**Communication skills for effective care – “CARES” protocols**

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| C | Make a connection | * Use a persons name * Tell the person your name to make a connection * Think about your body language – 55% of communication is body language. Have an open stance and avoid standing immediately in front of the person * Move slowly to avoid startling a person with dementia * Move or stand with the person if safe to do so, or encourage them to sit with you, perhaps somewhere quiet to talk |
| A | Active listening and assessing the persons need | * Active listening i.e. eye contact, nodding, smiling or showing concern. * Ask questions to make sure that you understand why the person is unhappy or upset. * Summarise and clarify what the person is thinking or asking for. This might let the person know you are trying to be helpful. * Think about how the person might misinterpret their needs i.e. “I need to go” could mean going to the toilet or going home”. |
| R | Reduce agitation and develop the relationship | * Try to hold on to the connection you have made by staying present, talking to the person or listening to their needs. |
| E | Empathy | * Let the person know that their difficulties are understood. * Reflect back how it sounds they are feeling, “I can see you’re feeling upset”. * Put into words how difficult it might feel to be in their shoes i.e. “that sounds hard, I think I would be upset too”. |
| S | Solve the problem by meeting the persons needs | * Think about whether you can offer a solution or a distraction. * Offer substitutions if appropriate, “I see, we can’t go to the shops but would you feel better if we went for a walk?” or “Do you want to speak to (family) on the phone?” * Sometimes we cannot find a solution, but it is important that the person knows that you care and will take the time to support them i.e. “I see, we’ll try to sort that out, shall we have a cup of tea first?” |