

# Volunteer Orientation

Module #1

About Our Patients

The Role of Culture in Healthcare

# A little bit about Disabilities...

A disability is a functional limitation that interferes with a person's ability to walk, hear, talk, learn, etc.

Do not label people as part of a disability group – don't say "the disabled", say "people with disabilities"

Use the word "handicap" only to describe a situation or barrier imposed by society, the environment or oneself.

# Who our patients are

- Children or adults with disabilities are like everyone else, they just happen to have a disability. Remember this when speaking to a patient.
- Many of our patients use wheelchairs or walkers. Many of our patients don't. Each patient is unique!

# We treat patients with

- Disabilities such as cerebral palsy, spina bifida
- Orthopedic issues & injuries, surgeries
- Traumatic brain injuries
- Rheumatoid arthritis
- Spinal cord and upper extremity issues and injuries
- Complex medical conditions

**These next slides  
highlight some tips for  
interacting with our  
patients...**

# Interacting with our *patients*

- Speak of the person first, then the disability. “Joe, who has cerebral palsy”
- Emphasize abilities, not limitations
- Don't patronize or give excessive praise or attention to a person with a disability

# Interacting with our *patients...*

- You are a stranger to our patients and families so please
  - Introduce yourself, tell them you are a volunteer
  - Ask their name
- Communicate directly with person who has the disability
  - Talk directly to them
  - Make eye contact
  - Sit down so you are at their eye level

# Interacting with our *patients...*

- If unsure about offering help – ask, then LISTEN to the answer
  - do not assume what an individual can and cannot do
  - Ask first before helping
  - Pay attention to directions, and follow them



# Interacting with our *patients...*

- Listen but do not offer advice – VERY IMPORTANT
  - Notify staff member if parent or child seems upset, angry or expresses a particular need
- Adult-to-adult discussions not including the patient should be very brief

# What to say & What NOT to say...

- Please don't ask:
  - What's wrong with you?
  - Why are you here?
- Suggested topics of conversation:
  - Pets & Family
  - Hobbies
  - Where they live, did they drive a long way
  - Where they go to school

# Interacting with our *patients*

Choice and independence are important - let patients do or speak for themselves as much as possible

- Do not offer a choice when it does not really exist.
  - Example: Never ask “Do you want to go to rehab?” The child has to go to rehab.

# Interacting with our *patients...*

- Avoid making promises to a child or parent.
  - You can't be sure what is realistic
    - Example: a child complains of being hungry. You say "You can eat lunch soon." This may be a child who is not allowed to eat because of a scheduled surgery or procedure and you just set them up for disappointment!

# Interacting with our *patients...*

- Never pick up a child without staff permission and instructions
  - May be unseen bandages and/or sutures
  - Incorrect handling may cause discomfort, strain or injury to child
- A wheelchair is part of an individual's personal space
  - Don't move it, push it, lean on it without asking permission first

# Interacting with our *patients...*

Volunteers interact with culturally diverse patients and families every day at Gillette

- Minnesota has the:
  - Largest population of Somali immigrants
  - Highest proportion of refugees
  - Second highest population of Hmong in the US!
- We treat many patients from other countries

# Interacting with our *patients...*

When discussing culture with a patient:

- Use “I” statement as much as possible
  - Talk about your reactions and your response rather than analyzing someone else's behavior
- Respect the rights of others to state their own opinion

# Interacting with our *patients...*

Please keep the following in mind when using interpreters:

Communication will proceed s-l-o-w-l-y.

- Ask the interpreter to sit to one side so you can see the patient or family member.
- Look at and speak directly to patient/family member as if they understand what you are saying. The interpreter will translate what you have said.



# Interacting with our *patients...*

More tips when using interpreters:

- Use clear, short bits of information. Allow the interpreter time to translate what you have said.
- Avoid slang, use common words.
- Be sure to
  - Listen
  - observe nonverbal responses
  - be respectful
  - Be patient