

Communications

Lobby Day

Guide/Resource Book



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Introduction

People with End-Stage Renal Disease (ESRD) are part of a community --- actually several communities --- that includes other patients, facility staff (doctors, nurses, social workers, technicians, dieticians, administrators), family members, and the ESRD Network organization. Keeping the lines of communication open among the community members is vital to the well-being of the kidney patient.

One way to open the lines of communication is through the use of Lobby Days. This resource will assist you with preparing and executing a Lobby Day at your dialysis unit or transplant center.

You are welcome to use these suggestions or to use this handbook as a tool to help you develop your own creative approach for effective communication among patients and staff. The Network welcomes your feedback and suggestions for Lobby Days, as well as pictures of your Lobby Day!

Throughout this resource, there are images of different methods that people use to communicate, such as a "message in a bottle". What ways do you like to communicate?



What is a Lobby Day?

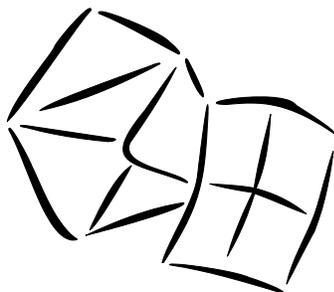
In its simplest form, a Lobby Day is a presentation or a sharing of information. It may be interactive, static or a combination of the two styles. Providing information in a variety of methods will address the different learning styles of both patients and staff. For instance, some people learn better by reading or seeing the information, some prefer to hear the information, and others like to practice or be actively involved in the learning. Using more than one approach may result in better learning and retention.

Interactive learning approaches can include:

- Discussions
- Questions and Answers
- Games (Jeopardy, Scavenger Hunt, Bingo)
- PowerPoint presentations with polling questions
- Role-play Exercises

Static learning approaches can include:

- Bulletin board displays or posters
- Handouts and pamphlets
- Individual activities (Word Search, Crossword Puzzle, Fill-in-the-Blank)
- Watching a YouTube presentation or using a computer or application-based training program



How to Hold a Lobby Day

Having a Lobby Day doesn't have to be complicated. Here are five easy steps:

Step 1: Choose a Date and Location

- To reach the majority of the patients in your facility, you should hold the event on at least two different days to accommodate the dialysis schedules of everyone in your unit. Some units hold an event every day for a week to reach all patients.
- Have a discussion with your unit's care team to determine a good date to make sure there are no major conflicts.
- If your unit participates in the Network Patient Representative Program (NPRP), the event may be best coordinated by the Facility Staff Coordinator (FSC) and the Network Patient Representative (NPR). It is an excellent opportunity to start communication techniques as the patients at the unit have the chance to meet with their Network Patient Representative.
- Decide if the lobby meets the needs of your Lobby Day presentation or if a conference room is better suited to the type of program you want to do.

Step 2: Market and Create Excitement About the Lobby Day

- If your facility has a newsletter, announce the Lobby Day dates in it.
- Post information about the Lobby Day on bulletin boards (both the patient and staff boards). Post information in a variety of places such as by the sink or the scales.
- Personally invite people to the Lobby Day: hand out "admission tickets" or invitations to the event. Make sure you include family members in the invitations!
- Develop and pass out flyers to peak interest in the upcoming Lobby Day.

- Have the Network Patient Representative or the Facility Staff Coordinator for the program make "public service announcements" about the Lobby Day over the unit's loud speaker.

Step 3: Preparation

- Identify your **goals** for the event. Are they educational, social, personal enrichment, or a combination of different aspects? Only have 1-3 primary goals. Then determine how you will meet your goals and what learning styles you will address.
- Decide how long the event will take place – an hour, four hours – develop an outline of your program to determine the **length of time** you need to reach your goals.
- What **equipment and materials** do you need to meet your goals? For example, will you use a computer, paper and pens, name tags or tape? You may need a flat table in the patient waiting area for a display, refreshments, prizes, pictures or handouts. Or you may need a computer, a large monitor or a way to digitally project a PowerPoint presentation on a screen or a wall if you want to do a slide show presentation. And have a camera to take pictures of the event to post and share with others.
- Determine **who** needs to be involved to make the event happen and identify the person who is in charge of the event. Involve the Facility Staff Coordinator and Network Patient Representative, if possible. Decide which staff members can contribute to the event and if you need to set up shifts for staff involvement. Determine if you want to bring in a guest speaker and then make the contact to set up the arrangements. Send a reminder to all involved before the event.
- Pick a **theme** (like "circus" or "spring") and choose appropriate images and colors to bring out the theme. With administrative permission, decorate the Lobby Day area (balloons, clip art, streamers, confetti, flowers, or trinkets that emphasize the theme) and make sure you clean up the area at the end of the Lobby Day.

- Decide if you are going to have an **ice breaker** to help patients, family members and staff interactions.
- Gather and/or develop your **educational materials**. If you are using handouts, Word Search puzzles, or other written materials, make sure you have enough for everyone. You can contact The Renal Network (317/257-8265 or info@nw10.esrd.net) for needed posters, brochures, or handouts or check out the Network web site at www.therenalnetwork.org. You can also do a Google search for additional resources or use resources from your corporation or unit.

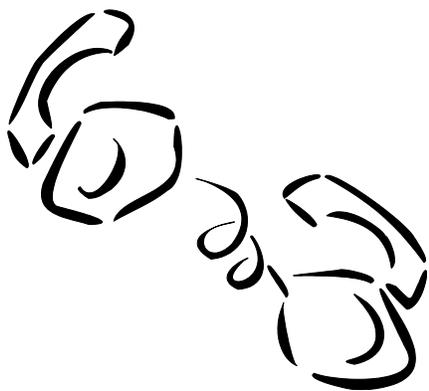
Step 4: The Day of the Event

- Let your Lobby Day commence! This is your time to shine and to have high energy. Invite people to join in either as an active participant or passively by just watching from the side lines. Make everyone feel welcome.
- Be open to questions, "read" your audience (what is their body language saying), keep the event on schedule and moving, and thank people for coming.
- Take pictures of your Lobby Day setup and of people during the event. Make sure you get permission slips from people to share their picture with others.

Step 5: Evaluate and Follow Up

- Use your unit's suggestion box to ask people how they liked the event. You can have brief surveys available for them to complete. Also, survey staff for their feedback and suggestions for future events.
- If you received requests for additional information, make sure you follow up and provide it as soon as possible. If you received a number of requests for a particular resource, you may want to share it with everyone and post it on the bulletin board. Or ask the Network Patient Representative to distribute it.

- Share your event summary and pictures with The Renal Network! Your story, pictures and best practices may be highlighted on The Renal Network's website, Facebook page, or in our newsletter, "Renal Outreach."



What is Communication?

Communication is the meaningful exchange of information between two or more participants.

Communication involves conveying information through an exchange of ideas, feelings, perceptions or commands using speech, gestures, writings or behavior. It requires a sender, the message, method (verbal, non-verbal, or written) and a recipient.

Communication skills are important to everyone.

It is important to communicate with patients about:

- New procedures
- Changes in treatment orders
- Ways to improve the quality of the dialysis treatment
- Reasons for schedule changes
- Why alarms go off
- What medications are being given and why

Positive communication with patients leads to:

- Improved quality of life for patients
- Educated/informed patients
- Increased patient satisfaction
- Increased patient participation in healthcare
- Positive patient outcomes
- Positive interactions
- Better conflict management

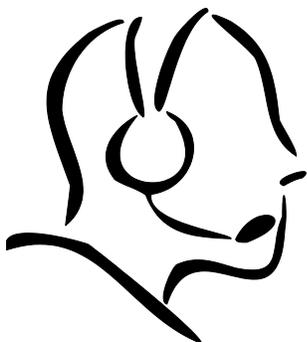
Poor communication with patients leads to:

- Decreased quality of life for patients
- Uneducated/uninformed patients
- Patient dissatisfaction
- Lack of patient participation in health care
- Negative patient outcomes
- More grievances
- More conflicts and disruptive behavior

One of the challenges in a dialysis unit or transplant center is that people communicate in a number of different ways. What you hear and how you interpret what was said may not be what the other person meant. And what you see or read may also not be the message intended. There are many times that emails or text messages are misinterpreted by the receiver of the message. There are other times that people see someone make a gesture or do something and later learn that they interpreted what they saw out of context.

Another challenge in communication is that the outward verbal or nonverbal message may not really be what is truly meant. A person may have a verbal angry outburst but what is really happening is that he is scared for his life.

Timing is also important when communicating with patients. It works best if the patient is not in extreme pain, exhausted, preoccupied with another issue, or upset about something. Some research suggests that older adults, in general, perform better in the morning thus making mornings their peak time for alertness (Cohen, R. August 18, 2014).



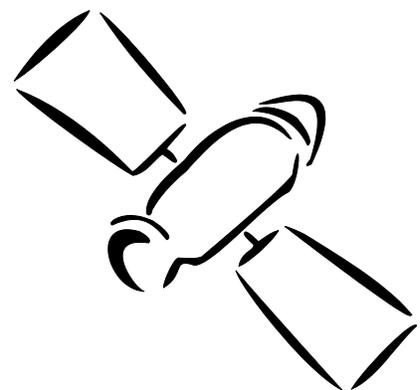
Activities

The activities in this resource book were selected to help facilitate a Lobby Day presentation on "Communications."

Good communication improves patient engagement, patient-centered care which includes the quality of care experience for the patient, improves morale at the workplace, and helps to reduce the potential for conflict.

Feel free to use as is or to modify these activities for your own Communication Lobby Days.

Remember to use different presentation methods and repeat the message more than once. This will engage individuals who may have different learning styles, reinforce retention of the information, and assist in changing behavior to achieve the desired outcome.



Activity 1: Flipping the Switch (Discussion/Writing Exercise)

The purpose of this activity is to encourage patients and/or staff to discuss the different types of communication they might use in different situations and environments.

It introduces the idea that language/communication varies by context – and that it is important to understand what might be acceptable and expected in one setting may not be appropriate in another.

Time 30 Minutes

Materials "Flipping the Switch" Activity Worksheet
Flip chart/markers (optional)

Directions Ask participants to describe or demonstrate how they communicate with their friends. Then ask how they communicate with family members. Finally, ask how they are likely to communicate with an employer at a job interview.

Discuss the differences and similarities in the participants' responses. Ask the group:

- Why is each situation different?
- What are the expectations of each person?
- What would happen if you greeted your friends in the way you greeted an interviewer?
- What would happen if you greeted an interviewer the same way you greet your friends?

Knowing how to communicate with people in the right context for a given situation is an important skill, as there are often unspoken rules and standards that are just expected. For example, it's common practice in the professional world to shake hands with people when meeting, rather than offering a high-five or a hug. We might use slang with our friends when talking about what happened at work or at a party, but we would usually use different words and mannerisms when telling our family the same information.

Conclusion

Discuss the following ideas with participants, encouraging an honest dialogue:

1. When the group changes, does the message change?
Why or why not?
2. What are some examples of communication (both verbal and non-verbal) that you should always try to practice when communicating with an employer?
How would patients communicate with staff at the unit?
How would staff communicate with patients at the unit?
How would your friends react to you if you communicated with them in the same way you would with staff at the dialysis unit?

Journaling Activity

We all communicate differently with different people in our lives. Does the way you communicate (or say things) affect how others perceive you? Explain.

Extension Activity

We build great relationships by learning to become great communicators. This is not always an easy task as we sometimes may experience barriers to communication – especially in a dialysis unit or transplant center. Take some time to explore with the group the following eight barriers. Think about what they are and ways in which these barriers can be lessened or eliminated for successful communication. You may wish to emphasize the importance of non-verbal communication skills.

- Physical
- Perceptual
- Emotional
- Cultural
- Language
- Gender
- Interpersonal
- Generational

Activity 1: Activity Worksheet

Consider the following situations. Create a list, discuss, draw a picture, or encourage participants to act out the different ways one might communicate with each of following groups:

- FRIENDS
- FAMILY
- STAFF (physicians, nurses, social workers, etc.)

Be sure to explore BOTH verbal language (what we say and how we say it, i.e., tone of voice) and non-verbal language (facial expressions, behavior, body language, etc.)

SITUATION 1: SAYING HELLOFriends:

Family:

Staff:

SITUATION 2: ASKING FOR HELPFriends:

Family:

Staff:

SITUATION 3: EMAIL OR TEXTINGFriends:

Family:

Staff:

SITUATION 4: SHOWING EXCITEMENTFriends:

Family:

Staff:

SITUATION 5: EXPRESSING ANGERFriends:

Family:

Staff:

Activity 2: Oh, Puh-leeeeeze! (Role Play/Drawing Exercise/Picture Matching)

The purpose of this activity is to help individuals gain a better understanding of how non-verbal communication (both intended and unintended) can be interpreted by others...and the impact and effect of this form of communication.

Time 20 minutes

Materials Activity "Words"
Images/Emoticons Representing "Words" (Optional)
Easel with Pad and Markers (Optional)

Directions Ask participants if they have ever gotten caught rolling their eyes at a staff member, family member, or other patient. Ask for a show of hands. Whether you rolled your eyes intentionally or didn't even realize you did it, how do you think your action was interpreted? Answers will vary but might include: I'm bored, you are really annoying, yeah right, I'm so not interested in what you are saying or doing.

There are many types of communication. Believe it or not, the type that uses no words is the kind that is the most important. When it comes to communication, what people SEE is often more memorable than what they read or hear. This is often referred to as body language. Body language includes facial expressions, eye behavior, gestures, posture, and more. Body language can express your emotions, feelings, and attitudes. It can even contradict what you say verbally! People in different cultures may understand some global non-verbal expressions, while other expressions may be culture specific. If the participants are from many different cultures, ask if they can give an example of non-verbal communication cues specific to their culture.

Cut out the "Words" for this Activity (provided on page 16), fold each and place in a hat, bowl, or bag. Ask each person in the group to take one piece of paper. Using body language and facial expressions only, ask each person to demonstrate this emotion, while others try to guess it. As an alternative, you can download "emoticons" and have participants match or identify what each picture describes. You can even have the participants draw their own "emoticons" or facial expressions. Continue until all words or pictures have been used/guessed.

Conclusion

Read the following statement to the group: **ACTIONS SPEAK LOUDER THAN WORDS.**

Then ask:

- How many have heard this expression? When/where?
- What does it mean?
- How is this possible when actions do not “speak”?

Journaling Activity

Many people dream of being successful, but their actions can sometimes hold them back. What are some ways you can be sure that your actions help you to achieve your goals in life?

Extension Activity

Consider the following seven types of non-verbal signals and cues we often use to communicate our interest in and to others. Create a list of Do’s and Don’ts for avoiding common body language mistakes when at a dialysis unit.

1. **Facial expressions:** The human face is extremely expressive, able to convey countless emotions without saying a word. And unlike some forms of non-verbal communication, facial expressions are universal. The facial expressions for happiness, sadness, anger, surprise, fear, and disgust are the same across cultures.
2. **Body movements and posture:** Consider how your perceptions of people are affected by the way they sit, walk, stand up, or hold their head. The way you move and carry yourself communicates a lot of information to the world. This type of non-verbal communication includes your posture, bearing, stance, and subtle movements.
3. **Gestures:** We wave, point, plead, and often use our hands when we are arguing or speaking in an animated way. However, the meaning of gestures can be very different across cultures and regions, so it’s important to be careful to avoid misinterpretation.

4. **Eye contact:** Since the visual sense is dominant for most people, eye contact is an especially important type of non-verbal communication. The way you look at someone can communicate many things, including interest, affection, hostility, or attraction. Eye contact is also important in maintaining the flow of conversation and for assessing another person's response.
5. **Touch:** We communicate a great deal through touch. Think about the messages given by the following: a firm handshake, a timid tap on the shoulder, a warm bear hug, a reassuring pat on the back, a patronizing pat on the head, or a controlling grip on your arm.
6. **Space:** Have you ever felt uncomfortable during a conversation because the other person was standing too close and invading your space? We all have a need for physical space, although that need differs depending on the person, culture, situation, and closeness of the relationship. You can use physical space to communicate many different non-verbal messages, including signals of intimacy, aggression, dominance, or affection.
7. **Voice:** We communicate with our voices, even when we are not using words. Non-verbal speech sounds such as tone, pitch, volume, inflection, rhythm, and rate are important communication elements. When we speak, other people "read" our voices in addition to listening to our words. These non-verbal speech sounds provide subtle but powerful clues into our true feelings and what we really mean. Think about how tone of voice, for example, can indicate sarcasm, anger, affection, or confidence.

Activity 2: Words

There are many creative ways to complete this activity, such as:

- Write each of the following words on an index card (or print and cut out words). Fold each card and place into a bowl, hat, or bag. Participants can pick a word and attempt to act it out for the group.
- Write words on sticky notes or sentence strips and place around the room. Act out the emotion and see if participants can guess and move to the right one.
- Say the word out loud and have participants draw what this emotion looks like to them. Share with the group.
- Download "emoticons" (or find pictures) that represent each emotion. Participants can match picture to word.

AFRAID	ANGRY	ANXIOUS
BORED	CONFUSED	CONTENT
CURIOUS	EXCITED	FRUSTRATED
HAPPY	INTERESTED	JEALOUS
LONELY	OFFENDED	OVERWHELMED
PROUD	SAD	SCARED
SHOCKED	SKY	STRESSED
SURPRISED	THANKFUL	WORRIED

Activity 3: Barriers to Good Communication (Display/Discussion)

Share these barriers to good communications.

Discussion topics:

- 1) What can we do to change these barriers?
- 2) Do any of these happen in our facility?
- 3) Share examples of barriers AND good communication within our facility, between patients and staff, between staff members, and between patients and family members.

Right/Wrong – Putting someone “in the wrong” creates a defensive atmosphere. Believing you are “in the right” creates an appearance of self-righteousness. Such polarization precludes open communication.

Forbidding Expressions – Sometimes we don’t want to hear the truth. Using a look, adopting an expression or verbalizing any form of “DON’T SAY IT” tells others it is not “OK” to feel and express themselves. Individuals may internalize these “forbidding expressions” to the point of losing touch with their feelings or their ability to express them directly.

Non-Accountability – When we are accountable we accept responsibility for what we say and do. We are neither victim nor martyr. Accountability adds power to our relationships and communication. When each person in a communication process is accountable, there is no room for blame.

Judgments – Our statements of judgment are most often reflections of our judgment about ourselves; judgments do not bring anything positive to a communication process. Remember judgments do not equal accountability.

Comparisons – Making comparisons takes us out of the present moment by creating a link to a situation, person or standard that is outside the immediate circumstance.

Vagueness – Speaking the facts opens up for a solution. Ambiguity, abstractions, and evasiveness are all expressions of powerlessness that attempt to circumvent accountability.

Disempowerment – When we feel defenseless, we give up any sense of possibility or potential. Empowerment is a critical component of completion and capacity. It also provides the underpinnings of integrity. When we empower those around us, we also empower ourselves.

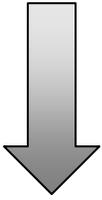
Hidden Agenda – In communication, holding a personal goal or aiming for a particular or desired outcome can destroy the effectiveness of any interaction whether between a couple or in a group. Open communication calls for each participant to listen to each other's viewpoint without preconceived notions or predisposed responses.

Barriers to Good Communication

- | | |
|---|---|
| <ul style="list-style-type: none"> • Inattentive • Tired, Hungry • Strong Feelings | <ul style="list-style-type: none"> • Personality Clashes • Too Busy • Stressed |
|---|---|

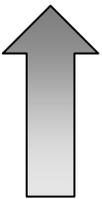
Tips for Effective Communication

- | | |
|---|--|
| <ul style="list-style-type: none"> • Look at the person • Listen attentively • Don't judge | <ul style="list-style-type: none"> • Accept feelings • Don't change topic • Don't answer a question with a question |
|---|--|

Words and Phrases

DECREASE
the use of ...

- Should ...
- But ...
- Why ...
- You ...
- I know how you feel.
- What were you thinking?



INCREASE
the use of ...

- Sounds like ...
- What I hear you saying is ...
- I see what you mean.
- What would work better for you?
- Thank you for sharing your feelings.
- Help me understand.

Activity 4: Patient Whisperer Program (Presentation/Handouts)

Presentation

Created by *Kathi Niccum, Ed.D.*

This presentation focuses on effective communication techniques, sensitivity and professionalism. The session is designed to assist staff in developing skills to better interact and build rapport with patients.

The presentation and resources from this program are available online at www.therenalnetwork.org/patient-services/communication/

You may view the [recording online](#) from our website (playback may require installation of the WebEx player) or you may view it from [YouTube](#).

After staff has participated in the Patient Whisperer program, they may want to develop activities for the Communications Lobby Day based upon the presentation. Here are some examples:

Respect

Discuss how people show respect to each other and have the audience participate in acting out examples. Show both respect and disrespect. This activity helps both patients and staff identify that respect goes both ways – to patients and to staff.

Examples of Disrespect:

- No eye contact when talking to someone
- Calling someone derogatory names
- Answering a question with a question
- Interrupting someone when the other person is talking
- Walking away from someone who is talking
- Yelling or cursing at someone

Do the opposite behaviors to demonstrate respect.

Nonjudgmental Attitude

Use pictures of things in categories (such as different types of cars, ice cream, or vacations) and have the audience choose their favorite from the category.

Discuss their choices and that there is no one right answer. You can use this as a nonthreatening way to talk about different points of view.

Then you can talk about how viewpoints of what is the right answer or the right choice can lead to being judgmental.

You can also discuss topics of potential conflict and identify how the conflict might be resolved and which suggestions reflect nonjudgmental approaches.

Create a Culture of Calm

Use music to show how different types can affect feelings of calmness.

Listening to rap music versus classical music may have a different effect on feeling calm. The way one reacts to music may also be influenced by one's age and preferences.

Ask the audience how they de-stress when they get upset or anxious. Ask what words and what actions they use.

You may want to bring in a relaxation tape or video to share with the group. You also may want to give them some tips on how to stay calm when everyone around them is getting upset.

Calmness in the unit is often perceived by patients through their views of the staff. How do staff members help to create or decrease the culture of calmness?

**Activity 5: Communications Module - Five Diamond Patient Safety Program
(Online Materials/Presentation/Written Exercise)**

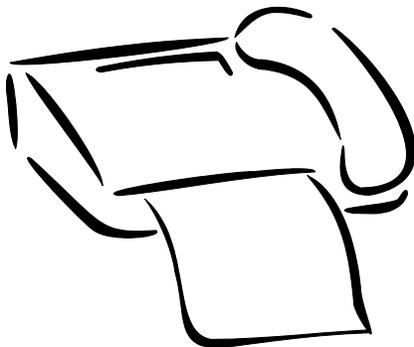
One of the modules of the Five Diamond Patient Safety Program is on "Communications."

This module includes handouts and activities for patients which you are free to use.

To sign up for the Five Diamond Patient Safety Program and to review the contents of the Communications module, visit:

<http://www.5diamondpatientsafety.org/Home.aspx>

You may want to start with the PowerPoint presentation and handouts for staff and then proceed to a Lobby Day for patients based upon the module.



Resources

Cohen, R. (2014) Older People Perform Better in the Morning, Study Finds.
http://www.medscape.com/viewarticle/830026_print

"The ESRD Network as Resource for Preventing and Resolving Patient Grievances"
Handout A-p.1-2

United States Department of Labor. Office of Disability Employment Policy. Soft Skills That Pay The Bills - Mastering Soft Skills for Workplace Success

