

Rapport Building

*Building Relationships with People through Mutual
Understanding and Trust*

Module 2:

October 2009
ITCA WIC Knowledge Modules

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Instructions

To complete each competency unit complete the following steps:

1. Read the information.
2. Complete the Self-Evaluation at the end of each section.
3. If you have trouble answering the questions, read the section again or ask your director for more information.
4. Make arrangements with the director at the indicated points to demonstrate your ability to use what you have learned in the clinic.
5. After you complete all of the Self-Evaluations, make arrangements with your director to complete the Unit Assessment.
6. Submit the original Unit Assessment and Skill Checks to ITCA. Copies should be kept at the local agency.

2-1 Introduction to Customer Service

Objectives

After completing this section, you will be able to:

- Identify WIC customers.
- Explain why customer service is important in the WIC clinic.
- Apply the 9 golden rules of customer service during nutrition assessments.

Overview

This unit discusses the importance of good customer service in the WIC setting. It provides tools for you to use to help improve your customer service skills. You will learn who your WIC customers are as well as how to give them good customer service.

What is Customer Service?

Customer service is how we meet the needs of the people who use our services.

Who Are My Customers?

A customer is any person who uses our services. Let's take a closer look at our WIC customers!

- **WIC Clients**

Our WIC clients include pregnant, postpartum and breastfeeding women, infants and children under 5 years of age. It is important to always use good customer service skills with each client to maintain trust and satisfaction.

- **State and Local Agency Staff**

Using good customer service skills with your co-workers is essential to maintaining a positive work environment in your WIC clinic. Remember that poor working relationships create negative work environments. The nature of your work environment directly affects each client who walks into your clinic.

- **Client Families**

Family members of WIC clients deserve the same good customer service skills as the clients.

- **Trained Nutrition Educators and other professionals**

ITCA WIC clinics are located in health departments, clinics, hospitals, community centers and schools. The people who work in these offices are also customers of WIC. These professionals work with the WIC-eligible population and may refer potential clients to WIC.

- **Grocery Store Employees**

Provide good customer service to companies that accept WIC checks. Suppose a client has a problem cashing her WIC check because she has chosen a non-WIC food item. She may become angry and take out her frustration on the grocery store employees.

Reassuring these employees that every effort is being made to educate these clients on selecting WIC-approved foods will help maintain a solid working relationship between the vendor and the WIC clinic.

Why Is Customer Service Important?

- **Client Satisfaction**

WIC depends on its employees to satisfy its customers. When staff gives poor customer service the client suffers!

If a WIC client does not feel satisfied with her experience at WIC she may not come back. She may then miss out on getting healthy, nutritious foods, nutrition education, and important referrals.

When a client receives good customer service, they are likely to listen and take your advice and counseling more seriously. This can increase the chance of client behavior change and help the overall health and well being of your clients.

- **WIC Funding**

Although our customers need our services, we also need them. Your WIC agency gets funding for the clients they serve. If clients do not come back to your agency because of poor customer service, there could be less money for your agency.

- **Cost Effectiveness**

Good customer service also helps WIC be cost- effective. It helps prevent missed appointments and wasted time spent enrolling or counseling clients who do not come back.

Everyone that you come in contact with deserves quality customer service!

9 Golden Rules of Customer Service

RULE	BEHAVIOR
1. Treat others as you would like to be treated.	Treat all customers with friendliness and respect – no matter how they treat you.
2. Make a good first impression.	Clients tend to have a lot of questions at their first appointment for WIC, even though you may be on a tight schedule and very busy, they still deserve to be treated with courtesy and respect.
3. It's not what you say, but how you say it.	Smile! When you smile, people tend to relax and smile back. It can also help diffuse anger and frustration.
4. Practice good telephone etiquette.	Use a calm and welcoming tone of voice, always identify yourself and the WIC office, ask the callers name and use it during the conversation and use prompts such as “OK” and “yes” so that the caller knows you are listening.
5. Respect your clients' privacy.	Interview clients in a private setting whenever available. Never make assumptions about living arrangements, income or other personal matters.
6. Enjoy people and their diversity.	While it is human nature to have biases or stereotypes, the WIC clinic is no place to let them show. Federal law protects clients from discrimination based on race or color, national origin, age, sex and disability.
7. Think positively.	Change what you can. Do not be overwhelmed by looking at a situation as one big problem. Break it down into smaller pieces and work on the things that you can control, such as your mood, behavior and reactions.
8. Use positive reinforcement.	When clients make a behavior change such as increasing their fruit and vegetable consumption, praise them. Positive reinforcement increases the likelihood that people will repeat the rewarded behavior.
9. Remember to say “Thank You!”	<p>“Gracias”(Spanish); “Mahalo”(Hawaiian); “Ahehee”(Navajo); “Ashoge”(Apache); “Askwali”(Hopi); “Xie_Xie”(Chinese) “Arigato”(Japanese) “Merci”(French); “Muito Obrigado”(Portuguese) “Fa’afetai”(Samoan)</p>

Self-Evaluation

1. Think back to a time when you were a customer and got:
 - a. “the best” service and
 - b. “the worst” service.

Examples may be a time when you ate in a restaurant, shopped at a store, went to the dentist or called about a bill.

Write down a brief summary of your experiences and what made each experience either wonderful or awful. What could have made your worst experience better?

2-2 COUNSELING WITH *LOVE*

Objectives

After completing this section, you will be able to:

- Apply the LOVE method of counseling during WIC nutrition assessments.
- Identify characteristics of effective nutrition counselors.

Overview

This section explains the LOVE counseling technique. LOVE stands for Listen & Observe, Open-Ended Questions, Validate & Affirm and Empower & Educate. You will learn how to apply the LOVE technique while counseling to promote behavior change with your clients. It also outlines the characteristics of effective nutrition counselors.

Listen & Observe

Listen to what the client **says** as well as the *feelings* behind her words. You may need to ask questions to clarify what she says. What are the hidden factors, feelings.... the story behind the story, the real issues? What does her body language tell you?

Reflective listening is a tool that you can use to help establish rapport with your clients. Reflective listening is simply paraphrasing what your client has told you.

Reflective listening shows that you are listening to what your client is telling you, helps clarify or correct information, and encourages a response or expanded answer.

Examples of safe reflections:

- I understand your concern...
- Could you tell me more about that?
- Are you saying....?
- So you think...?
- It sounds like you ...
- You are concerned...
- It can be...

Open-Ended Questions

Using open-ended questions can help establish rapport with your clients.

What makes an open ended question?

- ✓ Asks one question
- ✓ Can't be answered with a yes or no
- ✓ Is broad based
- ✓ Incorporates client's own words/language
- ✓ Does not introduce bias or assumptions

CLOSED	OPEN
<ul style="list-style-type: none">• Do You...?• Will You...?• Can You...?• Are You...?• Have you...?	<ul style="list-style-type: none">• To what extent...?• How often do you feel...?• Why...?• Tell me about...?• Help me understand• What, if any...?• What else...• What have you heard about...?• How do you feel about...?• Can you tell me why you feel that way?

	<ul style="list-style-type: none"> • Tell me your concerns about...? • What are your plans...?
--	--

Let
s
take

a closer look at closed vs. open-ended questions:

Validate & Affirm

Validating acknowledges that you hear and support your client's concerns and that what she is feeling is acceptable.

Let's look at some sample validations:

- ★ I hear you!
- ★ That can feel scary...
- ★ Many moms feel the same way when...
- ★ Some of our other clients have said the same thing.
- ★ I can see how that would concern you.
- ★ Your feelings are completely normal.
- ★ I know how that feels...
- ★ I know it's hard to...
- ★ That's a tough situation...
- ★ I understand your concern.
- ★ I felt that way, too.
- ★ Sounds like your mother wants to be a good grandmother.

Affirming helps support changes.

Let's look at some sample affirmations:

- ★ I know it's sometimes hard for you to get here, so I really appreciate you being on time today.
- ★ Congratulations on switching your family to skim milk!
- ★ I can see that you are working hard to help your daughter give up her bottle.
- ★ That's a good point.
- ★ I think that could work.
- ★ Your Mom has some great ideas about feeding babies and I know you want to respect that....

- ★ You must be so happy that your daughter's BMI has gone down!
- ★ You've really got it together when it comes to cooking healthy.
- ★ It sounds like you want to be a good mother.
- ★ It must be hard to think about leaving your baby so soon.
- ★ It's great that you are breastfeeding!
- ★ What a great mom you are!
- ★ You should be so proud of yourself for sticking with it. A lot of moms would have stopped breastfeeding.
- ★ You are working hard to be a good role model for your children.

Validating and affirming also establishes rapport, builds trust and increases openness between the counselor and the client.

Empower & Educate

Empowering and educating your clients is a very important part of your job as a nutrition counselor. Empowerment and education can help lead to successful behavior change with your clients.

Here are a few suggestions to promote client empowerment and education:

- ✓ Instead of telling clients what they're doing wrong...find something they are doing right!
- ✓ Guide the conversation to address the client's concerns first.
- ✓ Provide information so that she can set a goal or make an informed decision.
- ✓ Help her find her own solutions by giving options.
- ✓ Build client confidence so she feels she can do it!

Characteristics of Effective Nutrition Counselors

Let's take a look at what our clients expect of us:

- Effective nutrition counselors are self-aware.
- They have a solid and up-to-date foundation of nutrition knowledge.
- They have ethical integrity and treat all clients with respect.
- They demonstrate uniformity between who they are and what they say; as well as between verbal and nonverbal counseling responses.
- Effective nutrition counselors can communicate clearly.
- They have a sense of gender and cultural awareness.
- They have a sense of humor.
- They are honest and genuine.

- Effective nutrition counselors are flexible.
- They are optimistic and hopeful.
- They respect, value and care about others.
- Effective nutrition counselors are empathetic; they can accurately understand what people feel from their frame of reference.

Self-Evaluation

1. Make the following close-ended questions open.
 - a. Do you put your baby to bed with a bottle?
 - b. Does your child drink juice?
 - c. Do you offer snacks to your child?
 - d. Have you introduced foods to your baby?
 - e. Are you planning to give your baby formula?

2. Observe a certification session.
 - a. Write down 3 ways the counselor used the LOVE method during the session.
 - b. Write down 1 suggestion for improvement.

2-3 OVERCOMING BARRIERS

Objectives

After completing this section, you will be able to:

- Start a conversation with clients more easily.
- Avoid using technical terms with clients.
- Learn how to use non-verbal communication techniques that result in positive and effective communication.
- Identify barriers to effective communication in WIC and strategies that can help you overcome them.
- Resolve conflict in a healthy manner.

Overview

This section discusses common barriers to effective communication and how to overcome them. You will learn some common conversation starters, how to avoid technical WIC terminology and how to interpret your clients' non-verbal behaviors. You will also learn how to deal more effectively with low literacy clients and clients who speak little or no English.

Conversation Starters

Sometimes, the hardest part of a conversation is getting it started! Here are some helpful examples of how to get a conversation flowing:

- What is the greatest concern you have about your child's eating today?
- Regarding your child's nutrition and eating, what are you most interested in learning about today?
- How do you feel about your child's overall eating? What are your biggest concerns and challenges in feeding your child?
- What do you do when you have little time to prepare meals?
- Tell me what activities your child likes. How much time does he spend doing the activities each day? What kind of activity do you do as a family?
- What concerns do you have about the amount of weight you have gained during this pregnancy?
- What concerns do you have about your child's weight?

Avoiding Technical Terms

Sometimes we forget that *not* everyone is familiar with nutrition and/or WIC lingo! Try to avoid using technical words so that your clients better understand what you are telling them.

Let's take a look at some common WIC technical words and how to replace them with more understandable terms.

Technical Word	Replace with:
Intake	What you ate
Sodium	Salt
Blood glucose	Blood sugar
Carbohydrates	Grains
Nausea	Upset stomach
Hemoglobin	Blood iron
Iron-deficiency anemia	Low blood iron
Postpartum	After pregnancy
Consider	Think about
Assist	Help
Poultry	Chicken
Excessive	Too much
Vomiting	Throwing up
Hypertension	High blood pressure
Colostrum	Your breast milk for the first few days after you have your baby

Understanding Non-verbal Behaviors

Body language can tell you a lot about what someone is feeling. As counselors, it is important to be aware of our body language so that we can portray a safe and comfortable WIC environment that promotes learning and behavior change.

Effective and Ineffective Counselor Nonverbal Behavior

Mode of communication	<i>Ineffective</i> nonverbal counselor behavior	<i>Effective</i> nonverbal counselor behavior
Space	Distant or very close	Approximately arm's length
Posture	Slouching; rigid; seated leaning back or away	Relaxed but attentive; seated leaning slightly forward
Eye contact	None; defiant; glaring; jittery	Meets person's gaze based on their comfort level; follows cues
Time	Does not acknowledge person immediately; rushed	Immediately acknowledges person; responds at first opportunity; shares time with client
Feet and legs (in sitting)	Used to keep distance between self and person; crossed	Inconspicuous; uncrossed
Arms	Crossed tightly over chest	Relaxed and open position of arms; at sides or resting comfortably in lap/chair
Furniture	Used as a barrier	Used to draw people together
Facial expression	Does not match feelings; scowl; blank look	Matches own or other's feelings; smiles
Gestures	Compete for attention with your words	Highlight your words; understated; smooth
Mannerisms	Obvious; distracting	None or unobtrusive
Voice: volume	Very loud or very soft	Clearly audible
Voice: rate	Impatient or staccato; very slow or hesitant	Average or a bit slower
Energy level	Apathetic; sleepy; jumpy; pushing	Alert; stay alert throughout entire meeting

Effective Communication with Low Literacy Clients, Clients Who Speak Little or No English and Using Interpreters

Guidelines for Effective Communication with Low Literacy Individuals

- **Plan what you are going to say.**
Present information in a logical order and teach one step at a time, clearly identifying each step.
- **Consistently use the same words.**
All counselors who work with a given client should use the same terminology.
- **Define new nutrition-related terms.**
When you need to introduce an unfamiliar term, such as “Colostrum,” teach the correct pronunciation; explain the definition and what it means. For the example of colostrum, explain in terms of breastfeeding their baby for the first few days of life.
- **Use repetition to reinforce information.**
Make sure clients have a solid base of knowledge before you introduce new information. Review learning and information provided at previous counseling sessions.
- **Use a variety of teaching methods.**
Reinforce your verbal instruction with other instructional tools. Use food models and written information to be referred to at a later time and shared with others. Use simple drawings to illustrate key concepts.
- **Verify understanding.**
Make sure that you and your client understand each other. Both of you should restate information in your own words, and rephrase what is not clear.

Guidelines for Effective Communication with Individuals Who Speak Little or No English

- **Start with a welcoming tone.**
Greet clients in their native language and ask them to pronounce their names correctly. Set a positive tone and convey your willingness to communicate clearly despite linguistic differences.
- **Find out how comfortable the client is with speaking English.**
When you need to talk about more complex nutrition-related information, ask the client how they prefer to communicate. Consider use of interpreter or translated materials to improve understanding.
- **Speak clearly and concentrate on the most important message.**
Determine exactly what you want to say and then carefully choose the words to say it. Speak at a slower pace, pausing for a couple of seconds after you ask a question or give new information. Use phrases or short sentences and keep technical terms to a minimum. Include the full form of words rather than contractions (e.g., “I will” instead of “I’ll”). Do not speak louder because a client has limited English – this may come across as anger, and does nothing to improve communication.
- **Introduce manageable amounts of new information.**
Focus on the essential skills, behaviors and knowledge a client needs to know without a lot of background information. Present limited amounts of information at each session, allowing

the person to build on what she already knows when new information is provided at future sessions.

- **Supplement the spoken word.**
Use simple line drawings and diagrams to help communicate your message. Demonstrate what you mean through gestures or pantomime and encourage the client to do likewise. Be sensitive to the fact that gestures can sometimes be misunderstood. Observe the client's responses; you can often learn a lot from nonverbal cues.
- **Verify the client's understanding.**
Don't assume that a nod and a smile mean the message was understood. To verify, ask the client an open-ended question rather than a yes/no question. Clarify any misunderstanding by finding new and simple ways to say the same thing.

Guidelines to Follow when Working with an Interpreter

- Look and speak to the client rather than the interpreter.
- Speak clearly and use short simple sentences; avoid use of technical terminology.
- Maintain your role in the exchange, and take responsibility that your message is communicated effectively.
- Listen carefully to the client and pay attention and respond to nonverbal cues and body language.
- Use open-ended questions and reflective listening techniques to receive information and avoid misinterpretation.
- Avoid use of children, family members or friends as interpreters due to high potential of unintentional editing, adding or changing of information.
- Be aware that sessions with an interpreter take longer, but the extra time is worthwhile to ensure effective and accurate communication.

Resolving Conflict with Upset People

Most of the people at WIC will be quite happy with how things work. Sometimes, however, a client or co-worker may get upset. Resolving conflict means finding a way to take care of the disagreement or problem that all the people in the conflict can agree to.

The following is a list of steps that may help you when trying to resolve conflict. Some of the steps may need to be slightly changed depending on the client's culture.

1. Stay calm.

Think before you talk.

2. Deal with the person's feelings first.

Listen to the person's whole story.

Do not interrupt.

Put yourself in the person's place.

Use words such as "I see" or "I can understand how you must feel."

Do not become defensive.

3. Ask Questions.

Ask if it's okay to get more information.

Use words such as "Do you mind if I ask you a few questions to help me understand what happened?"

Ask open-ended questions (questions that cannot be answered with "yes", "no" or short answers) to get more information.

4. Give feedback.

Restate what you think the client is thinking in your own words. For example, "It sounds like you were very disappointed with the way your appointment went."

5. Summarize the problem.

Describe what you think the problem is.

Describe the person's concern.

Check to see if you have described the person's situation accurately.

6. Deal with the problem.

Find out what the person wants. Use words such as, "What would you like us to do?"

Suggest alternatives. If you cannot do what the person wants, offer actions you can take.

Try to reach a realistic compromise. If you cannot resolve the problem, find someone who can help you.

If the problem was caused by the WIC agency, admit the error and apologize.

Agree on a solution.

Start on the solution and explain what will happen.

Self-Evaluation

1. Name 5 technical terms you use in the clinic that your clients may not understand. Give an example of an alternate term for each.
2. Observe a certification. Name three non-verbal behaviors that the client demonstrated and your interpretation of her feelings surrounding them
3. What do you think the following non-verbal behaviors mean?
 - a. Lack of sustained eye contact:
 - b. Lowering of eyes/looking away:
 - c. Furrow on brow:
 - d. Tight lips:
 - e. Biting lip or quivering of lower lip:
 - f. Nodding head up and down:
 - g. Hanging head down:
 - h. Shaking head right to left:
 - i. Folding arms across chest:
 - j. Unfolded arms:
 - k. Leaning forward:
 - l. Slouching, leaning back:
 - m. Trembling hands:
 - n. Flushed face:
 - o. Holding hands tightly:
 - p. Tapping foot continuously:
 - q. Sitting behind a desk:
 - r. Sitting nearby without any intervening objects:

4. Observe a session with a non-English speaking client. Do you think the client comprehended the information given to her? Why or why not. What could have been done to improve the client's comprehension of the information given?

Answer Key to Self-Evaluations

Self-Evaluation 2-2:

1. Examples of open-ended questions, yours may differ:
 - a. How do you put your baby to bed?
 - b. Tell me what your baby drinks throughout the day.
 - c. Describe to me what your child eats on a typical day.
 - d. What does your baby eat and drink?
 - e. Tell me about your plans to feed your baby?
 - f. Tell me what you've heard about breastfeeding.
 - g. Tell me how things are going with breastfeeding.
 - h. Tell me your concerns about breastfeeding.

Self-Evaluation 2-3:

1. In addition to the terms listed in the unit, other examples may include:
 - a. Alternative: choice
 - b. Approximate: about
 - c. Available: ready
 - d. Cessation: stop
 - e. Decrease: make less, reduce, lower
 - f. Demonstrate: show
 - g. Consume: eat
 - h. Facilitate: help, ease
 - i. Frequency: often
 - j. Modification: change
 - k. Option: choice
 - l. Recognize: know, accept
 - m. Understand: know
2. Examples may include:
 - a. Embarrassed, confused
 - b. Uncomfortable
 - c. Confused
 - d. Mad
 - e. Wanting to say something but not
 - f. Understands
 - g. Depressed
 - h. Disagreement
 - i. Distant, not listening
 - j. Ready to listen and comprehend
 - k. Concentration
 - l. Not paying attention
 - m. Nervous or scared
 - n. Embarrassed
 - o. Apprehensive
 - p. Impatient
 - q. Distant
 - r. Open and honest

Name: _____
 Date: _____
 Score: ____/100 points
 Percent correct: _____

Unit 2: Building Rapport Unit Assessment

1. Name 5 WIC customers. (2 points each)

2. Name 3 reasons why customer service is important in WIC. (2 points each)

3. Match the Golden rule with the behavior: (2 points each)

RULE	BEHAVIOR
1. Treat others as you would like to be treated.	___ Interview participants in a private setting whenever available. Never make assumptions about living arrangements, income or other personal matters.
2. Make a good first impression.	___ Clients tend to have a lot of questions at their first appointment for WIC, even though you may be on a tight schedule and very busy, they still deserve to be treated with courtesy and respect.
3. It's not what you say, but how you say it.	___ "Gracias"(Spanish); "Mahalo"(Hawaiian); "Ahehee"(Navajo); "Ashoge"(Apache); "Askwali"(Hopi); "Xie_Xie"(Chinese) "Arigato"(Japanese) "Merci"(French); "Muito Obrigado"(Portuguese) "Fa'afetai"(Samoan)
4. Practice good telephone etiquette.	___ While it is human nature to have biases or stereotypes, the WIC clinic is no place to let them show. Federal law protects participants from discrimination based on race or color, national origin, age, sex and disability.
5. Respect your participants' privacy.	___ Treat all customers with friendliness and respect – no matter how they treat you.

6. Enjoy people and their diversity.	__ Use a calm and welcoming tone of voice, always identify yourself and the WIC office, ask the callers name and use it during the conversation, and use prompts such as “OK” and “yes” so that the caller knows you are listening.
7. Think positively.	__ Change what you can. Do not be overwhelmed by looking at a situation as one big problem. Break it down into smaller pieces and work on the things that you can control, such as your mood, behavior and reactions.
8. Use positive reinforcement.	__ Smile! When you smile, people tend to relax and smile back. It can also help diffuse anger and frustration.
9. Remember to say “Thank You!”	__ When participants make a behavior change such as increasing their fruit and vegetable consumption, praise them. Positive reinforcement increases the likelihood that people will repeat the rewarded behavior.

4. What does each letter stand for in the LOVE method of counseling? (2 points each)

L:

O:

V:

E:

5. Name 4 characteristics of an effective nutrition counselor. (2 points each)

6. Make the following statement easier for a client to understand. (Hint: replace the technical terms): (4 points)

You are eligible for the program because you have hypertension and a history of Preterm delivery.

7. Make the following question open-ended: (4 points)
Does your child eat 5 servings of fruit and vegetables every day?

8. Put the steps to resolving a conflict in order: (2 points each)

___ Ask questions

___ Summarize the problem

___ Stay calm

___ Give feedback

___ Deal with the problem

___ Deal with the client's feelings first

8. Answer True or False. (3 points each)

___ The following is an open-ended question: Can you increase your fruit and vegetable consumption?

___ The following is an open-ended question: How do you feel about quitting smoking?

___ Your state agency staff are not your customers.

___ Reflective listening is a tool that you can use to help establish rapport with your clients.

___ An effective nutrition counselor is honest and genuine and has a good sense of humor.

___ Using technical terms with your clients will help them learn new words.

___ If your client crosses her arms tightly over her chest, it probably means that she is listening and agreeing with what you are saying.

___ Using a variety of teaching methods with low literacy clients may help them learn and comprehend the information you are giving them.

___ It is best to speak very loud to clients who speak little or no English.

___ When using an interpreter, it is best to look and speak to the client rather than the interpreter.