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The BECCA project

This manual provides the full session notes for use in befriender training in the Befriending and Costs of Caring (BECCA) project.

The BECCA project was a research trial funded by an NHS Research and Development programme called ‘Health Technologies Assessment’. It was supported by Norfolk and Suffolk Social Services, who provided funds towards the out-of-pocket expenses of volunteers.

The purpose of the research was to identify whether or not befriending made a difference to carers lives.

BECCA befriending schemes were set up in Norfolk, Suffolk and The London Borough of Havering with help and support from lots of local voluntary organizations.

Research interviews were being carried out with over 200 carers of people with dementia who are living at home. Carers had follow-up interviews over 2 years.

Half of the carers who take part in the research interviews were offered contact with the BECCA befriending scheme. It was up to them whether or not they decide to take up that offer. The researchers did not control who was, and who was not, offered the scheme. The selection was random.

Befrienders aimed to provide companionship and conversation for carers. We hoped that befrienders would play a part in reducing or preventing social isolation and loneliness, thereby improving carers’ emotional well-being. Befrienders could ‘signpost’ carers to additional resources but they did no replace any other health or social services, nor did they replace the carer or carry out any of the carer’s tasks.
The role of Befriender Facilitators

Befriender Facilitators (BFs) had the responsibility of overseeing the recruitment, training and support of volunteers, and the safe placement of befrienders with carers.

The role included:

- supporting befriending volunteers from initial expression of interest, through training and the four stages of befriending, &/or facilitating the finding of alternative opportunities for volunteers who are unsuitable for befriending on the BECCA scheme
- ensuring the process for volunteer screening, registration, matching and placement, and keeping the necessary paperwork including time sheets
- administering befriender expenses
- carrying out health and safety risk assessments of carers’ homes, and registration of carers
- being a point of contact for befrienders for the reporting of accidents, incidents, suspicions, concerns, untoward events, gifts, compliments and complaints, and for any necessary action relating to the receipt of such reports
- providing support for befrienders through telephone contacts, individual sessions and befrienders support groups

Befriender Facilitators communicated with other members of the research team as necessary.

Befriender Facilitator were managed by someone within their organization, and have regular supervision with the Intervention Manager from the research team.
Volunteer registration & screening

All volunteers must be registered with the organization providing insurance cover for them.

Volunteer registration and screening involved:
- Completion of a volunteer registration form (see appendix) – The form can be completed by the Befriender Facilitator as part of an interview with the volunteer or the volunteer can complete the form themselves
- Applying for, and receiving, two satisfactory references
  o Cover letter and reference proforma provided
  o If you have any concerns about whether or not a volunteer’s references are satisfactory, you should consult your line manager or the Intervention Manager
- Clearance from the Criminal Records Bureau (CRB)
  o Forms are available via registered signatories within your organization.

Further reading: CRB disclosure procedure
Befriender training requirements

All befrienders must attend all 6 training Sessions (6x2 hours). They must attend sessions 1 to 4 before they can be matched with a carer.

The 6 BECCA training sessions are

1. Befriending: what it is, and what it isn’t
2. Listening skills
3. Carers needs, and stages of the befriending relationship
4. Working in other people’s homes
5. Services for people with dementia, and their carers
6. Later stages of the befriending relationship

Training is run on a group basis so that volunteers can get to know one another and start to form their own befriender support network.
BECCA Befriender Training

Session 1:

Befriending: what it is, and what it isn’t
1.0 Introduction to session

Information

- This is the first session of the befriender training course for the BECCA befriending scheme

- The aims of this first session are to:
  - Get to know each other (we shall spend time on introductions in a moment)
  - Consider what is, and is not, included in the role of the befriender, and to learn about confidentiality and the befriender support system

- As reminder from the open meeting, the four core training sessions are:
  1. Befriending – what it is, and what it is not
  2. Listening skills
  3. Carers support needs, and stages of the befriending relationship
  4. Working in other people’s homes

And the two further training sessions are:

5. More about dementia, and services for people with dementia and their carers
6. Maintaining and ending the befriending relationship
1.0a Introductions to each other

**Information**

- There are (n) of us in this training group

- Everyone in the group is interested in becoming a befriender for carers of people with dementia, or finding out more about the BECCA befriending scheme or interested in the training because of other volunteer work

- Some of you may already know a lot about befriending, or about caring, or about dementia. Others may know very little. We hope that in the session we are all able to learn from each other’s experiences.

- We hope that you will enjoy the course and get to know each other well.

- Let’s introduce ourselves.......

**Activity: Introductions**

- Look round the group someone you have not met before. It might be someone sitting next to you, or you might need to move from where you are sitting now. For each person in the pair, find out:
  - Their name
  - Something about why they are interested in becoming a befriender in the BECCA scheme or why they are attending the training

- We will be asking each of you to introduce your pairs partner to the whole group – so listen carefully!
1.1 Befriending – what it is & what it isn’t

Information

- Let’s remind ourselves of what we said about befriending at the open meetings:

- Befriending is “a relationship between two or more individuals which is initiated, supported and monitored by an agency that has defined one or more parties as likely to benefit. Ideally the relationship is non-judgemental, mutual, purposeful and there is a commitment over time” (Befriending Development Forum)

- In the BECCA scheme, befrienders can help by being:
  - a ‘sounding board’ for carers to talk through their difficulties – we will be concentrating on listening skills in session 2
  - source of pleasure through conversation and companionship

- Befrienders do not
  - directly take over the carer’s work and responsibilities;
  - provide advice, advocacy or counseling
  - provide nursing, homecare services or respite.

- Carers of people with dementia may be looking for services such as homecare support, respite, advice, advocacy, counselling. BECCA scheme befrienders learn about services so that they can point carers in the right direction for finding the information that they need. We call this ‘signposting’. We will cover signposting skills for befrienders in a later session.
1.1a Providing companionship

Information

- Carers may be missing out on companionship for a number of reasons. For example:
  - the person with dementia may no longer able to talk and communicate in the way that they used to
  - lack of time or energy due to caring duties
  - friends and family may stay out of the way if they are afraid of the cared for person’s illness.
  - being unable to get out due to their own disabilities, or lack of transport

- Even when carers have contact with other people, they can feel isolated if nobody tries to understand what they are going through.

- If a carer has no-one to talk to, they may find themselves feeling lonely. They might also start thinking over and over again about problems, or about fears for the future

- The opportunity to talk can be a relief. Fears for the future may not seem so bad once they have been shared, and sometimes new ideas for coping may come up in conversation.

- Let’s read about three examples. In each example we hear about someone who is looking after a relative who has dementia, and we hear about the impact that caring has had upon the carers’ lives. The people in the examples are fictional, but their stories are very real.
Example 1: Rose and Jim

Rose and Jim are an elderly couple who have lived in the same village all their lives. Their two sons moved to Norwich for work, and are now married with families of their own. In recent years, a number of Rose and Jim’s long-standing friends have died, including Rose’s best friend and Jim’s brother. Rose, who has severe arthritis in her back and hands, cares for Jim who has Alzheimer’s disease. He is still able to talk, but he tends not to say very much. He is no longer able to chat to Rose about day to day things as he gets confused about what is going on around him. He seems happy enough pottering about the house and their small garden.
Example 2: Dave and Ann

Dave cares for his wife Ann who has young onset dementia (she is 52, and Dave is 5 years older). He has left his work as a self-employed lorry driver because Ann is no longer able to look after herself, and had started to wander out of the house if left alone. It took a long time for Ann to get a diagnosis of dementia. When she first started to forget things, Dave put it down to the stress that she was under as a school teacher, but by the time she lost her job he knew that there was something really wrong. As he used to be away from home so much with driving, he didn’t have many friends at home. Neither of them have any brothers and sisters, and Dave has only had occasional contact with his children since the divorce from his first wife. He and Ann used to have lots of invitations to social events through her work, and this was something they both enjoyed. The invitations seem to have dried up since she left the school.
Jenny, who is 49, lives with her husband Bill and three sons in their late teens / early twenties. Jenny’s father, George, who has dementia, came to live with them after his wife (Jenny’s mother) died suddenly and unexpectedly from a heart attack two years ago. Jenny has always got on well with her father, and feels it is her duty to care for him. Unfortunately her husband, Bill, is not as supportive as she would like him to be. They have frequent arguments about whether or not George should continue to live with them. The more that Jenny and Bill argue, the more time the boys seem to spend out of the house.
Pair activity: reflecting on our reactions

In a different pair to the one you were in for the introductions, share your thoughts about the case examples. Make sure that each person who would like to share their reactions has had a chance to do so. Each person might have different thoughts and feelings in response to the examples, depending upon their own previous life experience and way of looking at things.

Feedback to larger group: only feedback on your own reactions, and only if you wish to

Group activity: cause and impact of isolation

Think together about the questions below. As the people in the examples do not actually exist, we do not know exactly what they are thinking and feeling, so we have to make ‘guesses’ based on the reactions of people we know, or on how we might feel in a similar situation.

Why might Rose, Dave and Jenny become physically or emotionally isolated?

How might being isolated and lonely affected Rose, Dave and Jenny?

Why might befrienders be particularly welcome to Rose, Dave and Jenny?

Feedback ideas from the small groups to the larger group
1.2 Boundaries of the befriending role

Information

- We have placed ‘boundaries’ or limits’ on the befriending role. There some very good reasons why there are boundaries – or limits – to the befriending role. The reasons include:

  - **befriender safety and well-being**
    Providing emotional support to carers can be demanding as well as rewarding, and going into other people’s homes has risks associated with it. To ensure the safety and well-being of befrienders we have tried to set up clear rules, so that we all know where we are, and what it expected of us.

  - **clear definition of the befriending role**
    For the purposes of the BECCA research being carried out by the researchers at the University of East Anglia and University College, London, we need to be clear about what befrienders are doing when they visit

  - **not undermining carers**
    Our aim is to support carers, not to undermine them. If we ‘take over’ carers’ tasks, or tell them how to do things, they may feel undermined

  - **insurance**
    As registered volunteers with NVS, befrienders on the BECCA scheme are covered by the NVS insurance. The insurance is void if befrienders take it upon themselves to do something outside the role for which they have been trained. The insurance is only for registered volunteers – not for their friends or families
1.2a What befrienders do not do

Information

- **As a befriender, you should not...**
  - undertake any work that is the responsibility of Home Care Assistants, Nursing Services or tasks that are currently or have previously been done by paid workers, or work normally carried out by the family carer. This would include (but is not limited to): bathing, essential food shopping or cooking on behalf of client, putting to bed or getting up, assisting with toileting, cleaning, dressing, including helping with surgical stockings, laundry, night sitting, collecting medication, changing catheters, administering eye/ear drops, ensuring client takes medication, lifting or moving and handling.
  - provide 'respite' (i.e. look after the cared for person for ANY length of time)
  - give advice
  - provide financial assistance, handle carer’s money, or the money of the person they care for, or sign financial or legal documents including wills
  - advocate (i.e. deal with individuals or agencies on behalf of the carer, or the person with dementia)
  - get involved in DIY (e.g. painting or decorating, house removals, or gardening)
  - provide transport for your carer &/or the person they care for, or travel in their cars. (NVS has additional rules for volunteers drivers.)

- Carers are asked in advance not to request any of the above from you.

- You will not be covered by NVS insurance if anything goes wrong as a result of you doing any of the above.
Thoughts and/or questions?

Does anyone have any questions about what and why you are asked not to do certain things?

Does anyone have any examples of why it is important not to ‘take over’ carers tasks – or any examples of times when someone has taken over something from you when you did not want them to?

Are their any other tasks that volunteers would consider inappropriate to perform?
1.3 Maintaining confidentiality

Information

- If we are to give emotional support to carers like Rose, Dave and Jenny, then they need to be able to trust us with their thoughts and emotions

- We also need to look after ourselves, or we might become overwhelmed

- An important part of the code of conduct is the ‘statement of confidentiality’. Carers need to know that we will keep things confidential - people will not trust us if they think that we will ‘gossip’ about them, or go round telling others about their personal lives for our own amusement

- At the same time, befrienders need to get help and support from others to ensure the safety and long-term well-being of all concerned. This means that there are times when befrienders should tell others about information that they receive, or about their reactions.

- Confidentiality and safety are both very important in the BECCA befriending scheme. If ever confidentiality and safety rules are in conflict, then the need for safety over-rides confidentiality. We will be looking at, for example what to do if abuse is suspected, in a later session

- Lets look at the statement of confidentiality …
BECCA Project

STATEMENT OF CONFIDENTIALITY

1. I understand that any verbal or written information I receive whilst befriending is confidential and must not be passed on. If I do not respect the confidential nature of this information I understand I may be asked to end my befriending work. However, if I suspect that someone I have contact with through my befriending is being harmed, either physically or emotionally, or is a danger to themselves or other people, I will contact my Befriender Contact, Befriending Facilitator or another professional worker, as soon as possible.

2. I will not discuss with others personal information about carers or the people they care for, nor will I identify carers or the people they care for either by first name, family name or surname, unless at the request of the carer, or with the carer’s prior consent. (Note: discussion of circumstances, and reactions to befriending work are encouraged within the befriending support network)

3. I will immediately inform my Befriender Contact or Befriender Facilitator if I have any new police convictions since registering to become a befriender.

Name ........................................................................................................................................

Signature .................................................. Date..................................................
😊😊 Pair activity: broken confidences, unsafe secrets

Think of a time when you had a confidence broken e.g. when you told someone a secret and they told someone else. How did it make you feel? Why is it important not to break confidences?

Can you think of situations where a person is being harmed, but may want to keep it secret? e.g. bullying, domestic violence. Why might they want to keep it secret?

Why do we ask you to pass on information if you suspect that someone is in danger?

😊😊😊 Feedback to group
1.4 Looking after ourselves

Information

- One of your responsibilities as a befriender will be to look after yourself. Carers will notice if you are stressed, exhausted or distressed, and this might add to their concerns.

- We encourage all befrienders to:
  - Take care of themselves and their possessions
  - Plan regular visit times, and let others know
  - Carry an ‘emergency contact’ card
  - Keep up-to-date with expenses claims
  - Make the most of the befriender support network, and other available support
  - Report incidents, accidents, suspicions, concerns or untoward events to a Befriender Facilitator / Befriender Contact

- Safety in the carers home, and reporting procedures for incidents, accidents, suspicions, concerns or untoward events will be covered in session 4.

- Lets look now at personal safety, expenses and befriender support.
1.4a Personal safety

Information

• Plan a regular visit time as this will help you and your allocated carer to plan your weeks.

• Let others know when the visiting time is. This information may be vital in the unlikely event that any mishap befalls you in your journey to or from the carer’s house, or while at the house. [By ‘others’ we mean the Befriender Facilitator / Contact as well as any ‘significant others’. This is because it is only the Befriending Facilitator / Contact who will know the name and address of the carer that you visit.]

• Carry your Emergency contact card: this has the Befriender Facilitator / Contacts number, and Social services emergency contact numbers.

• Keep your possessions with you
  – Insurance for befrienders (public liability and personal accident) does not insure your personal possessions against loss or damage. It does cover the time you are travelling to and from your allocated carer’s house, but does not cover injury relating to road traffic accidents.

• You are strongly encouraged not to take unnecessary risks, nor to take on tasks outside the befriending role

Further reading

The Suzy Lamplugh Trust produce a leaflet “Living Safely: personal safety in your daily life”
1.4b Expenses, finances & recording time

Information

- You are entitled to have your travel reimbursed through the BECCA scheme, and you can claim for private or public transport on the expenses claim form.

- You can claim travel expenses for travel to and from
  - your allocated carers house, for befriending visits
  - befriender training sessions
  - befriender support meetings

- There is a fixed mileage rate to cover petrol expenses, reviewed annually

- Travel expenses will not be paid for getting to and from BECCA social events (unless specifically agreed with the befriender facilitator beforehand on an individual basis)

- If you have any questions on your own personal finances in relation to volunteering, then please discuss this with the befriending facilitator (e.g. income tax liability on car mileage expenses, impact on benefits such as job seekers allowance, income support, incapacity benefit, severe disablement allowance).

- As part of our monitoring of the befriending service, we would like to keep track of the time that befrienders spend, both with their allocated carer(s), and time spent travelling to and from the carer(s) house (please use back of the volunteers expenses claim form to keep a record of this).
Volunteers Expenses Claims

NAME: ......................................................................................................................

ADDRESS: ..............................................................................................................

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Mileage rate ..........................................

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For car journeys, I certify that I have adequate insurance cover.

Signature ...................................................... (Volunteer) Date:

Signature ...................................................... (Co-ordinator) Date:
Monthly time record

BECCA Research Project: Month: Year:

1. Time taken to travel to training:

…………(mins per return journey) x……..(no of sessions) = …….(total)

2. Time spent in training

…………(mins per session) x……..(no of sessions) = …….(total)

3. Time taken to travel to visit carer:

……..( mins per return journey) x……..(no of visits) = …….(total)

4. Time spent with carer:

…………..(mins per visit) x……..(no of visits) = …….(total)

5. Time spent in telephone conversations, finding information and/or other activities related to befriending but excluding time accounted for in first 4 questions.

……………………….(total mins)
1.4c Support for befrienders

Information

- There are three main sources of support available to befrienders...
  - Firstly, there is a support structure provided by the befriender network. This includes your named contact person and the organisation they belong to.
  - Second, befrienders are encouraged to support each other. Just as you can support carers, your fellow befrienders can support you. We encourage befrienders to meet up as a group every so often.
  - Thirdly, be aware of, and use, the support you already have around you. It is OK to talk to family & friends about your role as a volunteer as long as you respect the confidentiality of the carer you visit (i.e. don’t mention names, details of illness etc).

- When you meet your allocated carer for the first time, you will be introduced by your Befriender Facilitator / Befriender Contact. They will also keep a note of your agreed regular visiting time, for your safety.

- From time to time you will be offered an individual befriender session. Individual sessions involve only you and your Befriender Facilitator / Contact. They give you a chance to discuss how things are going, to ask any questions that you have not wanted to ask in a group setting. You can ask for an individual session at any time.
1.5 Summary & preview

- In this session we have been looking at the role of the befriender. We have highlighted the importance of the befriending role in providing company and companionship for carers of people with dementia. We have also looked at what befrienders are asked not to do, at what we mean by confidentiality, and at the support available to befrienders.

Thoughts and/or questions?

*Does anyone have any further comments to make about this session?*

In the next session we will be focusing on *listening skills*.

If for any reason you know that you won’t be able to make the next, or any other, session, when ever possible please let us know beforehand.
BECCA Befriender Training

Session 2: Listening skills
2.0 Review and introduction

Information

- In the last session we looked the befriender’s role – what it is, and what it isn’t. We also looked at what we mean by confidentiality, and why it is important to look after ourselves.

Thoughts and/or questions?

Does anyone have any questions from the last session or have any further comments to make about the last session?

Information

- The aim of this session is to learn about what it means to be a good listener, and to practice listening skills
- Many of the skills that we will practice in this session are ones that are taught at the start of counselling courses
- We are not teaching you these skills because we want you to be a counsellor – indeed we have already said that counselling is outside of the befriender’s role
- We are talking about listening skills because they are the foundation of developing a good rapport, building trust and encouraging people to talk.
2.1 The art of being a good listener

Information

- We are all familiar with saying, “You’re not listening to what I’m saying!” How many times have we been annoyed by the feeling that the person we are talking to is not really listening?

- Listening is not just about hearing what a person has to say. It’s also about letting them know that they are understood.

- Listening is an art, a skill, and needs to be learned and practiced. In this session we can only really provide an introduction to the skills so that you know what to look out for, and what to practice when you are with carers.

- Skills we will cover are:
  - non-verbal listening (using ‘body language’ and ‘vocal gestures’)
  - asking open questions
  - noticing and reflecting feelings
  - paraphrasing and summarizing

- You are likely to already have some of these skills. Others may take practice. You can look at the handouts again when you start befriending. You may also want to talk about these skills with other befrienders in the befriender support groups.
Example: how NOT to be a befriender

To help us to understand good listening skills, let us first look at an example of how NOT to go about things. Here is a conversation between Jenny (who we met in session 1, caring for her father, George), and one of her work colleagues, June. June used to work in a residential home. Watch the role play and notice all the things that the June does that are unhelpful for Jenny.

June: (while rummaging round in handbag) Did things go well at your Dad’s appointment with the psychiatrist the other day?

Jenny: Not so good. (long pause) Dr Jones only saw him for about fifteen minutes, and then said to carry on as we are. I’m really worried that Dad is getting worse. He seems so much more irritable and kind of ‘on edge’. Sometimes he looks so angry and I think he is going to hit one of us one day if we get on the wrong side of him.

June: (pulling various things out of her bag) Yeah, they can be really violent sometimes. I remember when there was this guy who was really away with the fairies and he used to smack people over the head with his walking stick if he had half a chance. Old bugger – what are they like! (laughs)

Jenny: (Looking worried). Oh dear – that’s awful. You don’t think that would happen with Dad though do you?

June: (Finally finding the nail file she was looking for). Well, you never know. My friend April’s father-in law got so bad that they had to lock him up in the looney bin. Best place I say.

*Lets stop this here – it’s gone quite far enough, and Jenny is now getting quite anxious and upset.*
Group activity: Observing an unhelpful interaction

What were the things that you observed that were unhelpful? List as many as you can.

Jenny found her conversation with June very anxiety provoking and upsetting on this occasion, but previously Jenny has found it helpful to talk to June. Why might it be that June’s usual helpfulness is not showing through on this occasion?
2.1a Non-verbal listening

Information

- Non-verbal behaviour refers to what we **do** rather than say.

- We do not need words to show that we are listening to, and concentrating on, what another person has to say

- Non-verbal behaviour includes:
  - **eye contact** *(too much can make people feel uneasy; too little can make people think you are not paying attention)*

  - **body language** *(if we’re really interested in what a person is saying, we should be facing them, and if sitting down, sitting up and leaning forward)*

  - **following** the conversation *(raising eyebrows, nodding head etc.)*

  - **tone of voice** *(sometimes it is not **what** you say that matters but the way that you say it. Also, the tone of voice should match what you are saying, otherwise you will come across as being insincere and uninterested)
2.1b ‘Vocal gestures’

Information

- ‘Vocal gestures’ means all the sounds that we make that show that we are paying attention, and are following what the other is saying. Examples might be ‘uh-huh’, ‘mmm'

- Vocal gestures are particularly important in scenarios where the speaker is unable to see us, and so cannot watch our body language.

- For example, on the phone we cannot use body language to show that we are listening

- Vocal gestures should not intrude upon the speaker, but be just enough to let them know that you are there and paying attention

- You may already use vocal gestures without realizing it
Paired activity: using non-verbal listening and vocal gestures

The aim of this exercise is to learn about your natural body language as a listener. Each of you is going to get feedback from the other on what body language and vocal gestures you use that encourage the other person to keep on talking.

We all like to know what we do well. The kind of feedback that we want everyone to give is positive feedback - that is something about the other person’s listening skills that seemed to encourage you to keep on talking.

In pairs, nominate one person to be the speaker, and the other to be the listener. Sit so that you can see each other’s faces.

The speaker talks on a topic of their choice for 1 or 2 minutes (one of the trainers will tell you when to start and when to stop) The speaker should talk about something that they feel comfortable talking and that comes easily to mind. The listener is not going to talk much in reply but is going to use facial expressions and vocal gestures.

When the trainer says stop, this is the cue for the speaker to give positive feedback to the listener. What did the listener do that showed they were listening? Was there anything about their face, or eyes, or vocal gestures that encouraged the speaker?

Swap over the roles of speaker and listener, and repeat the exercise.
2.1c Open-ended questions

Information

- You may have heard people talk about ‘open-ended’ and ‘closed-ended’ questions

- Closed-ended questions are questions that can be answered with single words such as yes or no. Closed questions are useful if you want a factual answer, but are less useful in generating conversation.

- Open-ended questions are questions that ‘open up’ a conversation as the person responding is invited to give as much information as they like.

- Open-ended questions are the kind of question we need to use to help get someone talking. They often start with ‘what…’ or ‘how……’

- For example “How did your appointment go last week?” or “What happened at your appointment last week?”
Paired activity: closed and open questions

Work with a different partner from the previous exercise, preferably someone you have not yet worked with.

Study the following questions, and work out which are open questions and which are closed questions.

1. Would you like a cup of tea?
2. What did you do yesterday?
3. What happened at the meeting the other day?
4. Would you prefer chips or boiled potatoes?
5. Have you got any plans for next week?
6. What are your plans for the next week?

See if you can re-write the following closed questions so that they become open questions.

1. Do you like music?
2. Do you like cats?
3. Did you see Coronation Street last night?
2.1d Noticing and reflecting feelings

Information

- We may pick up on what a person is feeling from the:
  - words that they use. For example “I was so cross / worried / depressed”
  - tone of their voice
  - descriptions that they give of their behaviour, or your observations of their behaviour

- Accurate reflection of feelings can really show the carer that you are ‘tuned-in’ to their situation

- To reflect feelings, you may want to use phrases such as
  - “It seems like you felt really upset”;
  - “It seems as if you are worried about what might happen next”
  - “I sense that all this is a real problem for you”
  - “It sounds like you felt all alone”

- Don’t try to introduce your words to tell the carer how you think they feel – wherever possible try to stick to their words to reflect back to them the emotion that they have mentioned

- Do try to match the emotion word with the strength of feeling. So for example if someone sounds very, very angry, don’t reflect it back as “you sound a little bit cross”
😊😊 **Group activity: Reflecting back**

Look back at the words of the scene that the trainers read out earlier.

*What emotions might a befriender ‘reflect back’ to Jenny’?*

*What words might a befriender use to reflect back Jenny’s feelings? Write down some ideas:*
2.1e Paraphrasing and summarising

Information

- Another useful way of helping carers to feel understood is to say back to them a summary of what they have just told you.

- If carers are upset or preoccupied with thinking about a particular issue, they may not be aware of just what comes tumbling out of their mouths as they speak.

- Paraphrasing and summarizing give carers an opportunity to reflect on the issues that they themselves have raised.

- Your aim is to say something that ‘captures the essence’ of what the person has just said.

😊 Group activity: Paraphrasing / summarising

Look back again at the scene with June and Jenny

How might a befriender have summarized or paraphrased some of the things that Jenny said?

Write down some ideas:
Paired activity: putting listening skills together

Let us now see if we can put some of the ideas from this session into practice. Get into pairs again – preferably with someone that you have not yet worked with. One of you take the role of Jenny, and the other take the role of befriender. You can start the conversation any way you want, but in case you aren’t sure where to begin here are some suggestions:

Befriender: How did things go at your Dad’s appointment with the psychiatrist the other day?

Jenny: Not so good.

Befriender: (shows empathy through facial expression and vocal gestures)

Jenny: Dr Jones only saw him for about fifteen minutes, and then said to carry on as we are. I’m really worried that Dad is getting worse. He seems so much more irritable and kind of ‘on edge’. Sometimes he looks so angry and I think he is going to hit one of us one day if we get on the wrong side of him.

After a few minutes the trainer will ask you to stop. When you stop, the person who was carer can give feedback to their befriender. Remember to give positive feedback, so that each person gets to know their strengths.

Swap over, so that you each have a chance to get feedback.

Feedback to group

Were there any particularly useful questions that were asked by befrienders? If so, it would be helpful to share them with the whole group.
2.2 Listening skills and distress

Information

- If a carer starts to become tearful when they are talking to you, it is OK.
- Try not to be afraid of carers’ emotions. They may have lots that they have bottled up.
- If a carer is willing to share their thoughts and emotions with you, it is a sign that they trust you with those thoughts and emotions.
- Don’t feel that you have to say or do something to try to fix things, or ‘rescue’ the carer. Avoid giving ‘false reassurance’.
- If you aren’t sure what to say, don’t worry. Often the most important thing is that you are there, and are listening.
- The skills that we have talked about and practiced today are good ones to use if a carer is distressed.
2.3 Being ‘non-discriminatory’ and ‘carer-centred’

Information

- As a befriender, you are there to hear what a carer has to say. Wherever possible try to ‘follow’ what the carer chooses to talk about. Listen carefully to what carers say, and see if you can asked them a little more about the same topic.

- If the carer changes topic, change topic with them. Sometimes carers will want to talk about the caring situation. Other times they will want to talk about anything but caring!

- Following the carer’s conversation and choice of topics is what we mean by being ‘carer-centred’

- There are no “taboo” or “banned” topics in the BECCA befriending scheme, but befrienders should not use their position to try to ‘convert’ carers to any cause (e.g. religious or political), nor should befrienders judge or discriminate against carers on the grounds of carers characteristics or attitudes.

- Occasionally, you might find yourself in a position where you need to steer the conversation. As part of looking after yourself, you may need to move away from topics that make you feel upset or angry.

- It is OK to ‘agree to disagree’ in a friendly way, but it won’t help either of you to get involved in heated debate on topics that trigger anger or upset. The Befriender Facilitator / Contact is there to help you should you find that your allocated carer has some views or opinions that you strongly disagree with.
2.4 Summary & preview

ℹ️ Information

- In this session we discussed and practiced listening skills, including body-language, verbal gestures, open questions, reflecting feelings and summarising – see the summary chart for a reminder of helpful and unhelpful ‘listening’.

- We also introduced the terms ‘carer-centred’ and ‘non-discriminatory’

💭 Thoughts and/or questions?

Are there any comments or questions about what we have talked about and practiced today?

From what you have learned today, which skill do you most want to remember &/or practice when you are listening and attending to people in the future?

ℹ️ Information

- In the next session we will be learning more about carers’ needs and about the stages of befriending. We will see how good listening skills help to build a good befriender relationship.
### Summary of guidelines for listening skills

<table>
<thead>
<tr>
<th>What to do: the ‘positive listener’</th>
<th>What not to do: the ‘negative listener’</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Body language</strong></td>
<td></td>
</tr>
<tr>
<td>adopts positive posture;</td>
<td>looks bored and judgmental;</td>
</tr>
<tr>
<td>avoids distracting mannerisms</td>
<td>doodles or fiddles distractingly;</td>
</tr>
<tr>
<td>good eye contact;</td>
<td>avoids eye contact;</td>
</tr>
<tr>
<td>nods and smiles when appropriate;</td>
<td>shows little response to what is being</td>
</tr>
<tr>
<td>maintains comfortable distance</td>
<td>said</td>
</tr>
<tr>
<td><strong>Attention</strong></td>
<td></td>
</tr>
<tr>
<td>keeps attention focused on speaker:</td>
<td>keeps focus of comments on self</td>
</tr>
<tr>
<td>&quot;When that happened, what did you</td>
<td>&quot;When something like that happens to</td>
</tr>
<tr>
<td>do?&quot;</td>
<td>me, I…&quot;</td>
</tr>
<tr>
<td><strong>Accepting</strong></td>
<td></td>
</tr>
<tr>
<td>accepts speaker's ideas and feelings:</td>
<td>fails to accept speaker's ideas and</td>
</tr>
<tr>
<td>&quot;That's an interesting idea, can you</td>
<td>feelings &quot;I think it would be better</td>
</tr>
<tr>
<td>say more about it?&quot;</td>
<td>to…&quot;</td>
</tr>
<tr>
<td><strong>Empathy</strong></td>
<td></td>
</tr>
<tr>
<td>empathises &quot;So when that happened,</td>
<td>fails to empathise &quot;I don't see why you</td>
</tr>
<tr>
<td>you felt angry&quot;</td>
<td>felt that&quot;</td>
</tr>
<tr>
<td><strong>Questions</strong></td>
<td></td>
</tr>
<tr>
<td>uses open questions</td>
<td>uses closed questions</td>
</tr>
<tr>
<td>probes in a helpful way; &quot;Could you</td>
<td>fails to probe</td>
</tr>
<tr>
<td>tell me more about…&quot;</td>
<td></td>
</tr>
<tr>
<td><strong>Clarifies</strong></td>
<td></td>
</tr>
<tr>
<td>asks for clarification</td>
<td>assumes things; fails to clarify</td>
</tr>
<tr>
<td>checks understanding by paraphrasing,</td>
<td>fails to check understanding</td>
</tr>
<tr>
<td>etc.</td>
<td></td>
</tr>
<tr>
<td><strong>Summarises</strong></td>
<td></td>
</tr>
<tr>
<td>summarises progress from time to time</td>
<td>fails to summarise</td>
</tr>
<tr>
<td>widens range of ideas by summarising</td>
<td>narrows range of ideas by suggesting a</td>
</tr>
<tr>
<td>a number of alternatives from which</td>
<td>'correct' course of action</td>
</tr>
<tr>
<td>the speaker can choose</td>
<td></td>
</tr>
</tbody>
</table>
BECCA Befriender Training

Session 3: Carers support needs, and stages of the befriending relationship
3.0 Review and introduction

Information

- Last session we learned about listening skills. We learned how to be encouraging by being attentive, using body language and asking open questions. We also looked at how to help carers feel cared for by empathising and reflecting back feelings, paraphrasing and summarising.

Thoughts and/or questions?

Does anyone have any questions from the last session or have any further comments to make about the last session?

Information

- The aims of this session are:
  - to look at the needs of carers of people with dementia – differences between individual carers, and changes over time
  - to learn about the stages of the befriending relationship

Group activity

“Before we go any further, let us all make sure that we know who everyone is that is here today.” Invite the group to re-introduce themselves – or introduce themselves for the first time if they are new-comers or ‘one off’ participants.
3.1a Differences between carers

Information

- In the first session, we met three carers, Rose, Dave and Jenny. They are all very different from each other.

- Each individual carer is different from the next. Differences may be due to:

  - Characteristics of the carer, for example their age, previous experience of caring, cultural background and relationship to the person they care for.

  - Characteristics of the person with dementia, for example the extent of their disabilities, and the particular pattern of their disabilities.

  - Other stresses and strains in the life of the carer, for example if they are caring for other people as well as the person with dementia, if they are disabled or ill themselves, if they are trying to work full time in addition to a time-demanding caring role, or if they have been caring for a long time.

  - Resources available to the carer and the person they care for, for example help from other family members, access to information, money to pay for outside help. Also, some people have developed useful skills during their lives, for example knowing how to problem-solve and how to find out who to ask for help.

- Different combinations of the factors listed above lead to different levels of stress and distress in carer.
3.1b Changes in carers needs over time

Information

- Researchers in the USA (Aneshensel and colleagues) described caring for a person with dementia as the “unexpected career”. They mapped out the typical stages of the career. The typical stages are shown in the diagram below.

- When you first meet your allocated carer, they will be providing care to a person with dementia who lives in their own home (not necessarily the same home as the carer).

- During the time that you are befriending a carer, the cared for person may remain at home, or they may be admitted into hospital, residential care or a nursing home. Some cared for people may die during the time that you are a befriender.

- When carers’ circumstances change, some will wish to end the befriending relationship, and others will be very keen to maintain it. The befriending relationship can continue for as long as both you and the carer are happy for it to do so.
3.1c Characteristics of carers using the befriending scheme

Information

- All carers, who are invited to take part in the BECCA befriending scheme will all have some things in common.

- They will all
  - know that they are caring for a relative, partner or friend who has been given a diagnosis of dementia of one type or another
  - be aged 18 or over
  - either be living in the same accommodation as the person with dementia, or spending 20 or more hours per week caring for the person in their own home (not residential or nursing care) at the time that they first asked to join the scheme
  - have requested contact with the Befriender Facilitator
  - have met up with the Befriender Facilitator / Contact
    - to register for the scheme, and state their befriending needs and preferences
    - to know what befrienders can and cannot do
    - for the Facilitator / Contact to carry out a Health and Safety check on the carer’s home
    - so the Befriender Facilitator / contact can bring together a befriender and carer that they hope will be compatible
Paired activity: carers’ needs

Look back at the examples of Rose, Dave and Jenny from session 1. What kinds of needs might they have for information, emotional support and practical support

<table>
<thead>
<tr>
<th></th>
<th>Rose</th>
<th>Dave</th>
<th>Jenny</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Information</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Emotional</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Practical</strong></td>
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</tbody>
</table>

Group activity: meeting carers needs as a befriender

Feedback from pairs to the whole group.
How can befrienders play a part in these needs being met? (signposting for information and practical needs, using listening skills to meet emotional needs)
3.2 Stages of the befriender relationship

Information

- Even if there are no changes in the circumstances of the carer and cared-for person over the time that you know them, there will be changes in the befriending relationship.

- The befriending relationship will change as you and the carer get to know each other better, as time goes by.

- We will look at four stages of the befriender relationship. They are:

  1. Breaking the ice
  2. Getting to know one another
  3. Achieving companionship
  4. Saying goodbye

- We are going to look at stages 1 and 2 in detail today, and briefly mention stages 3 and 4. We will cover stages 3 and 4 in more detail in the ‘further training’ (session 6)
**3.2a Breaking the ice (stage 1)**

**Information**

- Your first visit to a carer will be with Befriender Facilitator / Contact. Even so, visiting a carer for the first time may be slightly daunting as you won’t know each other. This is normal and to be expected.

- The Befriender Facilitator / Contact will introduce you to the carer. If the person with dementia is also at home, you will be introduced to them too.

- The Befriender Facilitator / Contact will help to break the ice through doing introductions and discussing any particular arrangements that have been made.

- But sometimes it is hard to know where to start. It is often easiest to begin with what is commonly called ‘small talk’ such as the weather, or about how they heard about the befriending scheme or about how long they have lived where they are living.

- Follow the carer’s lead for conversation. Do not push them to talk about topics that they have not raised – you may find that all the conversation is about caring, or you may find that caring is never mentioned.

**Group activity: breaking the ice**

As a group, what ideas can we generate for ‘breaking the ice’?
3.2b Getting to know one another (stage 2)

Information

- During this phase, you are likely to ask questions to learn about the carers’ circumstances, and about the history of the carer and the person with dementia.

- Encourage the carer to tell you about important people in their lives, for example, the people in photographs or people that the carer has spoken to on the phone. Pets can also be important, so don’t forget to ask about them too if they appear in photos.

- One of the major differences between a befriending relationship and a counselling relationship is that you can let carers know about yourself and your own life. Only tell carers as much information as they ask for – and of course only as much as you feel comfortable telling them.
Examples: Impact of dementia on carers

Here are some examples the kinds of things that carers might tell you about once they start to trust you with their feelings:

- frustration / anger at not being able to understand the person with dementia, and not being able to make themselves understood
- sadness at the loss of a companion to chat to, or a partner to discuss things with
- fear that other people will think badly of them if the person with dementia talks ‘rubbish’ or says rude or inappropriate things
- exhaustion at having so many tasks to do
- confusion in trying to work out how to access services, or apply for benefits

😊 Paired activity: responding to carers emotional needs with listening skills

Try to work with someone you haven’t worked with yet during the training. Look together at the examples above, and at the emotional needs that you identified for Rose, Dave and Jenny earlier in the session.

One of you take the role of one of Rose, Dave or Jenny, and the other of you take the role of the befriender. Discuss together what the carer might say to the befriender about how they feel, and what the befriender might say in response. Remember the ‘listening skills’ from session 2.
3.2c Later stages (stages 3 and 4)

Information

- Stages 3 and 4 of the befriending relationship will be the topic of session 6 of the befriender training – that is, as part of the further training. Here is a brief preview:

- **Achieving companionship (stage 3)**
  - You know that you have reached the stage of companionship when you find yourself falling naturally into conversation with the carer, and it feels as if the two of you could talk about just about anything
  - Even the best of friends do not see eye to eye all the time, and there may be times when you need to overcome ‘miscommunication’ – we’ll look at some ideas of how to do this
  - Hopefully both you and the carer will be able to enjoy the companionship, and you will feel like old friends.

- **Saying goodbye (stage 4)**
  - At some point, the befriending relationship will need to end.
  - Sometimes the relationship will end unexpectedly but more commonly, it will be planned.
  - It is important that you let the befriender facilitator or your befriender contact know as soon as you can if you need to end the befriender relationship
3.3 Guidelines for good relations

Information

- Combining good listening skills with basic courtesy and respect will be the foundation of good relations. For example, a carer will appreciate you arriving on time, and remembering that you are a guest in their home.

- Communicate with the carer should any difficulties arise. For example:
  - If you know that you are going to be unavoidably late for an appointment with a carer, try to let the know.
  - If you are late, check whether the carer would still like you to stay for your usual visit length, or whether they have a time commitment.
  - If you have self-care needs during a visit (e.g. need for a cold drink, or to go to the toilet, or if the carer has a pet that you would prefer to be in a different room to you) – let the carer know.

- It will also help good relations for you to be clear and consistent in how you respond to the carer. This means staying within the boundaries of the befriending relationship (see session1), saying ‘no’ (politely) to inappropriate requests, and signposting carers to appropriate other sources / services if they express informational or practical needs that you are unable to meet.

- Lets look in some more detail at responding to inappropriate requests, and at ‘signposting’.
3.3a Responding to inappropriate requests from carers

Information

- Some carers might try asking you to do tasks that are outside the befriending role – even though they have been asked not to. It is very important that you politely, but firmly, refuse.

- There is no set way to deal with a request from a carer that you feel is inappropriate. A lot will depend on how well you know them at the time and the circumstances under which the request is made.

- It is useful for us to have in mind some strategies for what to say or do if a carer makes an inappropriate request. For example:
  - Remind carers of the boundaries of the befriending role. Carers will already have been told what they should not ask befrienders to do, but they may have forgotten.
  - ‘Signpost’. The carer may have made an inappropriate request to the befriender, but it might be the main task for another kind of worker. If this is the case, let the carer know who it is they should be asking for help, and how to get in touch with that service (e.g. social services, an advocacy service, Citizen’s Advice Bureau).

- If a carer seems unhappy about a request being refused by a befriender then the befriender can always ask the carer to contact the Befriender Contact, or Befriender Facilitator
3.3b Signposting

Information

- ‘Signposting’ refers to the times when befrienders point carers in the right direction for information or additional help so that carers are in a better position for making decisions about their own life and that of the person they care for.

- As well as signposting may be one way of responding if a carer has asked a befriender to do something that is outside the befriending role (see 3.3a), signposting can also be useful if a carer has:
  - said that they would like a particular kind of help, but they do not know who to ask
  - asked for advice, for example by saying “what would you advise”, or “what do you think I should do”.

- All carers in the BECCA scheme have been given a copy of the booklet “Who Cares?” that has useful numbers and information for carers. Please take a copy for yourself as it will be useful for you to refer to as well.

Paired activity: practicing signposting, and saying no to inappropriate requests

Imagine a scenario where a carer has asked you to do something outside the befriending role, e.g. asking “what would you do…”. Practice what you might say that is supportive, but within the befriending role.

Here are some examples of what you might say to get you started:
“I cannot advise you what to do -each person’s situation is different, but you might find it useful to read some of the Alzheimer’s Society information on the topic to see if that helps you to decide what is best for you”
“As a befriender I am not in a position to give advice, but if you say a little more about what you are looking for, maybe we can work out if there is someone who might be able to help you”
3.4 Summary and preview

Information

- In this session we discussed carers needs. We have thought about what makes each carer different, and also about how carers needs can change over time. We have also talked about the stages of the befriending relationship, the guidelines for responding to inappropriate requests, and the skills of ‘signposting’.

Thoughts and/or questions?

*Does anyone have any further comments to make about this session?*

Information

- In the next session we will be considering safety issues when working in other people’s homes

Further reading

- Alzheimer’s Society *Carers' handbook*: Revision of ‘Caring for the person with dementia: a guide for families and other carers’. Available by post from the society (£6.50 inc p&p)
BECCA Befriender Training

Session 4:

Working in other people’s homes
4.0 Review and introduction

Information

- In the last session we looked at carers’ needs and how they might change over time. We learned about the 4 stages of the befriending relationship, and about how listening skills can help in getting to know carers. We also covered signposting, and thought about how to responding to inappropriate requests.

Thoughts and/or questions?

*Does anyone have any questions from the last session or have any further comments to make about the last session?*

Information

- The aim of this session is to consider safety and other important issues when working on other people’s homes.

- We shall be looking at examples scenarios and giving guidelines for issues that must be reported to the Befriender Facilitator / Befriender Contact including:
  - Health and safety-related incidents or accidents
  - Suspicions, concerns and / or untoward events
  - Gifts

- We finish the core training with a checklist of things to think about when preparing for a first visit
4.0a Reporting

Information

- Before befrienders meet up with carers, the Befriender Facilitator / Contact will have checked to make sure that the carers’ environment is safe for befrienders. We do not anticipate difficulties, but it is important that befrienders are prepared just in case.

- In this session, we cover a range of scenarios. If anything similar were to happen ‘for real’; we would expect befrienders to report back on to the Befriender Facilitator / Contact

- It is an important volunteer responsibility for befrienders to report back to the Befriender Facilitator / Contact any of the following, as soon as possible:
  - accidents causing actual injury or damage where the befriender or carer was involved, or present as a witness
  - incidents which have led, or MAY LEAD, to injury or damage
  - suspicions / concerns about the well-being and safety of either the carer or the person with dementia
  - untoward events where your safety has been, or has felt to have been, threatened

- The Befriender Facilitator / Contact will then be able to take appropriate action such as:
  - Provide you with support
  - Contact necessary people / agencies
  - Complete the appropriate recording / reporting form(s)

- Lets start by learning more about health and safety........
4.1 Health and Safety

Information

Here are the health and safety responsibilities of volunteers:

1) take reasonable care for the health and safety of yourselves and of any other persons who may be affected by your acts or omissions whilst engaged in voluntary work (this includes taking care of your personal safety, and care of your own possessions – see session 1)

2) co-operate with NVS and others involved in the BECCA scheme so as to enable them to perform or comply with any duty or requirement laid down by law

3) report incidents which have led or MAY LEAD to injury or damage

4) assist in the investigation of incidents with the purpose of introducing measures to prevent recurrence

5) draw the attention of your Befriender Facilitator / Contact to any potential hazard (we shall look at risk assessment later in this session)

6) not interfere or misuse anything provided in the interests of health, safety or welfare

7) abide by the guidelines given in training
4.1a Health and safety risk assessment

Information

- One of the best strategies for dealing with accidents is to try to prevent them from happening in the first place. One way to prevent accidents is to look out for risks, and to take steps to avoid or limit those risks.

- When we visit someone else's home we have to look at possible hazards that we wouldn't even think about in our own home. We all assess risks every day and don't even know it – even when we do a simple task like opening a door, we assess risks.

- Examples of things to look out for include:
  - are floors or steps slippery, uneven or unstable?
  - are there any trailing electric wires, loose cables, frayed plug cables, overloaded circuits
  - pets
  - outside lighting (for visits on winter afternoons, or evenings)

- While we are in other people's houses, we also need to take care that what we do does not risk our health and safety.
  - does the task involve twisting, stooping, stretching, pushing or pulling? e.g. are windows too high or too difficult to open safely?

- The befriending facilitator / befriender's contact will have assessed for risks before you visit a carer. However, every time you go to a carer's home, you should remember to look out for hazards. There may have been changes since you were last there or since the risk assessment was carried out.
Example scenarios: health and safety

Scenario 1
You are at a carer’s home and they have offered to make you a cup of tea. You go to the kitchen to help, and offer to carry the tea tray into the front room, where the two of you usually sit for a chat. As you are carrying the tray, the carer’s dog sits down in the hall in your path. You do not see the dog, and trip. The tea tray goes flying. No one is scalded by the hot water, but the cups are broken and there are tea stains on the paintwork and carpet.

Scenario 2
You visit a home that has loose rugs on a polished wood floor. When you walk in, you almost slip on a rug.

Scenario 3
You are at Rose and Jim’s house. You and Rose are in the front room talking, in the same way that you have done on a weekly basis for a couple of months now. Jim is pottering about somewhere in the house – just as he usually is. Rose has just commented that she has not heard Jim moving around for a while when suddenly there is a loud crash. You leap up and get to the kitchen first where you see Jim sprawled on the kitchen floor. It appears that he has fallen off the kitchen stepladder having tried to get something from a high up cupboard.
Group activity: health and safety

In your groups, discuss each of the scenarios, and decide on a plan of action.

Remember to bear in mind what is and what is not part of the befriending role, and the guidelines for confidentiality and safety that we discussed in session 1.

Thoughts and/or questions?

Has anyone got any ‘health and safety’ / incident reporting scenario that they would like to check out?
4.2 Suspicions, concerns and untoward events

**Information**

- Your Befriender Facilitator / Befriender contact will only place befrienders with carers who would like a befriender, and only after any health and safety risks have been addressed.

- Your Befriender Facilitator / Befriender contact will also have checked for the kinds of difficult situations that occasionally arise when working with carers of people with dementia. By difficult situations, we mean things like
  - abuse,
  - danger to someone’s life (e.g. plans for suicide or homicide, or dangerous behaviour that put the lives of the general public at risk such as drink driving)
  - violent or aggressive behaviour

- We do not expect that befrienders will be faced with such difficult situations, but it is very important that you know what to do should you encounter such a situation.

- **General guidelines:**
  - For any suspicions, or untoward situations, do not try to tackle issues yourself unless there is an immediate danger.
  - Report all such concerns and incidents to your befriender facilitator / contact as soon as you can

- In addition to the general guidelines, we also have two specific guidelines on abuse and aggressive behaviour. We will look at these now.
4.2a Adult abuse: what is it?

Information

- Abuse is any behaviour toward a person that causes them harm, endangers life or violates their rights. It can happen to carers and to people with dementia, at home or in other places that they spend time.

- Abuse can be:
  - Physical e.g. shaking or slapping
  - Sexual e.g. any non-consensual sexual act
  - Psychological e.g. threats of harm or abandonment, humiliation, intimidation, verbal abuse
  - Financial e.g. stealing someone’s money or denying them access to their money or possessions
  - Neglect e.g. ignoring someone’s medical or care needs
  - Discriminatory e.g. racist or sexist abuse or harassment

- If you witness abuse, suspect abuse, or are a victim of abuse, you should also contact your Befriender Facilitator / Contact as soon as possible.

- Contact one of the organisations listed on the ‘further reading’ leaflet if you need immediate assistance, or if you need to talk and your Befriender Facilitator / Contact is not available.

Further reading

“What you need to know about Adult Abuse” produced by Norfolk County Council Social Services and Norfolk Constabulary
4.2b Responding to a disclosure of abuse

Information

- Looking after a vulnerable adult, such as a person with dementia, can be very difficult.

- Carers sometimes worry that they might abuse their relative. They may even have carried out acts that could be considered abusive (e.g. shouting at or threatening the person with dementia), and feel very guilty about it.

- Sometimes a carer is abused by the person with dementia

- It may take time before a carer feels safe enough to tell someone – and it might be a befriender that they tell. Remember the statement of confidentiality, listen with compassion, ask about the carers needs, and also about their fears, and discuss with your Befriender Facilitator / Contact as soon as possible.

- Your Befriender Facilitator / Contact will work out what the best course of action is to help support and protect both the carer and the person with dementia.

- If you need to talk and your Befriender Facilitator / Contact is not immediately available, do contact one of the organisations listed on the ‘further reading’ leaflet.

Further reading

“What you need to know about Adult Abuse” produced by Norfolk County Council Social Services and Norfolk Constabulary
4.2c Aggressive behaviour

Information

- People (with or without dementia) may behave aggressively if they:
  - Feel frustrated, or irritable
  - Feel humiliated, judged or criticised
  - Feel frightened, trapped or threatened
  - Feel discomfort or pain
  - Are under the influence of drugs or alcohol

- You might be able to prevent aggression if you can spot early warning signs such as agitation and irritability. Avoid confrontation and criticism. Talk calmly and try to find tactful ways to defuse the situation

- Sometimes prevention doesn’t work. If it doesn’t, try to stay calm and do not enter an argument. Take a deep breath and try not to show any anxiety. Give an aggeressive person plenty of space, and leave the room, and the house, if necessary and do not be afraid to call for help.

- Being on the receiving end of aggression is likely to leave you feeling shaky. Always let your Befriender Facilitator / Contact know of any incidents of aggressive behaviour, and talks things over within the befriender support system.

Further reading

The Alzheimer’s Society produce an advice sheet for dealing with aggressive behaviour in a person with dementia.

The Suzy Lamplugh Trust produce a booklet “Working Safely in Other People’s Homes” that has information on preventing and responding to aggressive or violent behaviour.
Example scenarios: suspicions, concerns and untoward events

Scenario 1
You are on the telephone to Dave whose wife Ann has young onset dementia. Sometimes Ann tries to take the car out even though they have agreed that she will only drive when he is in the car too. She feels that her independence has been taken away from her, and that she is a prisoner in her own home. Dave shares his concerns with you, and tells you about an incident when Ann drove through a red light.

Scenario 2
You are visiting Jenny, who you have got to know well. She is very appreciative of your visits as you are ‘the only person she can really talk to”. One visit, you arrive to find George, usually a calm and placid man, pacing about and looking agitated. He is grumbling under his breath, he keeps stopping to shake his walking stick at an imagined adversary. You hear from Jenny that her husband Bill has told George that “the men in white coats will be coming to take him away and lock him up”. Jenny fears that George might become violent if you come in the house.
😊😊 Group activity: suspicions, concerns and untoward events

In your groups, discuss each of the scenarios, and decide on a plan of action.

Remember to bear in mind what is and what is not part of the befriending role, and the guidelines for confidentiality and safety that we discussed in session 1.

😊😊 Thoughts and/or questions?

Has anyone got any scenario relating to suspicions, concerns or untoward events that they would like to check out?
4.3 Gifts

**Information**

- A final reporting procedure is for offers of gifts.

- Some carers sometimes like to offer a token of appreciation to those that support them.

- Should you be offered a small token and you feel that the carer would be offended if their offer were turned down, then the gift should be accepted with thanks. By small tokens we mean gifts such as garden produce in the summer, or chocolates at Christmas time.

- You must **not** accept, or be the beneficiary of, any substantial gifts. Substantial gifts refers to anything other than small tokens.

- Should a carer or a member of their family wish to make a financial donation to any organization that you are representing, you must ensure that the payment is made out in favour of the charity, not to you as an individual.

- You must not accept, or prompt, any payments made out in your own name.

- You should let your Befriender Contact / Facilitator know of all offers of gifts, irrespective of whether or not you have accepted them.
4.4 Preparing for your first visit

Information

- Once you have completed the core training (session 1 to 4), and the necessary checks (criminal disclosures, references etc), your Befriender Facilitator / Befriender Contact will discuss with you whether you would like to put your training into practice. It is up to you to decide whether you wish to make the commitment. If you do, your Befriender Facilitator will look out for a carer who is ready for a befriender.

- Make the following preparations for your visits:
  - Make sure someone knows when you are visiting a carer, and that any ‘significant others’ know how to contact your Befriender Facilitator / Contact
  - Plan a safe route for travel to and from the carer’s house
  - Carry your Emergency Contact Card with you

- Remember your listening and signposting skills, and be ready to enjoy yourself!
4.5 Summary and preview

Information

- In this session we looked at health and safety issues when working in other people’s homes, and the reporting of incidents / near misses, accidents, suspicions, concerns, untoward events and gifts.

Thoughts and/or questions?

Does anyone have any further comments to make about this session?

Information

This is the end of the core training for befrienders. We hope that you now feel to have the basic information and skills that you need to start your role as a befriender. Whether or not you have already started befriending by the time of the further training, we hope that you will join us when we will practice additional skills, and cover information about services for people with dementia and their carers. We look forward to seeing you all as a group at that training.

Further reading

The Alzheimer’s Society produce a leaflet on ‘safety in the home’
BECCA befriender Training

Session 5:
Dementia, & services for people with dementia and their carers in & around Norwich
5.0 Introduction

Information

- This is the first ‘further training’ session for volunteer befrienders in the BECCA (Befriending and Cost of Caring) project.

- In the 4 core training sessions we looked at:
  - What we mean by befriending
  - Listening skills
  - Needs of carers
  - Stages of the befriending relationship
  - Guidelines for working in other peoples homes, including health and safety, and untoward circumstances

Thoughts and/or questions?

*Does anyone have any questions from the core training, or have any further comments to make about the core training?*

Information

- The aims of this session are to give an overview of dementia, and services available for people with dementia and their carers.

- We will be ‘signposting’ you to lots of information sources. We do not expect you to read everything listed in the ‘further reading’ sections, but we want you to have an idea of where you might ‘signpost’ your carer to if they have information or...
service needs. It helps to have an idea yourself rather than to try to signpost blindly.
Paired activity: dementia quiz

In the core training we often referred to people with dementia, such as Jim, Ann and George. In pairs, see if you can answer the following ‘true or false’ questions about dementia.

1. "Most old people get dementia"       TRUE/FALSE
2. "Permanent damage to the brain occurs in most types of dementia"       TRUE/FALSE
3. "People who have dementia will all show the same symptoms"       TRUE/FALSE
4. "People with dementia usually have poor short-term memory"       TRUE/FALSE
5. "People with dementia have the same needs as babies"       TRUE/FALSE
6. "If an elderly person becomes confused, it means they have got dementia"       TRUE/FALSE
7. "People with dementia often have good memory for the past"       TRUE/FALSE
8. "Dementia can be caused by small strokes"       TRUE/FALSE
9. "Alzheimer's disease can be a genetic condition"       TRUE/FALSE
10. "Most types of dementia cannot be cured"       TRUE/FALSE
11. "When people with dementia walk around, it is always aimless"       TRUE/FALSE
12. "Most people with dementia gradually lose all their ability to communicate"       TRUE/FALSE
13. "People with dementia who are verbally aggressive nearly always become physically aggressive"       TRUE/FALSE
14. "Brain damage is the only factor responsible for the 'symptoms' of dementia"       TRUE/FALSE
Group activity: answers to the quiz

The questions you have just looked at are from a quiz by Buz Loveday used in a training programme called “Improving Dementia Care”. Hopefully you found that you could answer quite a few of the questions from your own experience, or learning from others in the core training. Now let’s look together at the answers to the questions. Some are not as ‘cut and dried’ as ‘true’ or ‘false’. 
Further reading – about dementia

There are many illnesses that cause dementia. The two most common are Alzheimer’s disease and Vascular Dementia.

The Alzheimer’s Society produce many useful information sheets, for example:
- “What is dementia” (no.400, June 2001)
- “What is Alzheimer’s Disease” (no.401, June 2001)
- “What is vascular dementia” (no.402, February 2001)

The Alzheimer’s Society also produces information sheets about rarer forms of dementia, such as:
- Dementia with Lewy bodies
- Fronto-temporal dementia (including Pick’s disease)
- Korsakoff’s syndrome
- Aids-related cognitive impairment
- CJD

Alzheimer’s Society information and advice sheets are available through the local Alzheimer’s Society branch, or by downloading them from the national Alzheimer’s Society website at www.alzheimers.org.uk

Other voluntary groups have information sheets on dementia secondary to other illnesses, for example Parkinson’s disease, Huntingdon’s disease and stroke

Questions?

Does anyone have any questions about different kinds of dementia?
5.1 Attitudes towards the person with dementia

Information

- In the past, people with dementia were sometimes treated as if they were ‘objects’. They were discriminated against as it was thought that their words and actions were all meaningless.

- Discrimination against people with dementia can add to their disabilities.

Paired activity: experience of discrimination

*People with dementia are not the only people to be discriminated against. We are all likely to have experienced a time when we were the ‘odd one out’, or in the ‘out-group’ rather than the ‘in-group’.*

*Discuss a time when you were discriminated against. What did it feel like?*

*What groups of people in society are discriminated against?*

*What impact does discrimination have?*
5.1a Understanding and respecting the person with dementia

Information

- It will help carers if befrienders are able to show understanding and respect for the person with dementia, while at the same time acknowledging any difficulties and frustrations that the carer experiences.

- Even if we never meet the cared-for person, we can treat them with respect and dignity by:
  - Using respectful language, talking in a way they you would feel comfortable even if the person with dementia were there
  - Remembering what the carer tells us about the person e.g. their likes and dislikes, stories from their lives

- If you do meet the person with dementia,
  - Treat the person as an adult – talk in a straightforward, kind and reassuring way without talking down to them as though they were a child
  - Remember that although dementia affects the thinking and reasoning part of the brain, it does not mean that the person no longer has feelings
  - Be flexible and tolerant

Further reading: understanding & respecting the person

See the Alzheimer’s Society Advice sheet “Understanding and Respecting the Person with Dementia” No 524. Jan 2000)
5.2 Understanding services

Information

- There are a variety of services for people with dementia and their carers. Services vary from district to district, and new ideas are being introduced as time goes by.

- The kind of services that might be most helpful for a carer will vary from family to family, and will change over the course of the illness of the cared-for person.

- It takes a long time to get to know all the potentially useful services. We do not expect befrienders to be ‘walking encyclopaedias’, but we do want to cover basic information on how services are organised, and how to access them. In session 4 we gave out the ‘Who cares’ booklet. We will be looking at that booklet again today.

- Services are provided by a number of different agencies:
  - The National Health Service (NHS)
  - Social Services
  - Voluntary Sector organisations
  - Private companies
  The first two are known as ‘statutory services’ and the last two are the ‘independent sector’

- More often than not, carers find themselves having to organise services for the person with dementia. This can be tricky for carers if they do not know how services work – for example it helps to know some of the differences between the NHS and Social Services.
Further reading – Health & Social Services

The ‘Who Cares?’ booklet has divided information up into those services that can be accessed directly by families (p4), and those services that required some form of assessment from Health or Social Services personnel.

The Alzheimer’s Society also has information sheets on services.

“How health professionals can help” (no.454, December 2001) - describes the kind of services that are typically available from National Health Service Trusts e.g. doctors (GPs and psychiatrists), nurses (district, community psychiatric, continence) and other professions allied to medicine

“Community Care Assessment” (no. 448, February 2002) - describes the kind of services that are typically available from local authority Social services e.g. home care, meals on wheels, residential care

Questions?

Does anyone have any questions about Health Services and Social Services and about the difference between the two?
5.2a Services for people with dementia

Information

- Services for people with dementia have changed a lot over the past decade or so. This is, in part, due to a large shift in attitude towards people with dementia.

- Services for people with dementia now aim to be ‘person-centred’. Staff try to get to know the individual person’s life history, lifelong personality, physical health, likes and dislikes and the influence of the people around them, as well as their particular pattern of cognitive (thinking) disabilities.

- In general services for people in later stages of dementia are more longstanding than those for people in early stages. The longstanding services include hospital wards, day hospitals, day centres. These provide some activities for the person with dementia, and an opportunity for staff to monitor and assess any challenging behaviour. They also provide some respite for the carer.

- Newer services for people with dementia include:
  - Memory clinics for diagnosis and prescription of the new ‘anti-dementia’ drugs
  - Support groups for people with dementia e.g. National Alzheimer’s Society ‘Learning to live again’ project
  - Support to re-learn some skills or make changes to daily routines and activities to make the most of remaining skills
  - Person-centred reminiscence activities in people’s own home (e.g. Pabulum)

Questions?

*Does anyone have any questions about services for people with dementia*
Further reading: diagnosis, medication & finances

Here are some more signposts to information sheets from the Alzheimer’s Society.

• “Diagnosis and assessment” No 426. November 2000
  Even though all carers in the study should be caring for someone with a diagnosis or dementia, sometimes communication of the diagnosis is poor, and carers are looking for more information on the topic

  These drugs are not cures, but can help some people to make the most of their remaining memory

• “Dementia: drugs used to relieve behavioural symptoms” No 408 Nov 2000.

• “Welfare benefits” No 413. January 2002
  Covers types of benefits and how to claim

Questions?

Does anyone have any questions about:
- how doctors go about trying to get a diagnosis of dementia?
- medications used for some of the symptoms of dementia?
- the financial benefits available for people with dementia?
5.3 Recognition and Rights of Carers

Information

- Over the past decade there have been dramatic changes in the legal status of carers. Before 1995, family carers had no legal rights. Since then, Parliament has passed two Carers Acts (1995 & 2000).

- There is also a National Strategy for Carers (1999) which aims to develop better information, support and care for carers. Money has been provided to Social Services in the ‘Carers Special Grants’

- Carers now have the right to an assessment of their own needs, irrespective of whether the cared-for person has been assessed (see ‘Who Cares?’ pages 15 to 17 and the removable central section called ‘A Carer’s Guide to a Carer’s Assessment’)

- Councils have been given the power (but not the duty) to provide services to carers in the carers own right. They may charge carers for carers’ services

- Carers in paid work have the right to have time off to deal with family emergency (Employment Relations Act 1999)

- Carers who are unable to work due to caring duties are entitled to contributions to a State Second Pension

- The Carers Act 2000 makes it clear that Statutory services should not assume that carers are willing to continue caring. They should be supported to give up care if that is their need / preference.
5.4 Services for carers of people with dementia

Information

- **Information sessions**
  The Norwich Alzheimer’s Society has hosted a National Lottery funded project called the “Positive Caring Programme”. It was designed for people who have recently found themselves caring for a person with dementia, and included information on understanding dementia, how to handle difficult behaviours, and financial and legal information.

- **Support groups**
  Norwich Alzheimer’s Society have a support group. There are also carers groups in a number of surrounding villages.

- **Telephone information & support lines**
  - Crossroads Norfolk Carers Helpline – 0808 808 9876 (24hrs)
  - National Alzheimer’s Society Hopeline – 0845 300 0336 (8.30am to 6.30pm); trained advisers now includes specialists in welfare benefits and medical and scientific issues
  - Norwich Alzheimer’s Society also have outreach workers and a Carers Contact

- **Relief care and Short Breaks**
  Arrangements through Social Services often depend upon the time of year, and whether a carer has been assessed as being ‘high priority’. Carers able to self-fund can make their own arrangements e.g. direct with Crossroads
Further reading – carers’ rights; care homes

The organization Age Concern has lots of information on financial and legal issues for older people and for carers of older people. They also have an extensive publications list including books for carers, and for those working with carers. There is both a Norwich and a Norfolk Age Concern. The national Age Concern website is www.ageconcern.org.uk

Deciding on using residential / nursing care, and choosing an appropriate home is often hard. Information on Homes, and questions to think about when choosing a Home are available from Social Services and Age Concern. See also the Alzheimer’s Society Information sheet:

“Residential and Nursing Care” (no.419, Jan 2002)

Questions?

Does anyone have any questions about carers rights or carers services?

Does anyone have any questions about Residential or Nursing Care homes?
5.5 Avoiding ‘information overload’

Information

- In this session, we have only introduced you to a fraction of the information that is available for carers for people with dementia.

- Whereas in the past, there were only a few books on dementia, there are now hundreds of books, websites, information and advice sheets from a large number of organisations.

- As a befriender, remember that your main role is to provide a listening ear, conversation or companionship.

- Signposting should be ‘targeted’ as people take more notice of information if it is relevant to their lives at that moment. Signposting carers to all of the information available could lead to information overload!

Paired activity

What was it like being signposted to as much information as we covered today? Which parts were you most able to ‘take in’? Have you learned anything about signposting that will be useful when you meet carers?

Feedback to group
5.6 Summary and preview

Information

- This was an ‘information packed’ session. We looked at what we mean by dementia, and at national and local services for people with dementia and their carers provided by health, social and voluntary services. We also looked at carers rights, and at services targeted specifically at carers. We do not expect that you should remember all the information we covered, but we hope that the written notes will help you should your carer be looking for ‘signposts’.

Thoughts and/or questions?

Does anyone have any further comments to make or questions to ask about this session?

Information

- In the next session, we will be focusing on stages 3 and 4 of the befriender relationship – ‘achieving companionship’ and ‘saying goodbye’.

- As part of the next session, we will remind ourselves of our listening skills, and we will practice using them to prevent and overcome the kind of misunderstandings that can arise in the befriending relationship.
BECCA befriender Training

Session 6: Later stages of befriending
6.0 Review and introduction

Information

- In the last session we looked at services for people with dementia and their carers.

Thoughts and/or questions?

*Does anyone have any further questions about services for carers of people with dementia?*

Information

- In session 3 of the core training, we covered stages of the befriending relationship, in particular ‘breaking the ice’ (stage 1) and ‘getting to know one another’ (stage 2).

- In this session we are going to go into more detail about the later stages of the befriending relationship:
  - Achieving companionship (stage 3), including how to handle miscommunication
  - Saying goodbye (stage 4) - what to do when the time comes to end the befriending relationship

- We will also think about ‘looking after ourselves’
6.1 Achieving companionship (stage 3)

Information

- In session 3 we said that you’ll know when you are in stage 3 of the befriender relationship (‘achieving companionship’), as it will feel as if you and your befriended are old friends.

- We hope that issues we have already covered will be the foundation of solid relationships, and will help in achieving companionship. A summary of befriender characteristics mentioned (in detail or in passing) in previous sessions are:
  - reliability (arriving on time, and informing in advance if not; carrying out any promises made)
  - respectfulness (remembering that you are a guest in someone else’s home; being non-judgemental)
  - trustworthiness (abiding by the statement of confidentiality)
  - consistency (working within the boundaries of the befriending relationship, and not giving mixed messages by doing different things at different times without explanation)

- However, even old friends with solid foundations can have their ups and downs. Similarly, befrienders and befriendedes can sometimes go through difficult patches in their relationship, even when companionship has been achieved.

- It can be helpful to have an idea about how to overcome any problems that get in the way of companionship. Let’s think about how to avoid miscommunication, and how to ‘troubleshoot’ if something feels wrong in the relationship.
6.1a Miscommunication

Information

- **Miscommunication** is ‘communication gone wrong’. It can come about through:
  - saying or doing something that someone else misheard, or misunderstood
  - not saying or doing something that someone else hoped we might say / do, or thought we should have said / done.

- Miscommunication is very common. Just think of all the misunderstandings that there are every day between husbands & wives, parents and children, work colleagues!

.pair activity

*Can you think of examples of miscommunication in every day life? (Examples do not need to relate to carers or people with dementia)*

*How did the mis-communication come about?*
6.1b Avoiding miscommunication

Information

We can try to avoid miscommunication by:

- **Listening and observing carefully**
  Notice body language, what is said, and how the carer says it

- **Avoiding making assumptions**
  We cannot *assume* that we know how a carer feels, or what they think. It’s fine to make a guess about how a carer might think or feel, but however good our intuition, or however long our experience, our guess won’t be right all the time.

- **Checking out our understanding of what someone else is saying, thinking or feeling**
  We can check out our understanding by using the skills of ‘reflecting back’ and ‘summarising’ so that the carer has an opportunity to confirm or correct your understanding

- **Knowing ourselves**
  If we know our own hearts and minds, we are less likely to get our feelings mixed up with what the carer is expressing

😊😊 Pair activity: avoiding mis-communication

*Think about your own examples of ‘mis-communication’. Discuss which of the ideas on this page might have helped to avoid the mis-communication*

Feedback to larger group
6.1c ‘Troubleshooting’

Information

- If something seems to go wrong in the befriender relationship, don’t just ignore it and hope that the difficulty will go away.

- Try to think back to when things started to feel awkward. Can you remember what was happening / what the two of you were talking about before things seemed to change between you? Could there have been some unintended mis-communication?

- Go back to basics with listening skills – observe body language, track conversations, accurately reflect feelings and summarise

- Being able to think about what is happening in the befriending relationship is a skill that befrienders will develop over time. It is a skill that you can work on in the ongoing befriender support meetings.

- We hope that all befriender relationships work out well. Occasionally things might not work out. If you feel uncomfortable when visiting your carer, please talk to the befriender facilitator / your befriender contact. They may be able to help you with ideas, or do a visit with you to see if the situation can be resolved. Should it seem the best course of action to end the befriending relationship, the befriender facilitator / befriender contact will help you.
6.2 Saying goodbye (stage 4)

Information

- In session 3 we acknowledged that at some point befriending relationships will need to end. Some befriending relationships will end unexpectedly, others will have planned endings.

- When it comes to saying goodbye, people sometimes say “I don’t want to tell them as it might upset them”. It may be true that a carer will miss the person who befriended them - even if a new befriender can come in - BUT in order to end relationships in the most helpful way for befrienders and carers, it is helpful to have planned endings, with as much notice as possible.

- Whether a relationship ends unexpectedly or in a planned way, the befriender facilitator / your befriender contact will meet up with you for an individual session. In this session, you will have an opportunity to reflect on what it was like being a befriender for that carer, and what it was like ending the relationship.

- If you ended the relationship, the befriender facilitator / befriender contact will ask why that was. Sometimes it will be changes circumstances, for example at home or at work, sometimes befriending just isn’t what volunteers expected. For the safety of future befrienders, we need to know if anything happened that made you feel upset or fearful.
_pair activity: saying goodbye_

_Think of times when you have had to say goodbye to someone who you do not expect to ever see again (Examples do not need to relate to carers or people with dementia)_

_Can you think of times when the goodbye was expected? And when it was unexpected?_

_What was the experience of saying goodbye like?_

_How might your past experience help you when it comes to saying goodbye to your befriender?_
6.3 Looking after yourselves

ℹ️ Information

- By entering into other people’s lives, you are exposed to their distress as well as their joys. But we do not want the befriending scheme to have any detrimental effect on you.
- Stress can be avoided by spotting potential problems before they arise and finding ways to deal with them.
- Problems might arise if you find it difficult to get on with your allocated carer, or if your enthusiasm leads you to overwork.

😊😊 Pair activity: sources of stress

*What do you see as possible sources of stress for you as a befriender?*

😊😊 Group activity

Feedback to large group
6.3a Avoiding overworking

**Information**

- As befrienders, you need to ensure that enthusiasm does not lead you to overstretch yourselves in terms of time, energy or a sense of responsibility for your allocated carer. This would be harmful to your own well-being and, also unhelpful for your carer.

- Signs of overworking as a befriender are:
  - your private / family life being affected
  - new, higher levels of physical or mental strain

- Ways of avoiding being overworked include:
  - **Having set visiting times**
    Set a weekly visiting time and duration each week and trying to stick with that schedule. Flexibility will be required sometimes (e.g. for holidays, if a carer is particularly upset or if an accident / incident occurs that means you need to stay until someone else arrives), but diverting from the set schedule should be kept to a minimum.
  - **Not being ‘on call’**
    Do not place yourself ‘on call’ for your carer. In the BECCA scheme we are using the NVS guideline that volunteers should not give out their own home phone number.
  - **Using your befriender support network**
  - **Remembering that your are not responsible for the actions & well-being of the carer you visit, or the cared for person, although you are responsible for passing on concerns to your befriender contact or the befriender facilitator.**
6.3b Befriender support and ongoing training

Information

- Throughout the befriender training, we have emphasised the importance of staying in contact with the Befriender Facilitator / your Befriender Contact and staying in contact with other befrienders through Befriender Support Meetings.

- Should you ever have any complaint about your treatment as a BECCA volunteer that you cannot resolve with your befriender contact / befriender facilitator, then you can contact Fiona Poland at the University of East Anglia (details in the Befriender information booklet).

- As a registered volunteer with NVS, you can also use the NVS systems. NVS aims to identify and solve problems at the earliest possible stage, and has procedures for complaints and grievances. The NVS main office at the Charing Cross Centre is open from
  - 9.30 – 4.30 Monday to Thursday
  - 9.30 – 1.00 on Fridays
  - 4.30 p.m. – 7 p.m. by appointment on the first and third Thursday in the month.

- Befriender volunteers will receive regular newsletters to keep them up to date with the BECCA project and information about support sessions and further training.

- The Befriender Facilitator is available on 01603 628627 on Mondays, Wednesday mornings and all day Thursdays – at other times leave a message on the answerphone and she will get back to you as soon as she can.
6.4 Concluding remarks

Information

- The core training and further training have covered a lot of ground. We hope that the guidelines and skills will help you in your role as a befriending volunteer, and we thank you for your participation in the course.

- We are sure that all kinds of questions will come up for you as time goes by. If you find yourself wondering about what to do in a certain situation, you could try any of the following ideas:
  - look back at the training handouts and see if there is any information that answers your question.
  - discuss the question / issue with other befrienders
  - ask the befriender facilitator / befriender contact when you next see them at an individual meeting or further training

- Remember that if your question or concern is about an issue of safety or an untoward situation, you do not need to wait for the next befriender meeting. Phone the befriender facilitator or befriender contact as soon as you can.

- Volunteering as a befriender is something to be enjoyed, and to bring you a sense of achievement. We hope that you do enjoy it, and we look forward to seeing you at future befrienders meetings, and hearing of your experiences.
VOLUNTEER TRAINING COURSE EVALUATION SHEET

Training Course:

Date:

Venue:

Trainer(s):

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