Welcome to the Neighborhood Friendly Visitor Program

This handbook, along with your volunteer training, will introduce you to The Neighborhood Friendly Visitor Program, which is part of the Diocese of Providence Office of Community Services & Catholic Charities and the Catholic Charities Volunteer Service Corps. But first we want to start by thanking you for your interest in becoming a volunteer with the Neighborhood Friendly Visitor Program and hope you’ll enjoy and learn a lot from your training and this handbook we are providing you.

Volunteering with this program is a great way to make an important impact in an elder or disabled person’s life and safety and helps the overall well being of your local community. Imagine brining sunshine into the life of an isolated elder or disabled adult. These visits provide much-needed friendship and support for those who may not have anyone else to depend on.

This handbook will cover topics like the history of this program, how the program works, helpful communication tips, and you will always learn what your role is as a volunteer. This handbook is for you to keep and you should review it when needed as there are extra tips for visiting depending on your assigned member’s situation and other things of that nature not fully discussed during your initial training session. There are also guidelines of what to do if certain situations arise and additional resources for programs and services for the elder and disabled population in RI that might be beneficial to tell your assigned member about.

This program provides veterans with a unique opportunity to continue the mission by supporting their fellow veterans.

Visiting Veterans Basics

Now we are going to discuss the program basics, the roles and responsibilities of volunteers, the people they typically visit in the community – also called members, and then the type of visits volunteers can provide to assigned members in this program.

When we normally visualize visiting someone we tend to think of dropping in to say hello to someone, catching up with friends and family on the latest news, or just finding out how someone has been doing.
The Neighborhood Friendly Visitor Program concept of visitation is much more full and rich than the concept of “dropping by” and implies that we are visiting that person to show concern and interest in them and their lives. Our Friendly Visitors make a difference in their assigned member’s quality of life and can positively affect their health. It can improve their morale, relieve depression and pain, overcome loss, enhance healing, and promote a sense of general well being.

Generally, adults 18 and over as well as children under 18 who are accompanied by a guardian or adult are all welcome to become Friendly Visitors. A child and parent volunteer team can also be a successful way for parents to instill the importance of giving back to their young ones while also spending quality family time together. Friendly Visitor volunteers can do a variety of activities with their assigned members depending on their shared interests. Some examples include: reading to them, helping them write letters, play cards or a games, share a snack, have some coffee or tea, give them a manicure, watch a television program with them, do crafts or knitting, garden, or just relax and chat.

In addition, we encourage group volunteers to team up with local nursing facilities to help facilitate a weekly or monthly activity with a group of seniors that is already running or to create a new activity for the seniors based on their talents or interests. For new groups we can try to aid them in the initial process of teaming up with a nursing facility, agreeing on times, activities, and other areas as needed. Some examples of group activity ideas include: a weekly news quiz based on what’s going on in current events (student’s have to make the questions and can be part of the assignment of a history class), providing a musical talent like a sing along, a singing performance, playing instruments, putting on skits and plays, knitting, gardening, providing manicures, playing board games or cards, playing bingo, doing crafts together, reading to them, be pen pals (which helps students practice writing), etc.

**Roles and Responsibilities of Visitors**

The major role and responsibility of a volunteer is to create a lasting, consistent, and positive relationship with their assigned member. These members are elder or disabled adults who are disconnected from the community and may have little to no social contact with people and have requested a visitor to bring some sunshine into their life. Remember having a regular visitor, whether face to face or over the phone, can mean the world to someone who is lonely or isolated. The visits you will provide will provide the much-needed friendship and support for those who may not have anyone else to depend on.
We stress that we want the relationship between visitor and member to be consistent because your member will look forward to your visit each week and you don’t want to let them down. Try to continue to visit even if you face boredom, discouragement, or rejection, remember you are visiting not to meet your own needs, but to make a positive difference to others.

Also it takes time for a friendship to bloom and for two people to become comfortable with each other so we prefer the same visitor stays with the same member for as long as possible and for at least one year. Many of these members have out lived the rest of their family or friends, or have family that lives to far away to visit regularly and we rather them not experience losing more people in their life.

Be open about your abilities and what that member can expect from you when it comes to visits. Make sure they understand when and how often you will be visiting them and make sure to keep up your end of the deal. Don’t get carried away and promise to do more with your assigned member than you can realistically do. Faithfulness to your word is especially important to those who usually have so little to look forward to.

If you are unable to keep your visit please call to notify your assigned member. They are waiting for you to arrive or call so respect their time. Also consider a phone visit in place of a in person visit if there is bad weather or you are feeling ill that day, just let your member know of the change as soon as possible.

It is also imperative that all friendly visitor volunteers and volunteer site coordinators maintain confidentiality and exercise privacy regarding sensitive information, about our agency, the elder and disabled adults we serve - including your assigned members, personnel, and other volunteers in the program. Confidentially can be broken if you are concerned that someone, including your assigned member, may harm themselves or someone else.

There are also some situations that may arise during the course of your volunteer visiting that would warrant you to notify your site coordinator with possible problems or concerns. We will quickly go over some of these possible situations that require volunteers to notify their site coordinator if encountered.

- You have a change in your contact information – Mailing address, phone number, email address, etc.
o You aren’t able to call or visit your assigned member that day and weren’t successful in notify/reaching them or rescheduling ahead of time. We want to make sure they are generally safe and okay and not experiencing a situation of concern, since they were unreachable.

o You need further information about local social services because you cannot answer a question for the member regarding assistance.

o You the volunteer wish to stop making calls or visits temporarily or permanently.

o Your assigned member does any of the following:

  ▪ Has an emergency or hospitalized for any length of stay

  ▪ Has a noticeable change in behavior or mentions behaviors that are cause for concern and you aren’t sure what to do.

  ▪ Has not been home at the agreed upon times to receive calls or visits and as a result has not been contacted.

  ▪ Is newly placed or moved to a different nursing home or assisted living facility.

  ▪ Your member changes their contact information – Address, phone number, etc.

  ▪ Your member wishes to stop receiving visits or calls.

  ▪ Your member becomes deceased.

One of the other very important responsibilities of each friendly visitor volunteer is to keep track of their service hours and efforts. Each volunteer needs to be accountable for keeping track of the number of visits/calls they conducted each month and the total time duration of each visit/call spent with their assigned members during that specific month.

The Neighborhood Friendly Visitor Program will provide you with a monthly volunteer hour log that each volunteer uses to track this information. After each visit, whether it’s in person or a phone visit, you need to mark down on the log – the date of the visit, who you visited, type of visit, and the length of time you visited for. It is easier to track your volunteer efforts after each visit when it’s fresh in your mind, instead of trying to remember everything you did at the end of the month. You will be given some copies of this
hour log today during the training and once you run out of those, you can obtain more copies from your site coordinator or by contacting Diocesan staff.

Then at the end of each month, you are responsible for getting a copy of that volunteer hour log to your site coordinator. The monthly log can be sent via mail, email, dropped off at their office, or whatever method is agreed upon by both you and the site coordinator. The site coordinator needs this important information in a timely and consistent manner each month because then they must compile all the volunteer hour logs from that site into a report sent to the Diocesan office.

We also expect all volunteers to participate in other ongoing trainings and meetings as deemed necessary by their site coordinator.

**The Importance of Friendly Visitors**

Unfortunately what many people don’t realize is that having social contact is a necessity for human beings. In general we crave friendships, we love talking to people, listening to people, being social, having a support system, people who care about you and that you care about too. Sadly so many elder or disabled adults living alone or in nursing facilities are missing those social interactions we all adore. For many of these people they have little to no family or friends or their family or friends may live out of state and can’t visit them as much as they would like to. Even in the nursing facilities many of the residents don’t have regular visitors and instead watch their neighbors or roommates getting visitors and talking to family or friends wishing they had someone coming specifically to see how they are or to keep them company for a bit.

Visiting an elder or disabled person can improve the person’s health and quality of life, and helps them feel respected and valued. It can improve morale, relieve depression and pain, overcome loss, enhance healing, and promote a sense of general well being. Having volunteers like you who can provide a regular visit can mean the world to these elders.

**Types of Possible Visits**

There are two types of visits that this program can provide for members; the first type we are going to discuss is known as face to face or in person visiting. This visiting is the kind people usually think of
when they imagine visiting someone. This type of visiting is impactful because the people you are visiting receive the socialization they crave and people tend to be visual creatures. When we can see the person we are talking to it helps with communication because we can see their facial expressions, body language, and notice if they are actively listening and focused on the conversation. Those visitors who will provide in person visits will get this visual advantage when foraging a bond and friendship with their member.

By spending time with someone in person in the natural habitat you can get a sense of things they might be interested in talking about by different things you can see in their home or room. Also it allows for some future visits to include other activities besides just conversation if you both have a shared interest. During visits you could read to your member, talk about a book you are both reading, play cards or board games, assist with bill paying or correspondence (if they ask you), share a snack, have some tea, knit, do crafts, watch a favorite show together, exercise, or lots of other fun things as long as both the volunteer and member agree to wanting to do it.

**Helpful Tips for In Person Visiting**

Below are some helpful tidbits of information that may help you during your time as a visitor and we encourage volunteers to review these provided tips as needed.

- When you visit someone homebound you should knock on their door, ring the doorbell, or if they have a hard time hearing that – call their phone to announce you have arrived. For a nursing facility you should knock on the assigned member’s room door or wall before entering and ask permission to enter. If the person is unable to respond, then announce yourself before walking in. In both situations you should always introduce yourself, name, and role/affiliation, unless the resident knows you by name or recognition.

  - Don’t ask your member something like “You remember my name, don’t you?” or “You know me” as this may put the member on the spot and could create stress or make them feel upset for not remembering. Your assigned member might have trouble utilizing short term memory, especially as they age, or might suffer from a form of Alzheimer’s Disease or dementia.
• Greetings between friends often involve some form of physical contact like shaking hands, hugging, or a touch on the arm or shoulder, but the visitor should take the cue from the member. This kind of physical contact tells someone that they are accepted and liked, and it would be appropriate to ask your member if you may give them a hug or hold their hand before you do so. In early visits, limit touching to what you would with any other recent acquaintance. As long as the gesture comes from mutual affection, and both people are fully comfortable with it than it is appropriate. Of course if the elder withdraws or expresses discomfort then you should not continue that gesture and is absolutely inappropriate in the future if it was discouraged by the member.

• Recognize that your assigned member is simply another human being like you. Treat them exactly as you want or expect to be treated by someone. Encourage them to share their talents, past or current interests, history, memories, and life experiences with you.

• Remember to be patient in visiting. Cultivating friendly, trusting relationships take time. Allow residents to get to know you while you are learning about them.

• Before bring a snack or beverage over to your member ask them if it is okay to do so and make sure you know their dietary restrictions and follow them accordingly. Some members may be allergic to certain things are diabetic, have high cholesterol, or other health related diets.

• Do not visit your friend if you are sick. Please be aware of transmitting germs from yourself to your member.

• If your assigned member seems to be too tired or too ill to want to chat on a particular visit, politely ask them if she or he is too tired for company right now. You can offer to sit quietly with them, read to them, or listen to soft music for the rest of the visit or if the member prefers leave and suggest a time for a follow up visit or call that week if possible. Even just calling them in the next day or two indicates to the member that you really care about them, their well being, and your friendship.

• As a reminder, don’t ever saying things to discourage your member from talking or to show disinterest during the visit. Examples are things like, “I don’t have a lot of time, so let’s get this over with.” Never make your member feel rushed or that visiting them is a big inconvenience to you or waste of time. That kind of behavior will have more of a negative effect on the member than simply not having any visit.
• Try not to use any distracting electronic devices during the visit with your member like a cell phone, laptop, hand held games, etc. If you are constantly checking your cell phone, the time, texting, checking social media or things of that nature during the visit you will seem rude and not interested in your member. Think about how you would feel if someone was doing those things while you were talking to them or telling them a story.

• Tell your member before you finish the visit when they may expect your next visit. Even if it’s just reminding them that you will be visiting them the next week at the same day and time. If you need to change the day or time make sure you both agree to the change for that visit.

• After you leave, write some reminder notes, and reflect on your visit. If you need to get information for your member then remember to get it for the next visit or you can make some tentative plans or topics for following visits.

• Also keep in mind that for homebound seniors often they are unable to keep their homes up in the same way they use to and can be embarrassed or sensitive about that. However, if you ever arrive to your member’s home and are seriously worried about that house’s cleanliness and therefore your member’s safety and/or health please contact your coordinator or Diocesan staff about the situation.

  **Tips for Visiting in a Nursing Facility**

• The first people you will meet at the nursing facility will probably be staff. Maintain a friendly and courteous attitude to all staff you encounter and remember that you might need their assistance in the future so try not to burn any bridges with them. If you maintain this relationship with staff they will come to see your visits as a blessing to your assigned member and to the facility as a whole.

• Ask your assigned member where they would like the visit to take place. Ask your assigned member where they would like to talk. Would they prefer their room or in a common area? Try to do whatever makes the member feel more comfortable.
• Do not transfer or pick up members from their bed to chair, a chair to bed, chair or bed to toilet or bedside commode. Instead you may assist in calling or getting a nurse or staff member to help the member with their desired move.

• Do not give food or drink to your assigned member without making sure it is suitable for them with a nurse or someone on staff. Some residents have allergies, diabetes, swallowing problems, or need liquids to be thickened before consuming.

• Avoid “tuning out” or quickly dismissing problem statements. If a resident says something like “They don’t treat me very well, but I’m managing to take it one day at a time.” Don’t respond with something like, “Well the staff here is very busy and have a lot of people to take care of so they can’t please everyone.” Don’t be quick to judge or assume that the facility/staff or your assigned member is wrong or right. Instead, ask an open ended question that allows and encourages the resident to tell you more about how they are being treated and to give examples if possible.

• Having a Friendly Visitor can also improve that member’s care in the facility. Facility staff are aware that the visitor sees how that resident is being treated and is concerned for the well being and welfare of that person.

**Phone Visits**

The second type of visit is a newer type of visiting called phone visits. Phone visits are similar to regular in person visits except they are done over the phone without having to go into that member’s home or nursing facility. The phone visits are made weekly and will be made by the same person in order to build that relationship and friendship. There are however two different types of phone visits that this program offers to members in need.

One is a socialization phone call which is basically the same as a in person visit where the member and volunteer chat on a consistent and predetermined time each week about their lives, share stories from their past, what’s going on in the community, each other’s well being, and their interests and hobbies. This is a great thing we can offer isolated elders and disabled adults in the community because often they are looking for the socialization and friendship but may be hesitant to have a visitor in person. They may be hesitant for in person visiting because they live alone and are afraid to have a stranger coming into their
home or because they aren’t able to keep up with cleaning or chores in their house and would be embarrassed to have someone come in the house if it’s not to their standards. Also once a friendly visitor and member have been doing phone visits for a while they might then feel comfortable and want to meet in person to chat or do a shared hobby or activity.

The other type of phone visits is called a Well Being Check. This type of call is not primarily for socialization like most of the other types of visits are. This is a member or family of a member who is requesting for a volunteer to check up on them in order to make sure they are doing okay. This type of call tends to be briefer and allows the isolated adult to know that someone is looking out for them and they are not alone if a problem was to arise. This call could happen once a week or more frequently depending on the member’s preferences and the availability of friendly visitors. It is preferred that the visitor be the same consistent person but if need be can be more than one person.

When the friendly visitor calls they will ask questions to see how the person is doing and if they have any problems or concerns at the time. These friendly visitors can then refer to their handbook for resources if a situation arises and additional help is needed. There will also be a protocol if the member doesn’t answer at the scheduled time that your site coordinator will instruct you on if you do this type of visiting. Also this visitor will be provided with the member’s emergency contact information so they can alert that person if a situation occurs.

**The Art of Conversation**

The first few visits can be especially awkward if you or the member (or both) feel shy. One way to start a conversation in person is to identify the member’s personal item in the room and comment on it. The photo, knick-knack, or stuffed animal will almost always prove to have some special meaning to the owner or story to go with it. Also for both visiting types, your site coordinator will supply you with a copy of the member’s enrollment form that provides some information on hobbies and interests that you could use to spark conversation topics with as well.

Some of the things we will discuss are common sense and are things you probably already do with other people in your life like family and friends. However a refresher of these tips can never hurt.

1. Avoid why questions along with trying to force the topic for conversation
2. Allow the speaker to finish without interruption

3. Avoid preaching, criticizing, blaming, or arguing. Remind yourself that you are NOT there to judge or push your points of view on to your member. Be open-minded and respectful of that person, their feelings, ideals, thoughts and past experiences.

4. Avoid making promises you cannot keep.

5. Never give financial, business, or legal advice to your member.

6. Never administer medication or provide physical care to your member.

7. Do not give out any personal information like your phone number, address, etc if you don’t feel comfortable doing so. This is at the discretion of each volunteer but we don’t recommend it.

8. Be careful not to probe to deeply on the first few visits, there might be sensitive areas that you should avoid discussing until you both know each other better.

9. Do not feel discouraged if you feel the relationship is not the right match, especially at first. All relationships take time to build and grow in comfort and trust.

Remember if your assigned member does a majority of the talking it’s not a problem and don’t worry about it. Your member may just be a talkative person by nature and could receive great satisfaction from having a visitor who is a great listener. Reminiscing enables your member to feel grounded in and celebrate their life. Your big gift to this kind of person is to be the audience.

On the other hand, what do you do if your elder needs encouragement to talk? Well an effective technique is to ask open-ended questions that can’t be answered by a simple yes or no. It’s important to be patient and wait until your member answers completely before moving the conversation forward with more questions. Elder or disabled adults often need a little extra time mid-sentence to pause and consider what they will say next.

If the elder remains quiet longer than you find comfortable then feel free to ask a question to get things going again or you could offer up a story from your life or a new or exciting development in your life or family. Don’t be afraid to share yourself – your hopes, interests, hobbies, past, family life, work life, etc.
Often times your member will be excited to hear stories about you and your life and those stories might prompt them to ask more questions, comment, or share a similar story.

There are many different types of conversation starters you can use with your assigned member to get some flow of talking going. I’ll briefly mention some now but they will also be listed in your handbook, which you can have with you while you’re visiting to jog your memory of topics.

Topic ideas you can try include talking about:

**Surroundings**

- If you are visiting in person, like previously stated you can make conversation from things you see in their room or house environment. You could comment on cards or pictures that are displayed, plants they have, furniture, view outside their window, television program they were watching, music they are listening too, color or décor of the surroundings, or their clothing.

- If the person is residing in a nursing facility you could talk or ask them about the food, nurses, if they get any visitors, any friends or roommates they might have, the activities in the facility that they participate in, etc. Although these topics may provide an excuse for the member to vent their complaints, it could be an important opportunity in getting to know that person and showing your concern for them.

**Their Family / Their Past**

- Where did they grow up, what was their family like, how many siblings did they have, favorite family past times, places they have traveled to, what school was like for them, different places they lived, what is was like back when they were growing up, their parent’s jobs, jobs they had in the past, etc.

- Present relationships if they have them, are they or were they married, if married how long, what was their spouse like or what did he do for work, if they have children you can ask about them and their lives, where their children live now, what their children do now, does anyone in their family visit them, and if they have grandchildren you can certainly ask about them as well.
General

- Weather, current events, news locally or nationally, how their week was, things they have been doing, if anything is going on in the week to come, church happenings in the past or upcoming if you belong to the same religious group or parish, pets, hobbies, interests, what they like to watch on TV, the type of music they enjoy, the food they like, likes and dislikes, etc.

But don’t feel that you always need to have a constant stream of chatter in order for the visit to be successful. Sometimes simply sitting quietly with your member and being there is enough to make them happy that day.

Non-Verbal Communication

Non-Verbal communication involves the sending of messages without the use of words and often conveys our feelings and attitudes. Though many of us may know about this type of communication, awareness of non-verbal cues is necessary to assure that a mixed message is not sent, a contradiction between the verbal and non-verbal message.

Facial Expressions

- Our faces portray a wide range of emotions and reactions, such as caring, disgust, inattention, or doubt.
- Facial expressions can be used to show that we understand or are in agreement like smiling or nodding while listening.
- The look on our faces can show we do not understand and need clarification (a quizzical look, eyebrow tightened, or head cocked).

Eye Contact

- Establishing eye contact indicates an interest in what someone is communicating.
- Looking away signals a desire to avoid contact
- Eye contact should be spontaneous, where the listener looks at the speaker but also lets the eye drift occasionally.
Active Listening

Listening helps you understand your member better and let the person know you are understanding what they are saying. Accept what your member is saying as a valid expression of thoughts AND feelings.

Successful Strategies Active Listeners Use

- **Decode**: Test your understanding of the emotional content of the person’s message. For example: Your assigned member at the nursing facility says “I don’t want my dinner.” One way you could respond to that statement is by saying something like, “It sounds as if you’re not happy with the food here,” or “Are they serving something you dislike tonight?” Also genuine sympathy can allow for good communication to occur. A mutual friendship can grow naturally out of a sympathetic relationship.

- **Provide Feedback**: Make statements that confirm that you are listening and encourage the speaker to go on. Some usual phrases are: “You seem really____” and then insert a feeling like happy, sad, upset, disappointed, etc. Or “If I understand what you’re saying____” and then reword their sentence back to them in hopes of clarification.

- **Acknowledge Information**: Do this by giving verbal, non-committal responses to a resident’s message. These responses convey the idea that you are listening. Such expressions as “Oh,” “I see,” “Uh huh,” “Really?” or “Interesting!” let the elder know that you are tuned in, but offer no content, judgment, or evaluation of your own to their statement. You can also do this with comfortable eye content, smiling, and nodding your quietly nodding your head while they speak showing you understand what they are talking about. This allows the member to proceed with their story or topic of discussion but let’s them know you are attentively listening.

- **Open Doors**: This strategy is using verbal responses as invitations for the member to say more. Response like: “I’d like to hear about that.” “Would you like to talk about it?” “Sounds like you have some ideas and feelings about this.” are all door openers to conversations. These phrases reinforce the message to your member that you want to hear what they have to say.

Tips for Your First Visit
Don’t be worried! Your first visit will be a great experience and your assigned member will be just so excited to meet you and have a visitor that you really can’t do much to screw up their joy during that visit. Your site coordinator will inform the member of your first visit, the time/date, your name, and that you will be wearing a name badge from our program. You should start the visit by introducing yourself and starting a light, friendly conversation. Tell the person a little about yourself – your name, relationship to this program or parish if you are connected to the same one, and other basic information about yourself. You can also mention your purpose for visiting and why you wanted to volunteer to visit people. Your site coordinator will also provide you with the same basic details about them, so once you introduce yourself you’ll still have plenty to talk about!

Keep in mind that if you are going to visit a member who is homebound a site coordinator will go with you on your first visit to ensure that both parties are comfortable and safe.

If you are going to visit a member in a nursing facility, you will first check in at the nursing facility reception desk and introduce yourself to them and other staff at the nursing home that you may run into. Find out on that first visit the rules of the nursing facility has for visitors and make sure to follow them every time you visit.

Other things you want to consider before going to your first visit and even visits later on:

- Do I have the materials I need and want to bring?
  - Your NFVP Name Tag Badge, NFVP Handbook, DEA manual, Address of the visit and directions, cell phone, eyeglasses, writing materials, or whatever you might need for a planned activity like a book, musical instrument, game, knitting gear, puzzle, etc.
  - If providing phone calls is your phone charged, is your phone loud enough for you to hear well are you in a quiet area without distractions, and do you have the information and phone number you need to conduct the visit.

- Think about how do I look or sound? How do I feel?
  - We suggest dressing casually but not too casually that it’s inappropriate. Think of what you would wear if you were visiting your parent or grandparent.
- What mood are you in? Are you cheerful? Would someone want to talk to me in my current mood?

- How is your breath? Hearing deteriorates with age so you will probably have to be close to your member when speaking and therefore nice breath is appreciated.

**Following Visits**

You might want to reflect on how the last visit went, recall what you spoke about and any follow up discussion you wanted to have, look over any notes you may have take during or after the visit. Follow the same basic procedure as you did in the first visit, but note the following:

- If a site coordinator accompanied you on the first visit they will not be accompanying you anymore.

- Be ready for any changes that may have occurred - new roommate, death of a friend, good or bad news, change of mood, and so on. Adapt the response you thought would be right to fit the new situation. Don't hold to a rigid agenda, but be flexible.

- Enter again with an introduction that assumes neither too little nor too much recognition. Give gracious clues to your identity as needed. Stimulating people to remember provides good mental exercise and helps establish a proper sequence and time-consciousness, but if they can't recall don't push too hard.

- Try to undo any misunderstanding that may have arisen from the first visit. And plan not to repeat your early mistakes. Did you monopolize the conversation? Be prepared to listen more. Were you too informal with someone from a more formal background? Be more adaptable and apologize if it's appropriate.

- Remember, since your member has very limited social contact; make every visit count. Be there for the person and give each visit your full love and attention.

- As before, don't leave false expectations about what you can or might do, or when you might visit again.
The following suggestions are also offered as tips:

- Continue to move the friendship forward and avoid dwelling on the past that can't be changed. Concentrate on learning from mistakes and improving attitudes and behavior.

- Seek other ways besides conversation to be involved in their lives and to involve them in your life. Consider their needs and plan constructively and creatively to meet these needs. This may mean writing letters for them, bringing an activity to do during the visit, arranging transportation to a church service or community activity - the possibilities are endless. What would they like to do? What are they able to do with help?

**Elder Abuse**

Although most volunteers will not encounter any situations regarding elder abuse while they are visiting their members it is very important that every single volunteer is trained on this topic. Every friendly visitor should be aware of what elder abuse is and what you should do if you have a concern that your member is experiencing any form of elder abuse.

Elder abuse is a violation of State and Federal law for any person, including facility staff at a nursing facility, volunteers, visitors, family members or guardians, other nursing facility residents, volunteers, visitors, to neglect or abuse an elder or disabled person. Abuse means causing intentional pain or harm and includes physical, mental, verbal, psychological/emotional, sexual abuse, corporal punishment, unreasonable seclusion, intimidation, or financial abuse of their monetary funds. Neglect is the failure to care for a person in a manner, which would avoid harm and pain, or the failure to react to a situation which may be harmful.

As you volunteer you might become aware that your assigned member has been abused or is neglected and it is important to report that right away. Also if your assigned member tells you they are experiencing any form or abuse or neglect it is important to take that allegation seriously and report it immediately. Anyone can and should report neglect or abuse to RI Division of Elder Affairs Elder Protective Services 24/7 Hotline 401-462-0555 and can do so anonymously if you wish.

Even if you aren’t completely sure and just have suspicions or care concerned your member is experiencing abuse or neglect you should report. The agency you report to will look into the case more at
depth and determine if abuse or neglect is happening and assist the elder or disabled adult become safe. In RI it is a mandated requirement that elder abuse is reported, even if you are not a family member, friend, professional, or volunteer. It is everyone’s job in the community to keep our elder population safe.

You can and should call your Site Coordinator or Diocesan Staff Contact (listed in the resource section of this guide) if you have a concern about your member and they can help you through the reporting process as well.

**Visiting Members with Impairments**

Below you will find some suggestions you may find helpful if you are visiting a member with an impairment or disability. Utilizing the suggested tips may make your member more comfortable when you visit them and could improve the quality of your visits.

**Members with Impaired Vision**

- Ask if your friend would like you to describe things to them such as the weather, objects, or their surroundings when you talk about them.

- Try to explain what you are doing as you are doing it so your member is not confused or suspicious when hearing noises. Some examples are: I’m writing this down so I don’t forget it later, I’m looking for something in my purse, or I’m putting my coat on the chair.

- It may be helpful to allow them to use your arm for guidance if you are moving from one area or room to another.

- You should leave objects in their residence where they are, unless your member asks you to move something, as moving an object can cause the vision impaired member to have trouble finding it later.

**Members with Hearing Impairments**

- Try your hardest to speak slowly, at a moderate rate and refrain from shouting. Use a slower rate for topic change or complex information.

- Face your friend so they can see your lips and try to annunciate well for those who read lips.
• If your assigned member uses a hearing aid, make sure it is on and working.

• Sit on the side of this person’s “good” ear if this is the situation.

• If the person you visit is totally deaf, consider writing or signing as alternatives to verbal communication. It is usually best with the totally deaf to stand facing them so they can see your facial expressions and read your lips.

**Members with Physically Impairments or Suffered from a Stroke**

• Some members could suffer from paralysis which affects one side of their body. If this is the case it is more sensible to sit on your friend’s “good side” since vision and hearing may be better on that side.

• If your member struggles from speech difficulty, be patient and let your friend eventually get their words out. To make it easier on them you could ask “yes or “no” questions and provide choices for your member.

• If they have trouble walking or need a device like a cane, walker, or wheelchair make sure they have what they need with them if you plan to move or walk somewhere. Allow them ample time to slowly and safely get where you are going, you can nicely ask them if they would like assistance but don’t force your help onto someone who may not want it.

**Members with Memory Loss, Alzheimer’s Disease or Dementia**

Great sensitivity is required for visiting someone who may suffer from memory loss, Alzheimer’s Disease or Dementia.

• Remember to restate your name and purpose for the visit at every meeting and try to approach them from the front so they aren’t surprised by your presence.

• Avoid visiting in a setting with a lot of sensory stimulation, like a big room where many people are sitting and talking, or a noisy area, as that could hinder your member’s ability to engage in conversation.

• Be respectful of their personal space and minimize hand movements that might distract them.
• The visitor should try to join the person where they are. Usually a person with memory loss, Alzheimer’s disease, or Dementia will talk about seemingly unrelated realities, often about events in the distant past. These events can be even more real to them than your presence. As best you can, step into the scene as they present it to you. Ask questions about the situation being described. Keep your stance in "present reality" and give counsel into the situation as if it were indeed a present happening. Don’t contradict or agree with them because this could lead to a very negative action like yelling, crying, or striking out in confusion. Often some sort of bitterness, resentment, hostility or hurt is keeping the individual tied to the past. Be sensitive to the limited understanding and comprehension that this person has of what’s really happening at that moment.

• Visitors can attempt to talk about their past. The member’s short-term memory may be affected, but they can often talk about what happened in the past with logic and enthusiasm. Recall with that person something that was meaningful to them in the past.

• Often members who have memory loss or early stages of Alzheimer’s Disease or Dementia may repeat what she or he says, typically asking the same question again and again, or repeating a phrase or single thought with no recognition they just said it. In this situation, help your member feel comfortable by giving them simple uncomplicated responses or encourage conversation on a different topic.

In general though, genuine love and concern communicate more loudly than words. So don’t be worried to visit with a member who may have one of conditions, to the member they aren’t going to care so much about the exact conversation you are having with them. They just want someone to spend time with them that cares about them and makes them feel special and important.

**Frequently Asked Questions**

**Q:** What is a good way to respond if your member shares very personal feelings of painful memories or other personal feelings with you?

**A:** If your member shares intimate matters, very personal feelings, or painful memories it means you have gained that person’s trust and are being treated as a very close friend. Therefore try to listen attentively and if you sense that they are seeking a response, use only a few words that validate their experience or emotional state. Something like: “That must have been so difficult,” or “You must be very...
strong to have lived through that.” Sometimes people need to talk about something or share an experience they went through to feel free from the painful feelings or to let go of those memories.

Q: What if my member is or becomes very sick or hospitalized, should I still visit them?

A: If a member is seriously ill or hospitalized they are most likely to be on bed rest but might appreciate visits to pass the time. However, do not overtax them; check with the nurses on their condition. Do not stay too long, or demand much conversation or participation on their part. They may be too weak or in too much pain to communicate verbally. Be alert to their eye and body language communication. A gentle touch, a few words, and just knowing you cared enough to visit them during their hardship, may be all they need during that visit. Words of comfort and assurance and a brief prayer (if from your religious group or if the member requests it and volunteer is comfortable doing so) are often quite appropriate.

Q: Does the Neighborhood Friendly Visitor Program supply insurance coverage or liability insurance to their volunteers?

A: No, the Diocese of Providence’s Neighborhood Friendly Visitor Program and the Catholic Charities Volunteer Service Corps do NOT supply any form of insurance coverage or liability insurance to any of our volunteers, visitors, or members. That is why we let our volunteers know up front that anything they do with their member is at their own risk. We don’t encourage or expect volunteers to provide their member with rides, transportation, food, or to go with them into public or private places besides the member’s residency, since we don’t have any coverage for them. Part of the volunteer application and enrollment forms state this lack of coverage and volunteers acknowledge that they are acting at their own risk. If something did happen during the visit the volunteer could be legally and financially responsible for the liability of themselves and their member.

However, if the friendly visitor volunteer and their assigned member both feel comfortable to do something like giving the member a ride to the grocery store or doctor’s office they may do so at their own risk. We let the members know right away that these visits are merely for socialization and friendship and not to except anything other than that from their visitor. As the relationship grows with their member, over time some volunteers don’t mind assuming the responsibility of driving their member to pick up a prescription, taking them to a religious service or event, or taking a walk with them in their neighborhood, and that is fine if both visitor and member agree to it.
Q: Is there or can there be a spiritual component to visits with your member? Also what if the member I’m visiting is from a different religious denomination or has different religious beliefs than I do?

A: Yes, there can be a spiritual component to visits if the member requests those kind of activities or wants to pray together (especially if they are from your same parish or religious group) and the visitor/volunteer is comfortable doing so. Sometimes people like to incorporate some prayer or spiritual discussion into the visit and as long as it is mutually agreed upon by both parities it is perfectly fine.

However don’t feel the need to agree to a spiritual component if you don’t feel comfortable doing so. In the same token, keep in mind, that visitors shouldn’t be talking about spiritual stuff or praying with their member if it is not requested by the member, the member is uncomfortable with it, asks you to stop, and/or doesn’t share the same spiritual beliefs as you. Remember that genuine faith or spirituality can be expressed in a variety of ways; do not be judgmental of those who simply have chosen a different form of expression. It is best not to enter into discussion of controversial or religious matters. For those that have different religious beliefs than you or have no beliefs treat them with respect, be open minded, and do not push any of your religious beliefs unto them.

Q: In your experience what is a good way to avoid ending a visit with your member in a way that doesn’t feel like you are abandoning them or don’t want to talk anymore?

A: To avoid the first visit ending in a way that makes the member feel like you are abandoning them, your assigned member will be told by your site coordinator before or during the first visit the expected length of weekly visit. But the best way for you minimize the disappointment your member might feel on subsequent visits is to prepare them for your departure. Let them know when you arrive or first call how long you can visit that day and what time you will leave. If you can about 10 or 15 minutes before your departure time, say something to the member that alerts them that you will be leaving soon. At this time you should also try to plan or remind them of the next visit and state how much you are looking forward to visiting again.

**The Role of a Site Coordinator**

The role of Site Coordinator is one of great responsibility. They act as the primary liaison between volunteer visitors and the Diocesan staff in order to maintain this program within their own local
community site. Site Coordinators are volunteers as well, however, their responsibilities are more administrative and managerial and they commit to this position for at least 2 years.

Each Site Coordinator attends and holds training sessions, meetings and workshops, and is always looking for ways to improve their local site. They provide on-going recruitment, matching, and training throughout the year, and are ultimately the ones who usually pair each volunteer with each of their assigned members. Whether it’s visiting someone who is homebound, in a nursing facility, or over the phone, the Site Coordinator will help you figure out the best fit for you and match you with a member they think you could bond with.

Thus a Site Coordinator makes the effort to try to get to know their local community, and every visitor and every member in their site. This program depends on local Site Coordinators, they are the ones in their community who knows people who want visitors and have the local connections to recruit volunteers who live close enough to visit those members. Site Coordinators assist the Diocesan staff a lot by keeping up to date with their local community’s needs, by keeping record of all volunteer applications, enrolled member’s information, and compiles all the visitors monthly hour logs in their site into quarterly statistics and reports sent to Diocesan staff.

Each Friendly Visitor should establish a relationship with their Site Coordinator. If they schedule meetings, call you, or send you mail, please be as timely as possible in responding to them. More than likely they will be trying to relay some new information of services and programs in the community helpful to you or your members. Also each visitor volunteer is responsible for completing and delivering their visitors monthly hour log to their Site Coordinator on time each month.

**Closing Remarks**

Thank you for your time and attention during the video portion of this training, the facilitator at this session will now take over the rest of the volunteer training. I want to thank you again for making the commitment to become a Neighborhood Friendly Visitor and thank you in advance for the visits you are going to provide to those in your local communities who need them most. On behalf of all the Neighborhood Friendly Visitor Diocesan staff, current Site Coordinators, and community members who will be receiving visits from you
But before we finish – on behalf of all the Neighborhood Friendly Visitor Diocesan staff, current Site Coordinators, and community members who will be receiving visits from you - we want to welcome you to the Neighborhood Friendly Visitor Program family and we hope you are prepared to make a wonderful new friend with an isolated adult in your community.

**NFVP Resources**

**Assigned Site Contact Info**

Your Assigned Site/Parish:
Site Address:
Site Coordinator:
    Phone:
    E-Mail:
    FAX:
    Other:

**Diocesan Staff Contact Info**

Elder Outreach Coordinator: Linda A’Vant-Deishinni
    Phone: (401) 421-7833 ext. 228
    E-Mail: LDDeishinni@dioceseofprovidence.org
    FAX: (401) 453-6135

Main Office Building: Diocese of Providence
One Cathedral Square  
Providence, RI 02903  

Website: www.catholicservicesofri.org  
(Neighborhood Friendly Visitor Program and Visiting Veterans Corps information is under the Elder Services Section)  

**Additional Community Resources**  

The following information is provided to inform you of services and programs available to elder and disabled adults in Rhode Island. You may want to discuss with your Site Coordinator or Diocesan Staff before referring your member to any service or program. You can also just contact either your Site Coordinator or Diocesan Staff about assistance your member may need as they may be able to point you in the right direction of services.  

**United Way of Rhode Island (211 Hotline):** Statewide information and referral center.  
Info: The 211 hotline is free and open 24 hours a day, 7 days a week. When calling 211 one of their representatives will answer and tell them what kind of help or assistance you are looking for and they will give you information on how to reach programs and services that might help. They provide information about a variety of programs like food assistance programs (meals and pantries), housing assistance, utility assistance, public transportation, health care, SNAP, and much more.  
Phone: Reach them by dialing - 211  
Website: www.211ri.org  
Address: 50 Valley Street, Providence, RI 02909  

**The POINT:** Rhode Island’s aging and disability information and referral center.  
Info: Similar to United Way 211 but with information and resources geared to the elder and disabled adult population, their families, and their caregivers.  
Phone: (401) 462-4444  
Website: www.ThePointRI.org  
Address: 50 Valley Street, Providence, RI 02909  

**RI Division of Elderly Affairs (DEA)**  
Info: Responsible for the development of community-based services and programs that encourage independence and preserve the dignity of seniors and adults with disabilities.
Elder Abuse Referrals
Info: RI law requires any person who has reasonable cause to believe that a senior has been abused, or is being neglected to report it to DEA. Failure to report abuse of a person 60 or older can result in a fine of up to $1000. Reports may be made anonymously 24/7. Abuse may be physical, emotional, sexual, financial exploitation or abandonment and may be committed by a family member, caregiver or person with duty of care, friend, nursing facility staff, stranger, or volunteer.
Phone: (401) 462-0555

Home and Community Care Programs
Info: Provides eligible seniors with innovative options to help them remain in the community and avoid premature institutionalization. Based on eligibility, services provided may include home health aide services, adult day services, personal emergency alert systems, Meals on Wheels, a Senior Companion, minor home modifications, or minor assistive devices.
Phone: (401) 462-0570

Senior Companion Program
Info: This program consists of volunteers who are 60 and over who help isolated older adults in their own homes or senior apartments with companionship, light housekeeping, and sometimes transportation.
Phone: (401) 462-0569

Nursing Home Ombudsman Program:
Alliance for Better Long-Term Care
Info: Call them to report problems nursing home or assisted living residents are experiencing. Also provides information and counseling to seniors and family members on choosing an appropriate facility.
Phone: (401) 785-3340
Website: www.eldercareri.alliancebltc.com

Community Resources
RI Department of Human Services (DHS)

Info: SNAP (Supplemental Nutrition Assistance Program), Medicaid,
Main Line: (401) 462-5300
Website: www.dhs.ri.gov

Office Locations:

Providence Regional Family Center
Phone: (401) 415-8200
Serves: Providence, Cranston, Johnston, Scituate
Address: 206 Elmwood Avenue, Providence
FAX: (401) 415-8349

Newport Regional Family Center
Phone: (401) 851-2100
Serves: Jamestown, Little Compton, Middletown, Newport, Portsmouth, Tiverton
Address: 272 Valley Road Suite 1, Middletown
FAX: (401) 851-2105

Pawtucket
Phone: (401) 721-6600
Serves: Barrington, Bristol, Central Falls, East Providence, Pawtucket, Warren
Address: 24 Commerce Street, Pawtucket
FAX: (401) 721-6659

South County Regional Family Center (Stedman Center)
Phone: (401) 782-4300
Serves: Charlestown, Coventry, East Greenwich, Exeter, Hopkinton, Narragansett, New Shoreham, North Kingstown, Richmond, South Kingstown, West Greenwich, Westerly
Address: 4808 Tower Hill Road, Wakefield
FAX: (401) 782-4316

Warwick
Phone: (401) 736-1400
Serves: Warwick, West Warwick
Address: 195 Buttonwoods Avenue, Warwick  
FAX: (401) 736-1442 or (401) 736-1443

Woonsocket  
Phone: (401) 235-6200  
Serves: Burrillville, Cumberland, Foster, Glocester, Lincoln, North Providence, North Smithfield, Smithfield, Woonsocket  
Address: 450 Clinton Street, Woonsocket  
FAX: (401) 235-6237

**Case Management Agencies that Assist Elders**

Info: Assists older RI residents who wish to remain at home for as long as possible. Person must be 60 or older, homebound, frail or disabled, and unable to remain at home without supportive care to qualify for help. A case manager will assess the client’s needs and develop a plan of care which includes options for community based services and helps secure the needed services, monitors the care plan, and offers training and support for family caregivers.

**Child & Family Services of Newport County**

Phone: (401) 848-4185  
Serves: Little Compton, Newport, Middletown, Portsmouth, Tiverton  
Website: www.cfsnewport.org  
Address: 31 John Clarke Rd. Middletown

**East Bay Community Action**

Phone: (401) 437-1000  
Serves: Barrington, Central Falls, East Providence, Bristol, Warren  
Website: www.ebcap.org  
Address: 100 Bullocks Point Ave. East Providence

**Tri-Town Southern RI**

Phone: (401) 789-3016  
Serves: Block Island, Charlestown, Coventry, Jamestown, South Kingstown, North Kingstown, Wakefield, Hopkinton, Richmond, Westerly, Exeter, Narragansett, Saunderstown  
Website: www.tri-town.org
Address: 1935 Kingstown Rd. Wakefield (South County CAP Building)

Tri-Town Northern RI
Phone: (401) 349-5760
Serves: Providence, North Providence, Cranston, Cumberland, Johnston, Lincoln, Burrillville, Glocester, Foster, North Smithfield, Smithfield, Woonsocket
Website: www.tri-town.org
Address: 1126 Hartford Ave. Johnston

Westbay Community Action
Phone: (401) 732-4660
Serves: Warwick, West Warwick, East Greenwich, East Greenwich
Website: www.westbaycap.org
Address: 224 Buttonwoods Ave. Warwick

Community Action Programs (CAPs)
Info: Local social service agencies with programs that include counseling, basic needs assistance, heating assistance, rental assistance, health services, weatherization programs (boiler repairs, window replacement, energy efficiency audits, minor home repairs, insulation), food assistance, furniture bank referrals, clothing vouchers, and other services based on location.

Locations:

Providence Community Action (PROCAP)
Main Phone: (401) 273-2000
Elder Services Phone: (401) 437-8054
Serves: Providence, Johnston, Scituate
LIHEAP Serves: Providence
Website: www.procapri.org
Address: 518 Hartford Ave. Providence

Aquidneck Island & East Bay: East Bay CAP
East Bay Phone: (401) 437-1000
Aquidneck Island Phone: (401) 847-7821
LIHEAP Phone: (401) 437-5102
Serves: East Providence, Jamestown, Little Compton, Middletown, Newport, Portsmouth, Tiverton
LIHEAP Serves: Bristol, East Providence, Jamestown, Little Compton, Barrington, Middletown, Newport, Portsmouth, Tiverton, Warren
Website: www.ecicap.org
East Bay Address: 100 Bullocks Point Ave. Riverside
Aquidneck Island Address: 31 John Clarke Rd. Middletown

Blackstone Valley: Blackstone Valley CAP (BVCAP)
Phone: (401) 723-4520
LIHEAP Phone: (401) 723-0227
Serves: Barrington, Bristol, Central Falls, East Providence, Pawtucket, Warren
LIHEAP Serves: Woonsocket, North Smithfield, Pawtucket, Lincoln, Cumberland, Central Falls
Website: www.bvcap.org
Address: 32 Goff Ave. Pawtucket

Cranston: Comprehensive CAP
Phone: (401) 467-9610
Serves: Barrington, Bristol, Central Falls, East Providence, Pawtucket, Warren
LIHEAP Serves: Cranston, Scituate, Foster
Website: www.comcap.org
Address: 311 Doric Ave. Cranston

South County CAP
Phone: (401) 789-3016
Serves: Charlestown, Coventry, East Greenwich, Exeter, Hopkinton, Narragansett, New Shoreham, North Kingstown, Richmond, South Kingstown, West Greenwich, Westerly
Website: www.sccainc.org
Address: 1935 Kingstown Rd. Peace Dale

Kent County: Westbay CAP
Phone: (401) 732-4660
Serves: Warwick, West Warwick, Coventry, East Greenwich
Website: www.westbaycap.org
Address: 224 Buttonwoods Ave. Warwick

Northwest: Tri-Town CAP
Phone: (401) 351-2750
Serves: Smithfield, Burrillville, Glocester, Chepachet, North Providence, Johnston
Website: www.tri-town.org
Address: 1126 Hartford Ave. Johnston

Woonsocket: Family Resources Community Action Program
Phone: (401) 766-0900
Serves: Woonsocket and North Smithfield
NO LIHEAP
Website: www.famresri.org
Address: 245 Main St. Woonsocket

Social Security Administration
Info: Primary source of information for Social Security, SSI, SSDI, and Medicare enrollment.
Website: www.ssa.gov

Locations:

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<thead>
<tr>
<th>Location</th>
<th>Phone</th>
<th>Address</th>
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<tbody>
<tr>
<td>Newport</td>
<td>(866) 253-5607</td>
<td>130 Bellevue Avenue, Newport</td>
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<tr>
<td>Providence</td>
<td>(877) 402-0808</td>
<td>380 Westminster Street, Room 318</td>
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<tr>
<td>Pawtucket</td>
<td>(866) 931-7079</td>
<td>4 Pleasant Street</td>
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<tr>
<td>Warwick</td>
<td>(866) 964-2038</td>
<td>30 Quaker Lane, First Floor</td>
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<tr>
<td>Woonsocket</td>
<td>(877) 229-3542</td>
<td>2168 Diamond Hill Road</td>
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Transportation
RI Public Transit Authority (RIPTA)
Info: Low income people with a disability or age 65 and above who qualify may ride free of charge with a RIPTA No Fare ID Pass. The person must apply for this special card with RIPTA and have it with them to ride for free or will be charged normal rates. They also offer bus passes at discounted fares. Residents 65 or older can pay $17.50 for a five year bus pass and qualified riders who have a disability can pay $10 for a five year bus pass.
Phone: (401) 784-9500
Website: www.ripta.com
Address: 705 Elmwood Avenue, Providence, RI 02907

Ride Program (RIPTA)
Info: Provides transportation services to individuals who are 60 years of age and older and for adults with disabilities under 60 who meet certain criteria. Generally available weekdays from 10 am to 2 pm for doctors’ appointments, therapy, medical tests, adult day care, kidney dialysis, cancer treatments and congregate meal sites for lunches. There is a small fee per ride, but those with Medicaid or adult day service clients are not charged any fees. Reservation call should be made at least 7 business days in advance of an appointment.
Phone: (401) 461-9760
Website: www.ripta.com

Cities and Towns - Senior Transportation
Info: Some communities offer senior transportation for non-medical destinations, such as the grocery store. Call your local senior center to inquire about non-medical transportation.

Southern Rhode Island Volunteers
Info: A South County volunteer organization that can provide transportation to elder or disabled adults to medical, dental, and therapy appointments, among other services.
Phone: (401) 789-2362
Website: www.southernrivol.org
Address: 25 St. Dominic Road, Wakefield, RI 02879

Food Assistance

Supplemental Nutrition Assistance Program (SNAP)
Info: Can help low income individuals and families who are struggling financially to purchase food. Call a local Department of Human Services (DHS) office for information or assistance in applying or people can apply online too. Seniors may request a home interview.
Website: www.foodstamps.ri.gov

Meals on Wheels
Info: Provides delivery of a hot, nutritious noontime meal to frail, homebound seniors five days per week. To qualify, seniors must be 60 years or older, live alone and have no one to help them, and be unable to shop, cook, or drive. Persons with a disability who are under 60 may be eligible in certain circumstances.
Phone: (401) 351-6700
Website: www.rimeals.org
Address: 70 Bath Street, Providence, RI 02908

RI Food Bank
Info: Has information on food pantries and other resources for getting food for those in need. Also can call The POINT or 211 to get a list of food pantries and meal sites in your local area.
Phone: (401) 942-6325
Website: www.tifoodbank.org

Heating Assistance

Low-Income Home Energy Assistance Program (LIHEAP)
Info: Provides assistance to low income eligible customers in meeting the costs of heating their homes with oil, gas, or electric.
Office Locations: Contact Local CAP agency (listed above)

The Diocese of Providence Keep the Heat On Fund
Info: Provides heating assistance in emergency situations. Person must have little to no oil left in their tank or have a termination notice or be terminated for gas or electric heat.
Website: www.heatri.com

Office Locations:

Providence
Phone: (401) 421-7833 x 207
Serves: Providence, Johnston, Cranston, Foster, Scituate, East Providence, Barrington, Warren, Bristol, Tiverton, Little Compton, Portsmouth, Middletown, Newport, Jamestown, North Providence

Project Hope/Proyecto Esperanza
Phone: (401) 728-0515
Serves: Pawtucket, Central Falls, Lincoln, Cumberland,
Address: 474 Broadway, Pawtucket, RI 02860

West Warwick
Phone: (401) 823-6211
Serves: West Warwick, Warwick, Coventry, East Greenwich, West Greenwich
Address: 145 Washington Street, West Warwick, RI 02893 (West Warwick Senior Center/ Rear Entrance)

Woonsocket
Phone: (401) 762-2849
Serves: Woonsocket, Burrillville, North Smithfield, Smithfield, Glocester
Address: 323 Rathburn Street, Woonsocket, RI 02895 (All Saints Parish Rectory)

South County/Wakefield
Phone: (401) 783-3149
Serves: Hopkinton, Narragansett, North Kingstown, Westerly, Exeter, South Kingstown, West Greenwich, Charlestown, New Shoreham, Richmond
Address: 114 High Street, Wakefield, RI 02879 (Basement of St. Francis of Assisi Church)

Salvation Army
Info: Heating & Utility Assistance available for those who do not qualify for LIHEAP
Phone: (401) 831-1119
Website: www.use.salvationarmy.org
Address: 386 Broad Street, Providence, RI 02907

RI Office of Energy Resources
Phone: (401) 574-9100
Address: One Capitol Hill, Providence, RI 02908
Other

CareBreaks
Info: Provides assistance to family caregivers by helping to pay part of the cost of an agency or agency worker to provide you with a short break from your care giving duties. This program is for unpaid caregivers who are caring for a disabled adult or child, individual 60 years of age or older, or person of any age diagnosed with Alzheimer’s or dementia that cannot be safely left home alone.
Phone: (401) 421-7833 x 211
Website: www.diocesepvd.org/charitableministries/elderservices
Address: One Cathedral Square, Providence, RI 02903

AARP Tax Aide Program / VITA Tax Sites
Info: The AARP Tax Aide Program and VITA Tax Sites provide information and assistance when completing tax returns between February 1 and April 15 at numerous sites around the state. Call THE POINT or 211 to get a list of AARP or VITA tax assistance sites near you. Often these tax services are free of charge to low and moderate income people.
Phone: (866) 542-8170 or The POINT
Website: www.aarp.org/ri

Samaritans of Rhode Island
Info: The Samaritans of RI is a suicide prevention program that works with people before they become suicidal and with those who are thinking of suicide.
Phone: (401) 272-4044
Website: www.samaritansri.org

Medical Resources

Regional POINT Centers
Info: These centers have Senior Health Insurance Program (SHIP) Staff that can help elder and disabled adults with information and referral to services, help them figure out their eligibly for such programs, and help them with applications and getting them the services they need. They can discuss Medicare, Medicare drug plans (Part D), supplemental insurance, Medicare Advantage plans, free and reduced-cost medical care programs, veterans benefits and long-term care insurance, and other programs.
Locations:

**East Bay Community Action**
Phone: (401) 437-1000  
Address: 100 Bullocks Point Ave. East Prov.

**Johnston Senior Center**
Phone: (401) 944-3343  
Address: 1291 Hartford Ave. Johnston

**Child & Family Services of Newport**
Phone: (401) 845-2270  
Address: 31 John Clarke Rd. Middletown

**Pawtucket: Leon Mathieu Senior Center**
Phone: (401) 728-7582  
Address: 420 Main St. Pawtucket

**Providence: St. Martin dePorres Center**
Phone: (401) 274-6783  
Address: 160 Cranston St. Providence

**South County Community Action**
Phone: (401) 789-3016  
Address: 1935 Kingstown Rd. Wakefield

**West Warwick Senior Center**
Phone: (401) 822-4450  
Address: 145 Washington St. West Warwick

**Woonsocket Senior Services**
Phone: (401) 766-3734  
Address: 84 Social St. Woonsocket

**Rhode Island Special Needs Emergency Registry** (RI Emergency Management Agency)
Info: This agency urges anyone with a chronic disability, health condition, limited mobility, or special health care need to enroll in this program. The registry was developed to make sure that there is a system to identify Rhode Islanders who require special assistance during emergencies. Either all the number below to register or you can register online as well.
Phone: (401) 222-4783  
Website: www.health.ri.gov

**Vision & Hearing Impaired**

**State Services for the Blind and Visually Impaired**
Info: Provides vocational rehabilitation, counseling, medical evaluation, home teaching, and other services.
Phone: (401) 421-7005  
Website: www.ors.state.ri.us  
Address: 40 Fountain Street, Providence, RI 02903
In-Sight of RI
Info: Helps blind and visually impaired people develop skills in communication, mobility, orientation, self-care, and homemaking.
Phone: (401) 941-3322
Website: www.in-sight-ri.org
Address: 43 Jefferson Boulevard, Warwick, RI 02888

EyeCare America Seniors Program
Info: Any resident 65 or older who does not have an ophthalmologist can receive no-cost medical eye care services through this program.
Phone: 1-800-222-EYES (3937)
Website: www.eyecareamerica.org

Rhode Island Talking Books Plus
Info: Persons who have a visual impairment or physical disability that hinders them from using traditional library materials may borrow books and magazines in large print, Braille, or talking books on cassette or disc, free of charge through this organization. Machines and materials are shipped free directly through the U.S. mail
Phone: (401) 574-9310
Website: www.olis.ri.gov/tbp

RI Commission on the Deaf and Hard of Hearing
Info: Administers sign language interpreter referral service, provides ADA consultation, outreach and training. They also have a library with videos, books, and articles that are available for borrowing.
Phone: (401) 256-1204 (V/VP)
Website: www.cdhh.ri.gov
Address: One Capitol Hill (Ground Level), Providence, RI 02908

Gift of Hearing Program
Info: PARI runs this program that provides reduced cost hearing aids to those in need.
Phone: (401) 725-1966
Website: www.pari-ilc.org
Address: 500 Prospect Street, Pawtucket, RI 02860
Adaptive Telephone Equipment Loan Program
Info: Provides telephone equipment to qualified individuals who have hearing or speech impairments or who suffer from neuromuscular damage, or disease that hinders them from using a standard phone.
Phone: (401) 421-7005  ext. 357
Website: www.atel.ri.gov

Long Term Medical Conditions

Alzheimer’s Association of RI
Info: 24 hour helpline, newsletters, family support groups, resource library, and a social program called Live and Learn Program offering meaningful fun activities for those with early stage memory loss.
Phone: (401) 421-0008
Website: www.alz.or/ri
Address: 245 Waterman Avenue, Providence, RI 02906

Rhode Island Brain Injury Resource Center
Info: Improves access to educational materials and resources for survivors of brain injury, family members, and professionals in the field.
Phone: (401) 461-6599
Website: www.biaofri.org
Address: 935 Park Avenue, Cranston, RI 02910

The Arthritis Foundation, Northern & Southern NE Chapter
Info: The foundation offers programs and services to help people with arthritis including aquatics programs, exercise programs, self-help programs, support groups, and advocacy.
Phone: (401) 739-3773
Website: www.arthritis.org
Address: 2348 Post Road, Suite 104, Warwick, RI 02886

American Diabetes Association
Info: Mission is to improve the lives of all people affected by the disease. Activities they do include information programs, support groups, and advocacy issues.
Phone: 800-342-2383
Website: www.diabetes.org
Address: 222 Richmond Street, Providence, RI 02903

Diabetes Resource Center
Info: This center at the St. Joseph Hospital for Specialty Care addresses the needs of high risk diabetes populations including the uninsured, under-insured, and the homeless. They help with crisis intervention, medication, medical supplies, case management, education and access to social services.
Phone: (401) 456-4419
Address: 21 Peace Street, Providence, RI 02907

American Cancer Society
Info: Organization dedicated to eliminating cancer as a major health problem and can provide information and referral to community support services for those who have cancer.
Phone: (401) 722-8480
Website: www.cancer.org
Address: 931 Jefferson Boulevard, Suite 3004, Warwick, RI 02886

National Multiple Sclerosis Society, RI Chapter
Info: Provides various programs and services, including educational and social programs, information and referral, newly diagnosed support, financial assistance, care management, support groups, and more.
Phone: (401) 738-8383
Website: www.nationalmssociety.org/rir
Address: 205 Hallene Road, Suite 209, Warwick, RI 02886

Mental Health Association of Rhode Island
Info: Provides information and referral for mental health services and support groups.
Phone: (401) 726-2285
Website: www.mhari.org
Address: 500 Prospect Street, Pawtucket, RI 02860

Muscular Dystrophy Association
Info: Provides financial assistance for wheelchairs, leg braces, and communication devices. It also runs an equipment loan program and transportation to and from its clinic.
Phone: (401) 732-1910
Address: 931 Jefferson Boulevard, #1005, Warwick, RI 02886
Website: www.mda.org

**RI Chapter of the American Parkinson Disease Association**
Info: Serves the patients and caregivers of RI through the information and referral center at Kent Hospital and a number of support groups across the state.
Phone: (401) 823-5700
Website: www.riapda.org
Address: 455 Tollgate Road, Warwick, RI 02886 (Kent Hospital)

**Assistive Technology Access Partnership**
Info: A group of agencies that work together to reduce or eliminate barriers to access or funding for assistive technology devices and services for individuals with disabilities of all ages.
Phone: (401) 421-7005
Website: www.atap.ri.gov
Address: 40 Fountain Street, Providence, RI 02903

**Social Security Disability Insurance Program (SSDI)**
Info: The Social Security Administration is the primary source of information for SSDI. People can apply online or at their local Social Security Office.
Phone: 1-800-772-1213
Website: www.ssa.gov

**RI DHS – Long Term Care Offices**
Info: Services are available for individuals over age 65 and for adults with disabilities and must require a certain level of care to qualify. Services include: Home and Community Based Services (HCBS), Nursing Home and Assisted Living Care, and Preventive Services Program (Adult Services).
Main Line: (401) 462-5300
Website: www.dhs.ri.gov

Office Locations:

<table>
<thead>
<tr>
<th>Greater Providence Area</th>
<th>East Providence &amp; East Bay</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCBS Phone: (401) 415-8524</td>
<td>Phone: (401) 415-8459</td>
</tr>
</tbody>
</table>
Cranston & South County
Phone: (401) 462-5182

Woonsocket & Northern RI
Phone: (401) 235-6241

Legal Services

Division of Elderly Affairs
Info: Legal counselor provides general information on topics such as advance directives, wills, fraud, as well as other elder rights and protections.
Phone: (401) 462-0341
Address: Building 74 on West Road, Cranston, RI 02920

Rhode Island Bar Association’s Legal Information and Referral Service
Info: Helps anyone 60 or older obtain legal services and advice and MAY receive a free initial consultation of up to 30 minutes. A reduced-fee program is available for moderate income seniors and a no-fee program is available for certain low-income seniors.
Phone: (401) 521-5040
Website: www.ribar.com
Address: 115 Cedar Street, Providence, RI 02903

RI Legal Services – Senior Citizens Program
Info: Helps low income persons 60 and older with legal advice and assistance with problems related to housing, Social Security, Medical Assistance, Medicare, and SNAP (food stamps).
Providence Phone: (401) 274-2652
Providence Address: 56 Pine Street, Providence, RI 02903

Veteran Resources

Rhode Island Division of Veterans Affairs
Info: Provides many services for RI veterans and their families including: benefits counseling, referral to community support services, burial services at the RI Veterans Cemetery, etc.
Website: www.dhs.ri.gov
Contact Local DHS Office:

**Greater Providence**
Phone: (401) 415-8200

**South County**
Phone: (401) 782-4300

**Pawtucket/East Bay**
Phone: (401) 721-6600

**Warwick & Kent County**
Phone: (401) 736-1400

**Woonsocket & Northern RI**
Phone: (401) 235-6200

**Veterans Benefits Administration**
Info: Responsible for the management of most non-medical benefits including: compensation, pension, vocational rehabilitation, and counseling. This office coordinates the local benefit activities associated with education, home loan guaranty, and veterans’ life insurance as well.
Phone: 800-827-1000
Website: www.va.gov
Address: 380 Westminster Street, Providence, RI 02903

**Warwick Vet Center**
Info: Provides readjustment counseling and outreach services to all veterans who served in any combat zone. Bereavement counseling and counseling for military related sexual abuse or harassment is also available. There is no cost to the veteran or family for these services.
Phone: (401) 739-0167
Website: www.providence.va.gov/Vet_Center.asp
Address: 2038 Warwick Avenue, Warwick, RI 02889

**RI Veterans’ Home**
Info: Provides quality nursing and residential care to RI war veterans in need. Also has social, medical, nursing, and rehabilitative services for veterans and their survivors and/or dependents.
Phone: (401) 253- 8000 x 495
Website: www.dhs.ri.gov/Veterans/RIVeteransHome
Address: 480 Metacom Avenue, Bristol, RI 02809

**Operation Stand Down**
Info: Serves homeless and disabled veterans with social services, counseling, and emergency and permanent housing.
Phone: (401) 383-4730
Website: www.osdri.com
Address: 1010 Hartford Avenue, Johnston, RI 02919

Veterans National Suicide Prevention Lifeline
Info: Suicide Prevention Lifeline that specifically serves US Veterans
Phone: 1-800-273-TALK (8255) x 1

Senior Centers

Info: Offer volunteer opportunities, recreation, group activities, exercise, counseling, information and referral, and continuing education. Most provide hot lunches, outreach, transportation and health services.

Locations:

Barrington Senior Center
Phone: (401) 247-1926
Address: 281 County Road

Cranston Senior Center
Phone: (401) 461-1000
Address: 1070 Cranston Street

Bristol - Benjamin Church Senior Center
Phone: (401) 253-8458
Address: 1020 Hope Street

Cumberland Senior Center
Phone: (401) 334-2555
Address: 1464 Diamond Hill Road

Central Falls - Ralph J. Holden Center
Phone: (401) 727-7425
Address: 361 Cowden Street

East Greenwich Senior Services
Phone: (401) 886-8669
Address: 125 Main Street

Charlestown Senior Center
Phone: (401) 364-9955
Address: Ninigret Park

East Providence Senior Center
Phone: (401) 435-7800
Address: 610 Waterman Avenue

Coventry Senior Center
Phone: (401) 822-9175
Address: 50 Wood Street

Hopkinton Senior Center
Phone: (401) 377-7795
<table>
<thead>
<tr>
<th>Address: Crandall House</th>
<th>Address: 10 Beach Street</th>
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<tbody>
<tr>
<td><strong>Jamestown Senior Center</strong></td>
<td><strong>North Providence – Salvatore Mancini Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 423-2658</td>
<td>Phone: (401) 231-0742</td>
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<tr>
<td>Address: 6 West Street</td>
<td>Address: 2 Atlantic Boulevard</td>
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<tr>
<td><strong>Johnston Senior Center</strong></td>
<td><strong>Pawtucket – Leon Mathieu Senior Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 944-3343</td>
<td>Phone: (401) 728-7582</td>
</tr>
<tr>
<td>Address: 1291 Hartford Avenue</td>
<td>Address: 420 Main Street</td>
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<tr>
<td><strong>Lincoln Senior Center</strong></td>
<td><strong>Portsmouth Senior Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 723-32-70</td>
<td>Phone: (401) 683-4106</td>
</tr>
<tr>
<td>Address: 40 Chapel Street</td>
<td>Address: 110 Bristol Ferry Road</td>
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<tr>
<td><strong>Middletown Senior Center</strong></td>
<td><strong>Providence – Capital City Senior Programs</strong></td>
</tr>
<tr>
<td>Phone: (401) 849-8823</td>
<td>Phone: (401) 455-3888</td>
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<tr>
<td>Address: 650 Green End Avenue</td>
<td>Address: 85 Chalkstone Avenue</td>
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<tr>
<td><strong>Narragansett Senior Center</strong></td>
<td><strong>Providence – DaVinci Community Center</strong></td>
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<tr>
<td>Phone: (401) 782-0675</td>
<td>Phone: (401) 272-7474</td>
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<tr>
<td>Address: 53 Mumford Road</td>
<td>Address: 470 Charles Street</td>
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<tr>
<td><strong>Newport – Edward King House</strong></td>
<td><strong>Providence – Elmwood Community Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 846-7426</td>
<td>Phone: (401) 461-7940</td>
</tr>
<tr>
<td>Address: 35 King Street</td>
<td>Address: 155 Niagara Street</td>
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<tr>
<td><strong>Newport – Florence Gray Senior Center</strong></td>
<td><strong>Providence – Federal Hill Community Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 849-7243</td>
<td>Phone: (401) 751-2217</td>
</tr>
<tr>
<td>Address: 1 Park Holm</td>
<td>Address: 9 Courtland Street</td>
</tr>
<tr>
<td><strong>Newport – Martin Luther King Center</strong></td>
<td><strong>Providence – Fox Point Senior Center</strong></td>
</tr>
<tr>
<td>Phone: (401) 846-4828</td>
<td>Phone: (401) 751-2217</td>
</tr>
<tr>
<td>Address: 20 West Broadway</td>
<td>Address: 90 Ives Street</td>
</tr>
<tr>
<td><strong>North Kingstown Senior Center</strong></td>
<td><strong>Providence – Hamilton House</strong></td>
</tr>
<tr>
<td>Phone: (401) 268-1590</td>
<td>Phone: (401) 831-1800</td>
</tr>
</tbody>
</table>
Address: 20 Syracuse Street
Providence – Jewish Community Center
Phone: (401) 861-8800
Address: 401 Elmgrove Avenue

Providence – Nickerson House Senior Center
Phone: (401) 351-2241
Address: 133 Delaine Street

Providence – Silver Lake Center
Phone: (401) 944-8300
Address: 529 Plainfield Street

Providence – St. Martin dePorres Senior Center
Phone: (401) 274-6783
Address: 160 Cranston Street

Providence – Washington Park Center
Phone: (401) 461-6650
Address: 42 Jilson Street

Providence – West End Community Center
Phone: (401) 781-4242
Address: 109 Bucklin Street

Providence – Westminster Senior Center
Phone: (401) 274-6900
Address: 133 Mathewson Street

Richmond Adult Center
Phone: (401) 539-6144
Address: 1168 Main Street

Scituate Senior Center
Phone: (401) 647-2662
Address: 1315 Chopmist Hill Road

Smithfield Senior Center
Phone: (401) 949-4590
Address: 1 William J. Hawkins Trail

South Kingstown Senior Center
Phone: (401) 789-0268
Address: 25 St. Dominic Road

Tiverton Senior Center
Phone: (401) 625-6790
Address: 207 Canonicus Road 02878

Warren Senior Center
Phone: (401) 247-1930
Address: 20 Libby Lane

Warwick – JONAH Community Center
Phone: (401) 738-2000
Address: 830 Oakland Beach Avenue

Warwick – Pilgrim Senior Center
Phone: (401) 468-4090
Address: 27 Pilgrim Parkway

West Warwick Senior Center
Phone: (401) 822-4450
Address: 20 Factory Street

Westerly Senior Center
Phone: (401) 596-2404
Address: 39 State Street

Woonsocket Senior Center
Phone: (401) 766-3734
Address: 84 Social Street