

## Activity 2.1 How to Establish Rapport

### Purpose

The purpose of this activity is to identify and explore the skills and strategies used to build and maintain rapport and a trusting relationship with a client.

### Who should participate?

Especially important for all clinic staff because it is about basic communication skills, rapport building and establishing a welcoming and accessible clinic environment.

### Time

15–20 minutes

### Preparation

Review the following:

- Module 2 Preview & Preparation
- Activity 2.1 Handouts

### Materials

#### Handouts:

Make one copy for each participant (or re-use copies printed for Module 1):

- Contraceptive Counseling Process Guide
- Principles for Providing Quality Counseling (optional)

#### Supplies:

- Large paper to stick/tape to the wall — **3 sheets**, labeled with “Look,” “Voice,” and “Beginning”
- Markers

### Resources

Have at least one printed copy available for reference:

- Providing Quality Family Planning Services (QFP): Recommendations of CDC and OPA, Appendix C

**Look**

**Voice**

**Beginning**

## Detailed Instructions

### 1. Introduce the activity:

*The purpose of this activity is to talk about how we welcome and develop rapport (both verbally and non-verbally) with our clients. We know that how we communicate with our clients is essential to providing high quality and consistent contraceptive services. This activity will give us a chance to talk about **how** we do this and will set the stage for talking about a communication model (called OARS) that gives us a short checklist on using communication skills and how to use these skills with intention.*

### 2. Lead a group brainstorm about specific ways to welcome a client.

Have participants call out responses to each of the questions in **bold**. (If participants are struggling to come up with ideas, you might also ask the bulleted questions underneath.)

**Encourage specific responses.** For example, if someone says “look welcoming,” ask, “Exactly, what does that look like?”

As participants respond, **take notes on the large papers** you prepared.

#### **How do you look?**

- Is your body relaxed?
- Do you smile easily?
- What mannerisms are you aware of that might distract? (e.g., hair twisting, leg bouncing, etc.)
- What does your face look like when you are concentrating?
- How would you describe your “professional” appearance?
- How do you show that you are listening? (e.g., nodding, appropriate eye contact, etc.)

#### **How is your voice and voice tone? (in person and on the phone)**

- Are you speaking clearly? Slowly, so others can understand you?
- Are you speaking gently and softly (confidentially)?
- Do you avoid using slang (e.g., “whatever...”)?
- Do you explain any abbreviations you use?
- How do you show that you are listening? (e.g., restating what you heard from the client)

#### **How do you begin your client interaction? (in person and on the phone)**

- How do you introduce yourself?
- What words of welcome do you use? (“How can I help you today?”)
- What questions do you ask?
- How do you ask these questions?
- How do you show respect?
- How do you build trust?

## At a Glance

### Introduction

Purpose:

- Developing rapport
- Verbal and nonverbal
- Communication is an essential part of high quality services

### Brainstorm

How can you greet or welcome a client?

#### How do you look?

**Look**

#### How is your voice/tone?

**Voice**

#### How do you begin?

**Beginning**

3. **Lead a group discussion** about ways to assess and improve your rapport-building skills.

- *How can we — as individuals — assess how we’re building rapport through our nonverbal signals, our words and our voice tone, and the messages we communicate at the start of a client interaction?*
- *How can we — as a team — help each other improve our rapport-building skills? How can we give and receive feedback in this area?*

4. **Review the “Beginning” section of the Contraceptive Counseling Process Guide.**

Note that the bulleted list in that section includes rapport-building strategies like those the group just brainstormed, as well as skills related to the OARS model, which you’ll go over in the next activity.

**Trainer Tip:** Activity 2.2 **The OARS Model — Essential Communication Skills** will offer a simple framework of skills that can help participants build a trusting relationship with clients.

Ask participants:

**Why do you think the Process Guide says that these communication skills are for the “Beginning (and throughout)”?**

Pause for responses.

*Establishing rapport is something that is important for us to do intentionally at the beginning of a visit, and then continue to do throughout. If we take time in that first moment when a client walks in the door to **invest in the relationship** and build rapport, **that investment will pay off throughout the visit** as a client becomes more comfortable in sharing their needs and goals.*

*However, it is possible to lose trust that you initially built, which is why it’s important to apply good communication skills throughout the visit to help maintain rapport and a trusting relationship.*

5. **Wrap up the activity**, sharing summarizing comments such as:

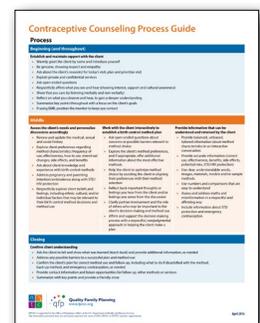
*This quick activity was aimed at describing and clarifying the qualities and skills we use when greeting and welcoming our clients. **Could you each share with the group one specific way you intend to increase your skills in building rapport?***

*Remember: our non-verbal actions and voice tone are an important part of effective communication.*

**Discussion**

- How to assess and improve as an individual?
- How to assess and improve as a team?

**Process Guide — “Beginning”**



Why does the Guide say these communication skills are for “Beginning (and throughout)”?

**Wrap-Up Activity 2.1 Complete**



# Contraceptive Counseling Process Guide

## Process

### Beginning (and throughout)

#### Establish and maintain rapport with the client

- ▶ Warmly greet the client by name and introduce yourself
- ▶ Be genuine, showing respect and empathy
- ▶ Ask about the client's reason(s) for today's visit, plan and prioritize visit
- ▶ Explain private and confidential services
- ▶ Ask open-ended questions
- ▶ Respectfully affirm what you see and hear (showing interest, support and cultural awareness)
- ▶ Show that you care by listening (verbally and non-verbally)
- ▶ Reflect on what you observe and hear, to gain a deeper understanding
- ▶ Summarize key points throughout with a focus on the client's goals
- ▶ If using EMR, position the monitor to keep eye contact

### Middle

#### Assess the client's needs and personalize discussions accordingly

- ▶ Review and update the medical, sexual and social history
- ▶ Explore client preferences regarding method characteristics: frequency of use, effectiveness, how to use, menstrual changes, side effects, and benefits
- ▶ Ask about client knowledge and experience with birth control methods
- ▶ Address pregnancy and parenting intention/ambivalence along with STD/HIV protection
- ▶ Respectfully explore client beliefs and feelings, including ethnic, cultural, and/or individual factors that may be relevant to their birth control method decisions and method use

#### Work with the client interactively to establish a birth control method plan

- ▶ Ask open-ended questions about concerns or possible barriers relevant to method choice
- ▶ Explore the client's method preferences, and if appropriate, offer additional information about the most effective methods
- ▶ Help the client to optimize method choice by assisting the client in aligning their preferences with their method selection
- ▶ Reflect back important thoughts or feelings you hear from the client and/or feelings you sense from the discussion
- ▶ Clarify partner involvement and the role of others who may be important to the client's decision making and method use
- ▶ Affirm and support the decision making process with a respectful, nonjudgmental approach in helping the client make a plan

#### Provide information that can be understood and retained by the client

- ▶ Provide balanced, unbiased, tailored information about method characteristics in an interactive conversation
- ▶ Provide accurate information (correct use, effectiveness, benefits, side effects, potential risks, STD/HIV protection)
- ▶ Use clear, understandable words, images, materials, models and/or sample methods
- ▶ Use numbers and comparisons that are easy to understand
- ▶ Assess and address myths and misinformation in a respectful and affirming way
- ▶ Include information about STD protection and emergency contraception

### Closing

#### Confirm client understanding

- ▶ Ask the client to tell and show what was learned (teach-back) and provide additional information, as needed
- ▶ Address any possible barriers to a successful plan and method use
- ▶ Confirm the client's plan for correct method use and follow-up, including what to do if dissatisfied with the method, back-up method, and emergency contraception, as needed
- ▶ Provide contact information and future opportunities for follow up, other methods or services
- ▶ Summarize with key points and provide a friendly close



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# Principles for Providing Quality Counseling

*Counseling* is a process that enables your client to make and follow through on decisions. *Education* is an integral component of the counseling process that helps clients make informed decisions. Providing quality counseling is an essential component of client-centered care.

Your client is the primary focus when providing counseling related to reproductive and sexual health decision making about preventing or achieving pregnancy and supporting healthy behaviors. Using **client-centered** skills, you tailor the interactive counseling and educational encounter to meet the unique and culturally appropriate needs of your client.

## PRINCIPLE 1:

### Establish and maintain rapport with the client

- ▶ Create a welcoming environment — greet the client warmly, show you care. Listen to and engage your client by asking open-ended questions. Explain privacy and confidentiality to help build a climate of safety and trust that will encourage questions at every stage of the client encounter.



## PRINCIPLE 2:

### Assess the client's needs and personalize discussions accordingly

- ▶ Tailor your questions and conversation so that your client's clinical needs, personal life considerations and psychological concerns are integrated into important education and decision making discussion.



## PRINCIPLE 3:

### Work with the client interactively to establish a plan

- ▶ Address your client's personal goals by interactively exploring decision making and readiness for behavior change if needed. Help establish a plan that will allow the client to achieve personal goals.

## PRINCIPLE 4:

### Provide information that can be understood and retained by the client

- ▶ Provide an opportunity for your client to learn medically accurate information that is balanced, nonjudgmental and in accordance with your client's plan at this time in her or his life.

## PRINCIPLE 5:

### Confirm client understanding

- ▶ Use an interactive teach-back process to give your client an opportunity to say — in his or her own words — the important information shared during the encounter. The goal of using a teach-back approach is to clarify any client misunderstandings to ensure your client's success in their reproductive health choices.



Source: Providing Quality Family Planning Services: Recommendations of CDC and the U. S. Office of Population Affairs, 2014; Appendix C



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