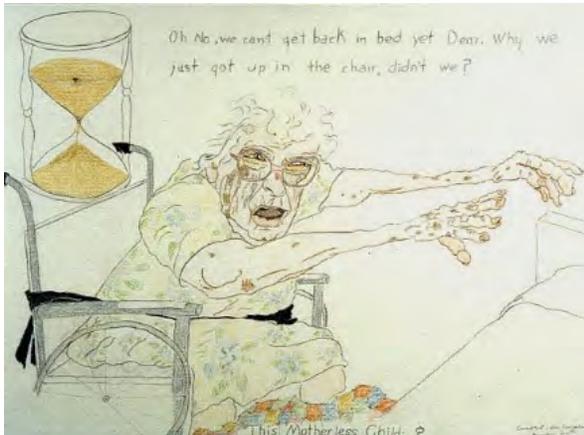
Aide: Mrs. West are you having trouble finding your room? All these doors look alike. This isn’t your room. Shall we go down to the solarium? That’s where your room is. Come on. Follow me. Mrs. West let me show you where your room is, okay? Come on. It’s just down the way here. It’s just by the solarium.

Additional Video Examples

Three additional videos are provided from an actual nursing home setting: Craft 2, Beulah, and Friend. The participant is encouraged to watch the video, identify appropriate and inappropriate communication by analyzing the scripts, and modifying the transcripts to improve communication.

Discussion Questions

Homework from the module: Please listen to communication in your work place to identify elderspeak use with older adults



Additional Discussion Questions:

1. What did you notice about your professional communication style?
2. What do you see in the Elizabeth Layton prints? How is the resident feeling?
3. What type of communication challenges do you see in your residents?
4. Four types of common, problematic nursing home communication were explored. Have you seen these in your nursing home or other places you have worked? What are your experiences with these four types of communication?
5. How do stereotypes that we have of older adults impact our communication with them?
6. When you watched the Lost Videos what did you notice about the three different versions?
7. What did you notice when you watched the additional videos: Craft 2, Beulah, and Friend? How was the resident feeling?

Module 3

Welcome to the Changing Talk (CHAT) Training Module 3

- Learning Outcomes
- Outcome Statement

Person-centered or Affirming Communication

Four characteristics of affirming communication are discussion: acknowledging that the older is an independent communication partner, acknowledges and accepts the resident's experience, perceptions, and feelings, responding to the older adult on topic, and indicating a willingness to relate to that person. These characteristics are modeled in the Stay Put Video. The participant analyzes the script and is asked to rewrite the script to include these strategies and to improve the communication.

Stay Put - Rewrite the Script

Directions: Please type your answer of how you can change the script to make it more affirming. When you are done, click on "Check Sample Answer" to compare to the recommended answer.

Aide:

[Check Sample Answer](#)

Mrs. X: How long are you going to be?

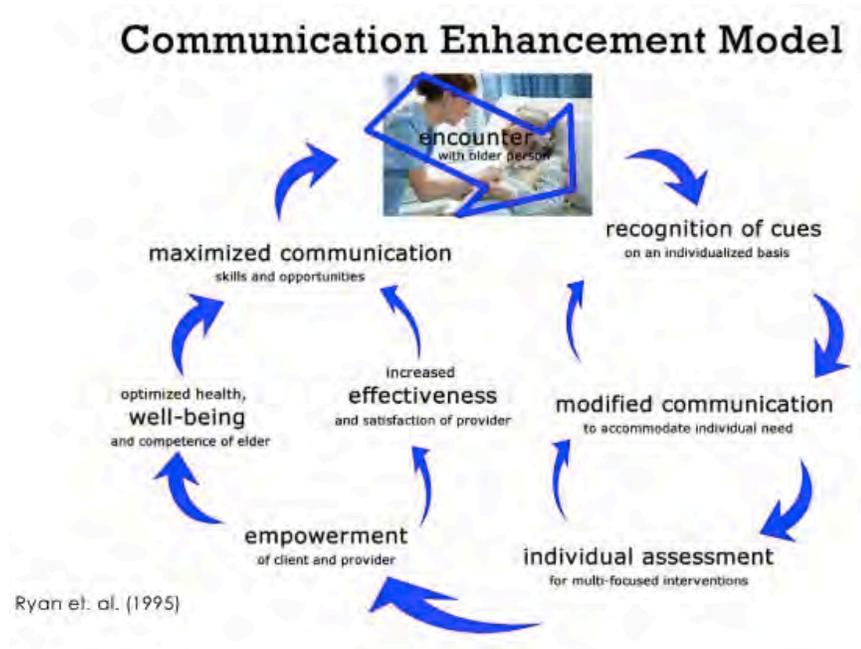
Aide:

[Check Sample Answer](#)

Additional affirming communication covered include: using the resident’s preferred name, thanking the resident, and knowing the resident and their preferences.

Communication Enhancement Model

The participant is guided through the Communication Enhancement Model. The model provides a guideline for improving communication with older adults by making an individual assessment of communication abilities and only adjusting or modifying the way we talk based on the person’s needs.



Evaluating Communication

Effective and ineffective communication from Module 1 and 2 are reviewed. Three scenarios (Exercise, Reorientation, and Visit) are presented in six videos; two versions of each scenario. One is overly nurturing, and the other is directive. The participant is asked to watch each video and rewrite the script.

“Fix the Problems”

Directions: Click on each button to watch the video and then proceed with the activity to fix the script.

| | |
|-------------------------------------|-----------------------------------|
| Exercise 1 Overly nurturing | Exercise 2 Directive form |
| Reorientation 1 Overly nurturing | Reorientation 2 Directive form |
| Visit 1 Overly nurturing | Visit 2 Directive form |

Exercise 1

Video Transcript



00:07/00:44

Mrs. X is recovering from a broken hip and has been slow to resume walking. Her aide is assigned to walk her up and down the hallway of the unit at least twice daily.

Aide: Hi Sweetie, it's time for your exercise today. Let's get ready to walk down the hall.

Mrs. X: I'm too tired today.

Aide: Oh surely you're not. We need to get your slippers on.

Mrs. X: No, no. I don't want those on. They're too tight and they hurt.

Aide: Your little toes are so fat and smushie. It looks like your ankle is swollen too. Maybe we need the nurse to look at you.

Mrs. X: They're always like that. They are always like that.

Aide: Well, I'll tell you what. You just keep your feet up like this and don't move a muscle. I'll go get the nurse and we'll take a look at it. After all, we take good care of you here don't we?

Proceed to Activity

Practice Activity Exercise 1

Directions: Click on the text where you think it should be fixed, and then fix it by typing what you think the correct answer should be. Then, click on the number in the third column to check the recommended answers.

Mrs. X is recovering from a broken hip and has been slow to resume walking. Her aide is assigned to walk her up and down the hallway of the unit at least twice daily.

Aide: Hi Sweetie, it's time for your exercise today. Let's get ready to walk down the hall.

Mrs. X: I'm too tired today.

Aide: Oh surely you're not. We need to get your slippers on.

Mrs. X: No, no. I don't want those on. They're too tight and they hurt.

Aide: Your little toes are so fat and smushie. It looks like your ankle is swollen too. Maybe we need the nurse to look at you.

Mrs. X: They're always like that. They are always like that.

Aide: Well, I'll tell you what. You just keep your feet up like this and don't move a muscle. I'll go get the nurse and we'll take a look at it. After all, we take good care of you here don't we?

Please type your answers in the boxes below.

- 1
- 2
- 3
- 4
- 5

Click the number below for sample answer when you are ready.

- 1
- 2
- 3
- 4
- 5

Feedback will appear down here when you click the correct text.

Discussion Questions

Homework from the module: What was the most informative aspect of the training? What did you learn from this training?

Additional Discussion Questions:

1. Have you been changing your communication strategies over the last three weeks? In what ways?
2. Have you seen changes with your residents? Their communication? Their behavior?
3. Which strategies are working? Which need to be improved?