

Business Outcomes

- Improve skills of direct support professionals as long term care workers who need to be Home Care Aide Certified (HCA-C).
 - * CRSB staff may **choose** to complete this course as a CE following their first 120 days of employment. To take the HCA-C examination present:
 - the DDA 75 hour certificate stating that this chapter is included; or
 - the DDA 75 hour Certificate plus the RFOC Out Takes CE within two years of hire
- Practice Skills

Note: This chapter is heavy in materials that are required for training purposes. Whenever possible, ask for donations or purchase at the dollar store. Reuse when possible. Additional resources are listed next to the items. It is suggested that these materials be stored in plastic containers by activity for easy storage and use during training.

This chapter also requires going to the Prometrics site to print off the checklist that is currently in use during the Prometrics test. These checklists are useful with each activity that is suggested for practice. Make enough copies for each participant. <https://www.prometric.com/en-us/clients/WADOH/Pages/Exam-Preparation-Materials.aspx>

Training Objectives

As a result of participating in this segment of training, learners will be able to:

1. Demonstrate the practice of common care.
2. Demonstrate the use of SWIPES
3. Demonstrate the proper technique for:
 - a. washing hands
 - b. glove use and protective equipment
 - c. feeding an individual
 - d. helping a person to walk
 - f. provide fingernail and hand care
 - g. provide footcare
 - h. help a person with a weak arm to dress
 - i. apply a knee high elastic stocking
 - j. provide passive range of motion to
 1. shoulder
 2. knee
 3. ankle
 - k. provide perineal care
 - l. provide catheter care
 - m. transfer a person from a bed to a wheelchair
 - n. turn and reposition a person in bed to from prone to side
 - o. assist a person in bed with a bath

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- p. shave a person
- q. assist a person to take medications
- r. assist a person with mouth care
- s. denture care

Estimated Time

8 hours depending on the number of participants and outgoing nature of the class. Consider using each section as a shorter class until all four sections have been completed.

Supplies



- ✓ Laptop or computer connected to a projector/monitor
- ✓ External speakers for laptop or computer
- ✓ Internet access
- ✓ Paper and pens for participants
- ✓ Fat, colorful markers
- ✓ Print and cut the Task Cards (see last page of this Facilitator Guide) to hand participants
- ✓ Cue Card from the website: <https://www.prometric.com/en-us/clients/WADOH/Pages/Exam-Preparation-Materials.aspx>
By taking these steps from the website each time, you will remain current with any changes made in the future.
- ✓ Print off enough copies of the **Fundamentals** for Chapter 14 for each student.
- ✓ Print the skills card assignments at the end of this chapter and cut out and place on 3x5 cards.
- ✓ Towels- depending on class size you will need two large towels for each pair of students. Walmart is a great place to get the large bath towels. Cheap, lightweight ones are best
- ✓ Twin sheet set- Walmart is a good place to get this. This allows you to cover a sofa or bed and use the flat sheet for practice of bed baths
- ✓ Hand towels- 6 is a good amount for a class of ten. Walmart is a good place and these can be used for clothing protector also
- ✓ Wash cloth- dollar store is the best place and you will need at least 10
- ✓ Germ juice to show how poor we wash our hands (germjuice.com) *optional*
- ✓ Black light- to use with germ juice. Halloween at the dollar store *optional*
- ✓ Basin for practice of denture washing, feet etc dollar store
- ✓ Baby wash- dollar store
- ✓ Urinal, bed pan- ask pharmacy
- ✓ Utensils, plate, bowl and cup- several sets for teams best at dollar store
- ✓ Ted hose- ask pharmacy they get them returned and will donate
- ✓ Button up shirts in different sizes- local thrift store or Walmart clearance often very cheap
- ✓ Wheelchair- ask a durable medical supply they often have broken ones they will donate

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- ✓ Chuck pads- ask your pharmacy - they will donate
- ✓ Catheter- ask the pharmacy to donate an opened and unused straight cath
- ✓ Gait belt
- ✓ Enough fake teeth for each student (Party store or dollar store wax teeth or plastic costume teeth in various designs) You may prefer to brush these fake teeth as an activity instead of cleaning dentures.
- ✓ Pudding cups or applesauce cups and spoons
- ✓ Toothbrushes/ tooth paste (you can ask students to bring their own to save money but you should have extras in case they forget.) enough for each student to practice.
- ✓ Tub or basin for feet
- ✓ Basin for soaking hand
- ✓ Lotion
- ✓ Nail files, orange sticks
- ✓ Play-doh
- ✓ Straight catheters for practice
- ✓ A set of dentures (Dentists frequently have broken sets they will give you for practice.) toy teeth?
- ✓ A towel (Walmart or an old one)
- ✓ Gloves
- ✓ Orange sticks (dollar store or drug store)
- ✓ Emery boards (dollar store or drug store)
- ✓ Safety razors (dollar store or drug store)
- ✓ Balloons (dollar store or drug store)
- ✓ Shaving cream (dollar store or drug store)
- ✓ Tooth brushes (dollar store)
- ✓ Tooth paste (dollar store)
- ✓ Floss picks (dollar store)
- ✓ Sharpie markers

Preparation before training	<p>Print a Facilitator Guide, and DSP Fundamentals necessary for each staff. Ensure each participant has a pen. Prepare checklists for each skill from the skills checklist at: https://www.prometric.com/en-us/clients/WADOH/Documents/WAHCACHECKLISTWITHHEAVIES TWEIGHTCHECKPOINTS20130529.pdf</p> <p>Determine how much of this chapter you will be training. As a DDA Group Home, your staff must complete this chapter to be ready for the Home Care Aide Certification exam. Please review the requirements on the Prometrics website: https://www.prometric.com/en-us/clients/wadoh/Pages/landing.aspx You may also find additional information regarding testing and skill building.</p> <p>CRSB Staff choosing to take the Prometrics exam will need to take this chapter. This chapter can be used for Continuing education after the first</p>
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		120 days of hire.
Note		<p>Note to Facilitator: Before this section you will need to ask someone for their help, out of hearing of others in the class. For larger groups you may choose to ask 2-3 people to participate. Provide them with a list of the following tasks:</p> <p>Take off someone’s glasses Start untying someone’s shoes to take them off Start trying to remove someone’s coat or jacket</p> <p>They will choose one task to perform on a random “target” (person in the class) when given a cue from you. It could be a head nod, or picking up your cup or glass, or a key word. When they see/hear the sign, they are to approach another person in class and begin the task. They should do so without much talking to the person or others around them.</p> <p>Please see the note in the S.W.I.P.E.S. section before “E”.</p>
Note		<p>Note to Facilitator: As a training Program, you will need to determine the best way for you to teach this chapter. You may use this guide and the activities as outlined or you may locate a Community Instructor or a trainer from another agency to provide this training. If your staff are choosing to take the exam to be Certified as a Home Care Aide (HCA), your best option may be to send them to a different agency for this chapter. You may check with your Resource Manager or with Agencies in your community to coordinate this training.</p> <p>This training can be broken into different sections:</p> <p>Section 1 covers skills for: SWIPES Hand washing Glove use Bed Bath Assist Individual with a Weak Arm to Dress Put Knee-High Elastic Stocking on an Individual</p> <p>Section 2 covers skills for mobility: Transfer Individual from Bed to Chair/Wheelchair Assisting an Individual to Walk Passive Range of Motion for One Shoulder Passive Range of Motion for One Knee and Ankle Turn and Reposition an Individual in Bed</p> <p>Section 3 covers skills for:</p>


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		<p>Medication Assistance Assisting an Individual to Eat Mouth Care Clean and Store Dentures The Shave (With Safety Razor) Foot Care Fingernail Care</p> <p>Section 4: Toileting Assist Individual with Use of Bedpan Assist Individual with Pericare Catheter Care</p>
<p>✓ Section 1: Total Time - 2 hours</p>		
<p>Opening: Engaging Activity (10-15 minutes)</p>		
<p>Note</p>		<p>Note to Facilitator: Blindfolds can be made with bandanas, scarves, or scrap pieces of material.</p>
<p>Activity</p> 		<p>Have people get with a partner for a “trust walk”. They will each take turns being blindfolded and lead by their partner. Choose a path that will be safe and reasonable. Suggested is a route out of the room they are in, into and through a lobby, and out the main doors. Partners can switch leaders once to their destination, to return to the training room.</p> <p>Once everyone has returned, ask about their experience of being at the mercy of someone else.</p> <p>As an alternative to a blindfold activity, play some “bumper cars”. See end of this guide for instructions.</p>
<p>Ask</p>		<p>Did they feel safe? Were they anxious? Did their partner say or do something that made them feel more comfortable?</p>
<p>Say</p>		<p>We ask the people we support to trust us, sometimes with the most intimate care. When we put ourselves in a position of vulnerability, it is a good reminder to respond with empathy, compassion, and kindness.</p>
<p>Say</p>		<p>How many of us can recall an experience of taking an important test - like a driver’s licensing test, or a final test you had to pass in order to</p>






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		complete a required test? [Raise your hand as the Facilitator.]
Ask	?	Who is willing to share feelings you had as the test date neared? [Encourage participants to verbalize a variety of physiological responses they experienced. These may include: anxiety, lack of sleep, restlessness, sweaty body at the time of the test, etc.)
Say		Our job in this segment of training is to prepare for the exam required of LTCW's so that not only are you more equipped to pass it, but your stress level is reduced in the process.
Ask		Raise your hand if you have ever been in the hospital or Doctor's office. If you were awake, what was going through your mind? (fear, anxiety, not knowing what was going on) What did staff do to reduce your anxiety? (discussed what was happening, checked in with you while you were waiting to provide updates, explained your options, explained the procedure) did you feel better? Did your family feel better? As we learn all the skills in this chapter your practice will need to include talking out loud. It's not necessary that you speak loudly – but the team mate you are working with should be able to hear your voice.
Teach and Train; SWIPES (30 minutes)		
Say	 	Every skill begins with SWIPES. These steps will be part of the exam you are going to take. Practice SWIPES out loud. When you are in the test: <ul style="list-style-type: none"> • Saying out loud what you are doing alerts the examiner that you know what you are doing. • Saying it out loud makes the individual you are supporting more comfortable and addresses the needs of many people to know what you are doing. • Saying it out loud is a learning style for some. • If you don't practice saying it out loud, you will forget on the exam and fail.





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Immerse		
<p>Say</p>		<p>SWIPES is necessary for you to remember for each skill that you will be tested on. You may have seen this acronym for other skills that you learned in LTCW O and S or one of the other Chapters we have studied.</p> <p>I've prepared this little rap to help you remember the steps and what you are doing with each step. Is there anyone who will provide me with a beat? xxX xxX xxX Thank you, A little softer (or louder)</p> <p>S is for supplies I will need for the task Gather them up Don't wait to be asked.</p> <p>Wash my hands Scrub - a - dub Wash 'em up real good Wear my gloves For protection Like I know I should</p> <p>Say my name Say it proud Tell 'em what I'm gonna do Leave 'em clean Leave 'em comfy Keep 'em warm not blue!</p> <p>Cover up Close the door Use a sheet not a shroud</p>





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		<p>Keep ‘em modest Build their trust JUST hide their bust!</p> <p>Hey! What’s go-in’ on? Why’d you touch me? Will it hurt? Explain what you’re doing While you do this work!</p> <p>Clean it up Take gloves off Wash again, Rub-a-dub Ask the person If they’re better Could they use a back rub?</p> <p>Bounce away Take the trash Leave my book Make me laugh Pass the test then Tell ‘em when you’ll be back!</p>
<p>Say</p> 		<p>S: Gather your supplies Supplies for each task may vary. While you are watching the videos in future exercises, jot down the materials you will need during your practice session. Remember that you will need them ALL! We have provided all of the materials you need and they are located (point to where they are) here. You will come and gather your supplies when directed to begin your practice sessions.</p>
<p>Say</p> 		<p>W: wash your hands before contact with an individual. When you first started work here you took some training on Orientation and Safety. During that training you learned to wash your hands before you could start to work with the people we support. Raise your hand if you can tell me the steps for washing your hands. Is there someone who would like to demonstrate this skill?</p>
<p>Toolkit</p>		<p>Refer students to the Fundamentals section of their Toolkit for this chapter for hand washing. Have everyone read the steps out loud together as a group.</p>






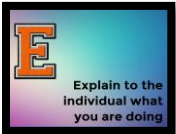


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<p>Say</p>		<p>This skill is something you have been practicing since we taught you how to wash your hands in the Orientation class when you were first hired. Raise your hand if you think you still wash your hands following the skills list we just read. If not, you will want to review these steps and ensure that you are following these steps. This is not a skill just to be used for a test.</p>
<p>Note</p>		<p>Note to Facilitator: If you would like to check the hand washing process. Purchase some germ juice at germjuice.com. Have students put some of this lotion on their hands. Let it sink in, then ask them to go and wash their hands. When they are done check their hands with a black light. The light will show them where they have missed washing. Even though they will wear gloves over their hands, it always best to wash hands well to remove anything hiding there first.</p>
<p>Ask</p> 		<p>Why do we wash our hands? Take some answers and then remind students that we wash our hands to protect ourselves and the individuals we support from the spread of germs.</p> <p>How we wash out hands is just as important. Refer students to the Fundamentals section of their Toolkit for this chapter for washing hands.</p> <p>Skill: Hand Washing</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Make sure supplies are within easy reach so that no contaminated surface is touched throughout the task. 3. Standing away from sink, turn on the faucet and adjust the water temperature. Keep your clothes dry, as moisture breeds bacteria. 4. Wet hands and wrists, keeping your hands lower than your elbows so water runs off your fingertips, not up your arm. 5. Use a generous amount of soap, rubbing hands together and fingers between each other to create lather. Friction helps clean your skin. 6. Continue to rub your hands together, pushing soap under your fingernails and cuticles with a brush or by working them in the palm of your hand. Soap about two inches above your wrist. 7. Wash for one minute. 8. Rinse thoroughly under running water, careful not to touch the sink. 9. Rinse from just above the wrists down to fingertips. Do not run water over unwashed arm down to clean hands. 10. Using a clean paper towel, dry from tips of fingers up to clean wrists. Do not wipe towel on unwashed forearm and then wipe clean






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		<p>hands.</p> <ol style="list-style-type: none"> 11. Dispose of the towel without touching waste container. 12. If your hands touch the sink or waste container, start over. 13. Using a clean paper towel, turn off faucet, which is considered contaminated. Properly discard towel. <p>Skill: Putting On & Taking Off Gloves</p> <p>Putting On Gloves</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Wash hands before contact with gloves. 3. Check each glove for holes or other deterioration before using. 4. Grasp glove at cuff and pull onto other hand. 5. Grasp other glove at cuff and pull onto other hand. 6. Check to make sure glove is snugly fit over each finger. <p>Taking Off Gloves</p> <ol style="list-style-type: none"> 1. With one gloved hand, grasp the other glove just below the cuff. 2. Pull glove down over hand so it is inside out. 3. Keep holding removed glove with gloved hand and crumple it into a ball. 4. With two fingers of bare hand, reach under the cuff of the second glove. 5. Pull the glove down inside out so it covers the first glove. 6. Throw gloves away. 7. Wash hands as final step.
<p>Say</p> 		<p>I: Identify yourself by telling the individual your name Have you ever been in a Doctor’s office and someone walks in the room and just starts poking around on your body? How did that feel? What were you thinking? (Take some answers – these will include wondering what’s going on, who are you and what’s your job here? Are you qualified to do this?) Knowing who is poking around and what their qualifications are can make a person more comfortable and less nervous. This is particularly important when supporting someone with high blood pressure or Autism.</p>
<p>Say</p> 		<p>P: Provide privacy throughout care with a curtain, screen, sheet or door We are all modest to some degree and we need to always be thinking about how to protect the privacy of people we are supporting. It may be their home but other staff and other housemates do not need to have access to all personal care. In fact, no one but the support staff and the individual should be the room at all while personal care is being administered. Think about how you would feel if others watched while you get Attends changed or you are taking a bath. You have to think these things all the way through and protect dignity and privacy. Which of the Residential Guidelines addresses this? (Relationships, Health and</p>





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		Safety)
Note		Note to Facilitator: At this point in the training, you should give the agreed upon sign to your “insiders” for them to begin one of the following tasks:
Activity		<p>Take off someone’s glasses Start untying someone’s shoes to take them off Start trying to remove someone’s coat or jacket</p> <p>Allow the “insiders” about 30-40 seconds for their tasks, before stopping them, and addressing their “targets”.</p>
Ask		Was anyone uncomfortable? Why? What would have made you feel more comfortable?
Say		This exercise emphasizes the importance of talking to people to “Explain” as noted next in the SWIPES acronym, why and what we are going to do to assist them with the care of their body.
Say	 	<p>E: Explain to the individual what you are doing. This means you will practice and speak out loud while you are performing skills practice and while you are providing personal care. It will seem awkward to you but instill confidence in others. It’s not about your comfort level as much as it is about the comfort of the person you are supporting. Confidence that you can do what you say you are doing but also providing information so the individual knows what’s next and what to expect. If you come at me with toilet paper and don’t tell me what you are going to do with it, I’m going to get upset, hit you, kick and spit. AND if I’m not in the appropriate place for toilet paper you can bet that I am going to defend myself in any way that I can! If you choose to take the Prometrics exam to become a Certified Home Care Aide, you will be expected to talk through each task you are tested on. Practice that skill now with every task that you do.</p>
Say	 	<p>S: Scan the area to be sure everything is back in place after the task is done. When you are finished it is not ok to leave used gloves, wash cloths or other personal care items lying around. Things should be returned to individual care spaces (in some cases boxes) and other items need to be placed in the wash hamper or trash. You will be supporting people who live with others and it is your job to ensure that the environment is safe for everyone as well as protects personal items for each individual.</p>



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<p>Note</p>		<p>Note to Facilitator: If you used the germ juice, send students to wash their hands. Shine a black light on their hands to show them where they missed washing.</p> <p>Repeat the Rap from the beginning of this chapter as a class.</p>
<p>Apply- Demonstrate Learning Application to Real Work (30 minutes)</p>		
<p>Say</p>		<p>Watch and listen as I demonstrate how you will be practicing a task similar to what I model.</p>
<p>Activity</p> 		<p>Demonstrate what you want students to do in the next activity. Select a task from the list at the end of this chapter.</p> <ol style="list-style-type: none"> 1. Gather supplies and say out loud, “I am gathering my supplies.” (You can name each article that you are gathering as you place them in a basin) 2. Walk to the sink and state: “I am washing my hands using soap and scrubbing between my fingers, up my wrist and scrubbing for at least two minutes and rinsing with my fingers pointing down. I am taking a towel and drying my hands being careful not to touch anything. I am using my towel to turn off the water and disposing of my towel properly. “I am placing my gloves on my hands to prevent the spread of germs.” 3. To your partner say, “Hi! I’m ----- and I am here to (name the task on your card). We can do this now or I can come back in five minutes. Which would you prefer?” Tell students this is another way to provide Power and Choice and an important step to remember. Choices are to be offered as often as possible and the person you are supporting to direct their own care as much as possible. This doesn’t offer a choice of not doing it, but it does provide an option for the person to say now or later. 4. “I’m closing the door.” “I’m drawing the curtain.” “Let’s go to your room for privacy.” 5. At every step of the task it is important to explain to the person what you are doing. “I’m going to touch your stomach and it may tickle a little bit.” “I am lifting this sheet so that I can see better but I will put it back over your private parts as soon as we are finished.” Having a sheet to provide dignity and respect as well as privacy is crucial to the person’s comfort and trust. 6. “I’m putting your book on the coffee table so you can reach it when you are ready to read.” Putting things back to where the person can find them when you are not in the room is an important step to show that you respect their possessions and them. It will build trust that you are putting things back where they belong or care enough to put them within easy reach.
<p>Say</p>		<p>We are going to prepare to complete the tasks listed on the cards you have been given. I need to hear your voices!</p>





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<p>Note</p>		<p>Note to Facilitator: Hand out the cards you prepared (see Materials List at the beginning of this Facilitator Guide).</p>
<p>Activity</p>		<p>Break the group into teams of two. One will be the support staff and the other will be someone they will support. Hand out the Task Cards ensuring that each team has one. Tell students where they can find the supplies they need before they begin.</p> <p>Allow ten minutes for each person to complete the steps (without doing them – they should walk to a station or sink where they can wash their hands and just say they washed their hands, but they should put on gloves etc.)</p> <p>Our goal for this activity is to repeat these steps, out loud and in order.</p> <ol style="list-style-type: none"> 1. supplies gathered 2. washed hands 3. introduced self 4. privacy provided 5. explained what I am doing 6. secured the area to ensure that everything is put away.
<p>Ask</p>		<p>Ask about Common Care Practices.</p> <p>Did you:</p> <ul style="list-style-type: none"> Identify yourself? Use infection control that was appropriate for the task? Promote individual’s social and human needs throughout procedure? Promote individual’s rights throughout procedure? Promote individual’s safety throughout the procedure? Leave common use items within individual’s reach at end of care? (This would be more for people who are confined to a space and can’t get their own. However, a good tip for sick days when people aren’t getting up and about per usual.)
<p>Teach and Train: Assisting a person with a weak arm to dress (20 minutes)</p>		
<p>Say</p>		<p>Let’s start with getting dressed. Some of the people we support have weak muscles, some caused by medication side effects, and others because they were never developed in the first place, and other still just due to motor skills in general. Assisting with putting on clothing and acknowledging that this may be difficult for them are daily tasks. For testing purposes you will be tested on assisting someone with a weak arm to dress with a button up shirt and a pair of pants. Today, we have</p>







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		several sets of shirts and pants for our activity.
Toolkit		<p>Invite participants to turn to the Fundamentals section of their Toolkit for this chapter for the steps on assisting a person to dress. Review the skills with the class. Remind them that people may additional assistance depending on the person and that these are general guidelines and what they will be tested on.</p> <p>Skill: Assist Individual with a Weak Arm to Dress</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Ask individual what he/she would like to wear. 3. Assist individual to remove their gown/sleep wear while protecting privacy. 4. Assist individual to put the weak arm through the correct sleeve of the shirt, sweater, or slip. 5. Assist individual to put strong arm through the correct sleeve. 6. Assist individual to put on skirt, pants, shirt, or dress, and non-skid footwear. 7. Puts on all items, moving individual’s body gently and naturally, avoiding force and over-extension of limbs and joints. 8. Finish with individual dressed appropriately (clothing right side out, zippers/buttons fastened, etc.) and seated. 9. Place gown in dirty laundry basket. 10. Wash hands.
Activity		<p>Provide two sets of shirts and pants. Place the sets next to each other and divide the class into teams of two. Ask the first person in the line to stand with the clothes. They will have a weak arm that they will identify to the staff when the staff arrives to assist them with getting dressed. Set up a relay race so that once the staff has dressed the person following the steps (at least 2 buttons), they will remain with the clothes while the other staff removes them. The staff that dressed the person will become the individual who needs assistance. The staff cannot arrive from the line until the supported individual returns to the back of the line. The staff in line are calling out the steps in unison to the person who is assisting so they don’t have to read their list. Race the two teams to see who can finish fastest and most accurately. If you have a large group you may want to have more teams so the activity completes sooner. If you have a small group the practice would not need to be a race between teams but</p>




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		will help people repeat the steps.
Teach and Train: elastic stocking (10 minutes)		
Say		Elastic hose, or TED hose are also known as support hose and other names. They are a strong elastic material that provides support to the person's leg for the purpose of reducing swelling, supporting varicose veins or other needs. Show the students the ted hose and pass around so they can see how stretchy they are. Discuss individuals that you support who require the use of the elastic hose and why they are wearing them. Is it short term or long term use?
Toolkit		<p>Skill: Put Knee-High Elastic Stocking on an Individual</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Have individual elevate leg(s) 15 minutes. 3. Turn stocking inside out, at least to heel area. 4. Place foot of stocking over toes, foot, and heel moving individual's foot and leg naturally, avoiding force and over-extension of limb and joints. 5. Pull top of stocking, over foot, heel, and leg. 6. Make sure stocking is smooth, with no twists or wrinkles, and is not too tight over the individual's toes. 7. Wash hands.
Video		<p>Use your checklist while you watch the video.</p> <p>Show video: Elastic hose (1 min.) https://www.youtube.com/watch?v=upFm6-Lssuw&feature=player_embedded</p>
Activity		In pairs, practice putting on this elastic hose. To pass, there should be no excess materials at the toes to bunch up in the person's shoe, and the hose should reach mid- calf or higher depending on the length of the hose provided. Remember that while you are practicing this, you are working with an individual who is capable of pushing back to help you. Many of the people who need this support, cannot assist you with putting the hose on.
Section 2: Total time: 2 hours		
Immerse		







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<p>Say</p>		<p>Remember from CPR how you move a person to their recovery position? This is the same thing basically. For people who are bed bound, changing their position is important. Discuss any people you support who will need this assistance. Tell them why they need the assistance and remind them that they will practice here and be better prepared when they are in the Coaching Session and performing this task with individuals we support.</p>
<p>Show</p> 		<p>Show the video: Turn and reposition from prone to side (4 min.) https://www.youtube.com/watch?feature=player_embedded&v=XZNtrYEN_uw</p>
<p>Toolkit</p> 		<p>Tell students to review the steps for turn and reposition in the Fundamentals section of their Toolkit.</p> <p>Skill: Turn and Reposition an Individual in Bed</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Bend individual's knees. 3. Before turning individual, move their body towards self. 4. Place your hands on the individual's hip and shoulder and gently roll the individual over on his/her side away from you. 5. Position individual in proper body alignment: <ul style="list-style-type: none"> • head supported by pillow; • shoulder adjusted so individual is not lying on arm and top arm is supported; • back supported by supportive device if applicable; • top knee flexed, top leg supported by supportive device if applicable with hip in proper alignment. 6. Cover individual with top sheet. 7. Remove gloves (if used) and wash hands as final step.
<p>Activity</p>		<p>Pair students with a partner. One will be the client the other the staff. Client will lie on their back on the floor (or even better if you have a sturdy table or bed they can practice on). Provide a sheet or mat to place on the floor for their protection and comfort. Staff person will move them from prone to their side following the steps for this skill.</p>
<p>Immerse</p>		







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<p>Say</p>		<p>Let's talk about transferring a person from a bed to a wheelchair. Discuss any people supported by your agency that require this assistance. If you don't support anyone, discuss with students about why this skill will be helpful with an aging population. Take some ideas from students about why they think this skill may be useful in the future if not now.</p>
<p>Toolkit</p>		<p>Skill: Transfer Individual from Bed to Chair/Wheelchair</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Position chair/wheelchair close to bed with arm of the wheelchair almost touching the bed. 3. Fold up or remove footrests. 4. Lock wheels on wheelchair. 5. Assist client to roll toward side of bed. 6. Supporting the client's back and hips, assist client to a sitting position with feet flat on the floor. 7. Assist client to put on non-skid footwear. 8. Put on transfer belt, if necessary. (Discuss the use a gait belt or transfer belt. If the person is wearing a belt, can you use that instead of putting something else on? Discuss comfort of how the pants might fit when you are pulling up on the belt and how a gait belt can be used so that clothing stays in a comfortable position. Is a use of a gait belt restrictive? Does it need to have special consent to use one? Does it need a Doctor or Therapist order?) 9. Assist client to scoot toward edge of bed. 10. With transfer (gait) belt: <ul style="list-style-type: none"> • Stand in front of client. • Grasp belt. 11. Without transfer belt: <ul style="list-style-type: none"> • Stand in front of client. • Place arms around client's torso under client's arms. 12. Brace client's lower extremities with your knees to prevent slipping. 13. Alert client you will begin transfer on the count of 3. 14. On signal, assist client to stand. 15. Assist client to pivot to front of wheelchair with back of client's legs against wheelchair. 16. Flex your knees and hips and lower the client into the wheelchair.
<p>Show</p>		<p>Show the Video Transfer from bed to wheel chair (3 minutes & 30 seconds)</p>












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		https://www.youtube.com/watch?feature=player_embedded&v=JxmH3E2uDo
Apply- Demonstrate Learning Application to Real Work (20 min.)		
Activity		<p>You will need a wheel chair to practice this skill. Putting on brakes is part of the skill and without that to practice it may be missed on the test.</p> <p>Do practice the skills in the video. Talk out loud while setting brakes and taking them off.</p>
Note		<p>Note to Facilitator: Check with a local medical supply store or clinic to see if you can borrow one for the day or if they have a broken one that they will donate to your training efforts. Consider a field trip to where you could train someone to use the wheelchair if none are available at your agency.</p>
Say		<p>Many of the people we support do not use a wheelchair and might need some assistance to walk. People may need to have someone stand by as they get moving to ensure that they do not fall. They may be light headed when they stand or have other complications that requires you to be close by.</p>
Immerse		
Say 		<p>Raise your hand if you've ever been lightheaded? What did you do to steady yourself? Take some answers. (sat down again, held the wall, grabbed a friend)</p> <p>By now, you have figured out that people have many needs for support. Walking may be one of those as well. Not that the person can't walk on their own but they may have balance issues or strength concerns, weakness in muscles from lack of moving or caused by medications. Some people may be light headed when they first stand up and we want to prevent them from falling! We aren't talking about placing your hands on the person unless they need that. We are talking about remaining close to the person to be there to guide or catch them if they appear to be falling. Initially you will want to stand too close, keep your hands on the person and in general "hover". Try not to do that! Work on keeping some distance without placing your hands on people.</p>






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<p>Tools</p> 		<p>Invite participants to practice helping a person (partner in the class) to walk.</p> <p>Skill: Assisting an Individual to Walk</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Encourage individual to wear properly fasten non-skid footwear. 3. Stand in front of and face the individual. 4. Brace the individual’s lower extremities. 5. With transfer (gait) belt: <ul style="list-style-type: none"> o Place belt around the individual’s waist and grasp the belt while assisting him / her to stand. o Walk slightly behind and to one side (weaker side, if any) of individual for the full distance, while holding onto the belt. 6. Without transfer belt: <ul style="list-style-type: none"> o Place arm around individual’s torso while assisting him / her to stand. o Walk slightly behind and to one side (weaker side, if any) of individual for the full distance with arm supporting his / her back. 7. Assist individual to where he/she is going and remove transfer belt, if used.
<p>Activity</p>		<p>Pair up students and use their Fundamentals information from the Toolkit. Review each of the steps while you model the process with one of the students reminding everyone to follow each step in order. Be sure to point out where to stand and what to look for if they are to prevent a fall. (No hands in pockets, standing close by to catch, controlled falls better than a full on fall,...)</p> <p>Ask one staff to be seated in a chair when care begins for this skill. The client requires stand-by assistance and does not use assistive devices to walk. The role of the individual supported is played by another student.</p>
<p>Ask</p>		<p>Debrief their learning through asking questions about their experience as both the individual supported and playing the role of the staff. How comfortable did you feel? What are the risks while assisting someone else?</p>
<p>Immerse (8 minutes)</p>		
<p>Note</p>		<p>Note to Facilitator: Have upbeat work appropriate music cued up on a device or via internet access.</p>
<p>Activity</p>		<p>Start the activity by having everyone position themselves in their chairs so that they can extend their arms straight out to their sides.</p>



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<p>Say</p> 		<p>“Ok, everyone, let’s do some arm circles! Ready, begin!” As you do the arm circles with them, count aloud. When you get to 20 tell them to flip their hands over (palm up or down). Begin the count at 1 again, and stop after 5.</p>
<p>Ask</p>		<p>“Is anyone bored yet?” Most likely more than one person (including you) will say “yes!”</p>
<p>Ask</p> <p>Say</p> <p>Activity</p> 	  	<p>“Would anyone rather have a dance party?”</p> <p>“If you work with people who have limited mobility and/or use a wheelchair, you might need to be creative to help them move their bodies in fun ways.”</p> <p>Start the music, and say “It’s time for a seated dance party!” Encourage participants to share what dance moves they know, from a seated position. Choose music to last for at least 2-3 minutes.</p>
<p>Say</p> 		<p>Many of the people we support require some additional assistance with movement. They may have injured themselves at some point in their lives or due to inactivity may just need some movement. It will be your job to support them with the range of motion.</p> <p>Raise your hand and ask Has anyone ever broken a bone? Maybe you sprained something? During your care or after the cast was removed what happened? (physical therapy, stretching) All of these activities helped your muscles return to their happier state. By doing the exercises you can still bend your knee, move your ankle, bend your wrist and what have you. People who sit and do little or don’t get the same exercise that you do, need to have their body parts moved or they will lose use of them.</p>
<p>Show</p> 		<p>Show Video on Passive Range of Motion (3 min. and 11 sec.) https://www.youtube.com/watch?feature=player_embedded&v=XORFTjO9Dgk</p>
<p>Apply- Demonstrate Learning Application to Real Work (30 min. depending upon class size)</p>		







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<p>Note</p>		<p>Note to Facilitator: Model this skill for your class, discussing where you should stand, where your hands go and what support you are providing. Remind your students that people who need this support may be in pain while you are assisting them and that they should go slowly and check in frequently regarding level of pain and discomfort. Watch while each person practices with their partner on a knee, elbow or ankle.</p>
<p>Teach and Train</p>		
<p>SAY</p> 		<p>Other movement assistance may be in the area of other moving body parts. Again, use it or lose it. When you are sitting at your desk do you do body stretches? What kinds? Take some answers. (shoulder rolls, standing up, fingers stretches will be among the answers) Right? When you have been sitting for a long period of time, you begin to feel your body stiffening up.</p> <p>Now imagine being in a chair all day long when the staff doesn't plan for activities to keep people moving? What would you want your support staff to provide for you? Is it important TO you or FOR you? Take some answers. (They will vary.) The same is true for the people we support. It may be important for them to hike 5 miles a day but if they don't choose to move it is still important for them to move. It is our responsibility to ensure that they are moving.</p> <p>Some of the people we support actually have plans that include passive range of motion activities that need to take place daily for their health. You will be tested on shoulder, knee and ankle movements but you may be trained to work with someone who needs something different. You will be trained as needed for each individual that needs this assistance.</p>
<p>Apply – demonstrate passive range of motion for a shoulder, ankle and knee.</p>		
<p>Activity</p> 		<p>Have students pair with a partner and practice the steps for each body area. They should be starting with SWIPES and talking through each step as they have done with each skill prior to this.</p> <p>Skill: Passive Range of Motion for One Shoulder</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. While supporting the limb through the following exercises, move joint gently, slowly, and smoothly through the range of motion to the point of resistance. Stop if pain occurs.




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		<ol style="list-style-type: none"> 3. Support individual’s arm at elbow and wrist, while performing range of motion for shoulder. 4. Raise individual’s straightened arm toward ceiling, back towards the head of bed and return to a flat position. Repeat at least three times. 5. Move individual’s straightened arm away from their side of body toward head of bed, And return individual’s straightened arm to midline of their body. Repeat at least three times. 6. Place individual’s flexed elbow at individual’s shoulder level, rotate forearm toward head of the bed and rotate forearm down toward hip. Repeat at least three times. 7. Wash hands. <p>Skill: Passive Range of Motion for One Knee and Ankle</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. While supporting the limb through the following exercises, move joint gently, slowly, and smoothly through the range of motion to the point of resistance. Stop if pain occurs. 3. Knee. Support individual’s leg at knee and ankle while performing range of motion for knee. 4. Bend the knee to the point of resistance and then return leg flat to bed. Repeat at least three times. 5. Ankle. Support foot and ankle while performing range of motion for ankle. 6. Keeping the individual’s foot on bed, push/pull foot toward head and push/pull foot down, toes point down (as if pushing down or letting up on a gas pedal in a car). 7. Repeat at least three times. 8. Wash hands.
<p>Note</p>		<p>Note to Facilitator: Have students practice in pairs. As the facilitator, you will need to walk among the groups to ensure that the steps are being performed correctly and adjusting technique as needed.</p> <p>Section 2 lends itself to practicing all of the skills as a round robin. Set up stations for students so they visit each station and practice each skill. Everyone can be practicing a different skill at the same time. Length of training will most likely remain the same.</p>
<p>Section 3: Total Time – 2 hours</p>		
<p>Immerse: Medication Assistance</p>		






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<p>Say</p> 		<p>In Chapter 8 we learned about health management and in chapter 9 we learned about medication management. You may have reviewed these steps during your training on chapter 9 but this will serve as a way for us to check your understanding of the steps for medication management.</p>
<p>Toolkit</p>  		<p>Review the steps. When you take your exam you will not be tested using a blister pack or other methods of med packing. You will be given a try full of prescription bottles and asked to give medications to a person they name. You will need to find the correct bottle and check your five rights. Hold up your hand. Ask students to hold up their hand and then go through each finger and which right is being checked. (start with the thumb – right person) After everyone has reviewed the five rights, review the skills in their Fundamentals for medication assistance.</p> <p>Skill: Medication Assistance</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Remind the individual it is correct, scheduled time to take his/her prescribed medication. 3. Take the medication container from where it is stored, look at the label, and verify the 5 Rights—medication, individual, amount, route, and time. 4. Open the container, look at the label and verify the 5 Rights again. 5. Hand the correct dosage to the individual, hand the open container to the individual, or transfer the medication to an enabler. 6. Offer the individual a full glass of fluid (for oral medications). 7. Observe and make sure the medication is taken. 8. Close the medication container and put it back in the appropriate place. Read the label and verify the 5 Rights once again. 9. Document that the individual has taken the medication. If he/she has not, document that as well. 10. Common care practices were followed. 11. Wash hands.(skill taught in Safety training)
<p>Activity</p>		<p>Provide students with prescription bottles with the names of Winnie the Pooh and various characters on them. Follow prescription labels and try to make your labels as close to the real thing as possible (your pharmacy may prepare the bottles for you and fill them with candy.). Ask students to follow the steps for assisting with medications.</p>
<p>Note</p>		<p>Note for Facilitator: As you observe, ensure that no Nurse Delegated tasks are done in this process. Course correct as needed. Review documentation skills by going back to the chapter’s Fundamentals section to review the MAR documentation. If you have had any medication errors during this training time from these students, ensure that you are correcting their errors with them to reduce the number of</p>





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		errors you will have to deal with in the future.
Immerse: Assisting a person to eat		
<p>Say</p> 		<p>Remember when you learned about nutrition and that some people may eat too fast or too slow? Are you experiencing this as you meet the people we support? What have you learned to do based on the programs you are learning to run? (Take some answers. This assumes that people have met some of the people they will support and have been working at the house.)</p> <p>Another task that you may be required to complete to support people is to assist with eating. Each person who needs assistance with eating will have a plan written into their IISP for you to follow. Some may eat too fast and you are only there to slow them down to prevent choking. Some may have difficulty swallowing and have a condition called dysphagia. This would mean that their food needs to be a certain consistency to prevent them from choking. If you take nothing else from this portion of training take this – DO NOT GIVE ANYONE FOOD without first checking their IISP or meal plan for instructions. The instructions will also include food allergies, special diets, texture requirements and instructions for how to slow someone down. Instructions are specific to the individual.</p> <p>Show an example of eating instructions for someone at your agency. If you don't have anyone who needs these instructions, say so but teach the skill as a general knowledge area.</p>
<p>Toolkit</p>		<p>Review the steps in the Fundamentals for assisting a person to eat.</p> <p>Skill: Assisting an Individual to Eat</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Assist individual to put on clothing protector or cover, if needed. 3. Ensure individual is in an upright, sitting position. 4. Sit at individual's eye level. 5. Offer the food in bite-size pieces - alternating types of food offered. 6. Make sure the individual's mouth is empty before offering the next bite of food or sip of beverage. 7. Offer a beverage to the individual during the meal. 8. Talk with the individual throughout meal. 9. Wipe food from individual's mouth and hands as necessary and at the end of the meal. 10. Remove clothing protector if worn and dispose of in proper container. 11. Remove leftover food.





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		12. Wash hands as final step
Apply		
Activity		<p>Find a partner. Together, determine what supplies you will need to gather and get them ready.</p> <p>Using your Fundamentals skills checklist, practice following the steps. When one person is finished, the other should run through the steps. Let each person choose from pudding, applesauce or other options that you have provided.</p>
Say		<p>Why do you think we use clothing protectors? (protect the clothing and financial burden of replacing them) What other types of adaptive equipment might people use? If you have people who use adaptive equipment for eating, show it here and explain what it does for the person. This would include special plates, utensils, cups, or tube feeding.</p> <p>Tell students that any adaptive equipment will be trained again during their Coaching sessions with the individual.</p>
Immerse: Mouth Care and Denture Care:		
Say	 	<p>Did everyone assist with brushing and flossing teeth during your on the job training? What were some of the challenges you faced? Take some answers. The skills test assumes that you are not facing these challenges and that everything will go smoothly. The steps for using a tooth brush will be tested during your exam.</p> <p>(If you have not practiced brushing someone else's teeth – Chapter 11 - Ensure that you do so now.) Practicing this skill with other staff is of benefit to the people we support.</p>
Activity		<p>Let's experience the process for supporting someone with oral hygiene practices.</p> <p>Ask: what's the proper way to brush your teeth? (small circles, up and down, electronic toothbrush)</p> <p>Ask: Do you brush your tongue? Do you think some people may brush their tongue? What if you brush your tongue but someone you support does not? How would you know if they brush their tongue? (ask, IISP)</p> <p>What about flossing? Does everyone floss their teeth? Is it important?</p> <p>Pair participants together and have them choose who will be the</p>





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		<p>“teacher” and who will be the “learner.” Prompt the “learner” to act as though they do not know how to brush or floss their teeth, have never seen a toothbrush, toothpaste, or flosser before, nor know how to do denture care. Teachers will brush and floss the learner’s teeth and then they will switch places and do it again. Give students about ten minutes to complete this learning activity.</p>
<p>Toolkit</p>		<p>Refer students to their Fundamentals for steps on brushing teeth.</p> <p>Skill: Mouth Care</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Ensure individual is in an up-right sitting position. 3. Put on gloves. 4. Place towel across individual’s chest before providing mouth care. 5. Moisten toothbrush or toothette and apply toothpaste. 6. Clean entire mouth (including tongue and all surfaces of teeth), with brush or toothette, using gentle motions. 7. Assist individual to rinse his/her mouth. 8. Assist individual to spit into sink. 9. Wipe individual’s lips and face, and remove towel. 10. Dispose of soiled linen in soiled linen container. 11. Clean and return toothbrush, toothpaste, etc. to proper storage. 12. Remove gloves and wash hands.
<p>Note</p>		<p>Note to Facilitator: Before students begin ask them to use a sharpie and mark their toothbrush with their name or a symbol so they will not get them mixed up. Depending on the size of the class, assign the teaching tasks of brushing teeth and flossing evenly amongst the pairs. Then have them change activities to ensure that each student has practiced both skills.</p> <p>Ensure that students each have the proper equipment to practice these skills.</p>
<p>Denture Care</p>		
<p>Say</p> 		<p>As people get older they may have full dentures or partial “plates” that require special care. We are not planning to use real dentures for our practice today. As you can imagine, no one wanted to loan us theirs for practice!</p> <p>Demonstrate proper denture care by following the steps in the Fundamentals. Ask students to follow along while you demonstrate. Discuss the use of denture cream to clean dentures NOT toothpaste.</p>






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		Discuss soaking verses brushing. (Soaking happens after the teeth have been brushed and does not replace it.) Make sure you talk through all of the steps to model this as part of the practice.
Toolkit		<p>Clean and Store Dentures</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Put on gloves. 3. Line sink/basin with a towel/washcloth or by filling it with water. 4. Obtain dentures from individual or gently remove them from individual’s mouth if he/she is unable to do so. Take the lower denture out first, then the upper denture. 5. Rinse dentures in cool running water before brushing them. 6. Apply toothpaste or denture cleanser to toothbrush. 7. Brush dentures on all surfaces. 8. Rinse all surfaces of denture under cool, running water. 9. Rinse denture cup before putting dentures in it. 10. Place dentures in clean denture cup with solution or cool water. 11. Return denture cup to proper storage. 12. Clean and return supplies and equipment to proper storage. 13. Dispose of sink liner. 14. Remove gloves and wash hands.
Activity		Now it’s your turn! Pass out the silly teeth or wind up toy teeth for practice. Tell students to ensure they brush all surfaces to pass!
Immerse: Assisting a person with a bed bath		
Toolkit	 	<p>Let’s talk about bathing. One of the skills you need to practice is to provide a person a bed bath. These same skills can be applied when you are assisting with bathing a person in a tub or a shower as well. But remember that the person should do as much of the bathing as they are capable of doing. For the test however, the assumption is that the person is in bed and needs a bath.</p> <p>Skill: Bed Bath</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Put on gloves. 3. Remove or fold back top bedding. Keep individual covered with bath blanket or top sheet. 4. Remove individual’s gown/sleep wear. 5. Test water temperature and ensure it is safe. Adjust if necessary. Replace the water at any time it gets soapy, cool, or dirty.








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		<ol style="list-style-type: none"> 6. Wet washcloth (no soap) and begin with the eyes. Use a different area of the washcloth for each eye, washing inner to outer corner. 7. Wash the rest of the face, ears, and neck, using soap (if the individual prefers). 8. Rinse. Dry areas with a towel – pat, don't rub. 9. Expose one arm and place a towel underneath it. Support the individual's arm with the palm of your hand underneath the individual's elbow. Wash the individual's arm, shoulder, and armpit. Rinse and pat dry. 10. Place the individual's hand in the water basin. Wash the individual's hand, rinse, and pat dry. Repeat with the other arm and hand. 11. Wash, rinse, and pat dry the individual's chest and abdomen. 12. Uncover one of the individual's legs and place a towel lengthwise under the foot and leg. Bend the knee and support the leg with your arm. Wash the leg, rinse, and pat dry. 13. Slide the individual's foot in to the water basin. Wash the individual's foot, rinse and pat dry. Repeat with the other leg and foot. 14. Assist the individual to turn on his/her side, away from you. Place a bath blanket or towel alongside his/her back. 15. Wash the individual's back and buttocks, rinse and pat dry. 16. Assist the individual to his/her back. Provide privacy and let the individual perform his/her own perineal care. 17. Assist individual to get dressed. 18. Assist the individual to get up, or assist in a comfortable position if remaining in bed. 19. Remove bedding that may have gotten wet. 20. Empty, rinse, wipe bath basin and return to proper storage. 21. Place soiled clothing and linen in proper container. 22. Remove gloves and wash hands.
<p>Show</p> 		<p>Watch the video: https://www.youtube.com/watch?feature=player_embedded&v=xYOxfPyutOI</p>
<p>Ask</p>		<p>What are some of the skills you see that also transfer into bathing someone as they shower or take a bath?</p>
<p>Immerse: Shaving with a safety razor</p>		
<p>Say</p>		<p>If you have been assisting people with shaving, what kinds of tools are you seeing that people use? (electric, trimmers, creams, safety) For the purposes of this skill you will be using safety razors.</p>





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<p>Toolkit</p> 		<p>Review the steps for shaving with the class. Ask if they have been shaving others or they practiced during the chapter 11 course work? What challenges did you face (or think you will face)?</p> <p>The Shave (With Safety Razor)</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Put on gloves. 3. Ask individual if he wears dentures. If so, make sure they are in his mouth. 4. Wash face with warm, wet washcloth. 5. Apply shaving lather to the area you are going to shave. 6. Hold razor securely. 7. Hold skin taut with free hand and shave with smooth even movements in the direction of hair. 8. Rinse safety razor in warm water between strokes to keep the razor clean and wet. 9. Shave sides first, then nose and mouth. 10. Wash, rinse, and dry face. 11. Clean equipment and put away. 12. Remove gloves and put in appropriate container. 13. Wash hands as final step.
<p>Note</p>		<p>If you did not practice in Chapter 11, use this activity to practice shaving using balloons and shaving cream in the Facilitator’s Guide. You may determine a different way to practice this skill with your new staff. Make sure you include clean-up instructions for this activity and where to put razors so you can reuse them.</p>
<p>Say</p>		<p>In a setting where all men lived together, the staff all had beards. It wasn’t too long before the people who lived there also had beards. Was that ok? (Answer: Yes, they asked the people if they wanted the same thing and it was their choice.)</p> <p>Today you are going to learn to shave someone else. I know you know how to work a razor, but shaving someone else is a little bit different. We’re going to have some fun while doing it.</p>
<p>Note</p>		<p>Demonstrate: Take a balloon and blow it up or have one blown up prior to class. Demonstrate putting shaving cream on the balloon (you don’t have to use too much) and then remove the shaving cream using a safety razor. Note how the balloon moves while you are trying to shave it. Does that happen with people we support?</p>

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		Have each student gather the supplies they need to shave someone. Each should have a balloon and razor but can share the can of shaving cream.
<p>Say</p> 		<p>In our setting we also have people who use electric razors. (Provide one for people to see.) Describe what procedures are used to shave with an electric razor. Are there lotions to use to prevent irritation?</p> <p>Discuss any people in your setting who do not get shaved and why.</p>
<p>Ask and Discuss</p>		<p>Are there lotions to use to prevent irritation? Discuss any why some of the people you support do not use lotions after shaving or who do not get shaved and why.</p>
Immerse: Foot care		
<p>Say</p> 		<p>Today we have the opportunity to give ourselves a little mani/pedi.</p>
<p>Note</p>		<p>If you are comfortable, share the skills sheets and set up stations in the room for foot and nail care. You will need to have materials already gathered and set up so all they have to do is provide the skill.</p> <p>Pair up students. Have each one provide either foot or nail care. Walk through the steps for each skill and provide reasons why we provide this care. Refer back to chapter 11 on salon access. Review foot care and fingernail care using Chapter 11 as a guide.</p>
<p>Toolkit</p>		<p>Skill: Foot Care</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Put on gloves. 3. Put water in basin. Test water temperature. Ensure it is safe and comfortable

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		<p>before placing individual’s feet in water. Adjust if necessary.</p> <ol style="list-style-type: none"> Put the individual’s foot completely in the water. Supporting foot and ankle properly throughout procedure, remove foot from water, wash entire foot, including between toes, with soapy washcloth. Rinse and then dry entire foot, including between toes. Pat, don’t rub dry. Gently clean dirt out from under nails using nail file. File or cut nails, straight across, as needed with clippers or emery board. Put lotion in your hand and massage lotion on individual’s entire foot. Remove excess (if any) with towel. Assist individual to replace socks and shoes. Empty, rinse, wipe bath basin, and return to proper storage. Remove gloves and wash hands.
Toolkit		<p>Skill: Fingernail Care</p> <ol style="list-style-type: none"> S.W.I.P.E.S. Put on gloves. Put water in bowl. Test water temperature to make sure it is safe and comfortable before placing individual’s fingers in water. Adjust if necessary. Place water at a comfortable level for individual. Put individual’s fingers in water and allow to soak. Dry individual’s hand including between fingers. Pat, don’t rub dry. Clean under nails with a nail file. Wipe nail file on towel after each nail. Groom nails with file or emery board. Finish with nails smooth and free of rough edges. Empty, rinse, wipe water bowl, and return to proper storage. Dispose of soiled linen properly. Remove gloves and wash hands.
Activity		Mani/pedi for team! Remind them to follow the steps and to use these steps as they support people.
Section 4: Total Time		
Immerse: Toileting/ bed pan / peri care / catheter care		
Say		I can’t promise you an easy conversation for this section of training. Of all of the skills we assist people to complete, this category is the most uncomfortable to everyone. It is intimate, personal, embarrassing. It is a fact of life and necessary. We will be using proper names for body parts, discussing respectful behavior during this care and ending with topics on supporting people while toileting, bed pan use, catheter cleaning and peri
		

		<p>care. It just doesn't get more personal than this portion of your training. It is the portion of training that the people we support want you to understand the most.</p> <p>In Chapter 5 we learned that people may communicate in different ways. What are some observable signs that someone needs to use the rest room – quickly or within the next few minutes? (Take some answers. These may include dancing around, crossing legs, holding crotch.) What are some of the signs the people supported with our agency have demonstrated? You may have people who have their own signs including sign language for toilet, tapping their stomach or making a noise of some kind that is specific to this need.</p>
<p>Toolkit</p>		<p>Toileting</p> <p>Toileting assistance to the individual may include:</p> <ol style="list-style-type: none"> 1. cueing and reminding; 2. assisting the individual to and from the bathroom; 3. assisting the individual transfer on and off and use the toilet or assistive equipment; 4. undoing an individual's clothing, pulling down clothing, and refastening clothing; 5. correctly when he/she is done; 6. pericare; 7. emptying the bedpan, urinal, or commode into the toilet; 8. assisting with pads, briefs, or moisture barrier cream; 9. performing routine colostomy or catheter care. 10. Privacy, dignity, and independence. Toileting is a very private matter. A reassuring attitude from you can help lessen feelings of embarrassment for the individual. The following guidelines are recommended when assisting an individual with toileting: 11. Assist the individual as much as possible into a normal, sitting position. 12. If assisting with a transfer to a toilet or assistive device, make sure the item is stable or locked down before beginning the transfer. 13. Put anything the individual requires within easy reach (e.g. toilet paper or soap to wash up afterwards). 14. If assisting with wiping, move from front to back and wear gloves. 15. When overseeing an individual's bowel and bladder function, your job as a ISS Staff is to: 16. have an understanding of what is and is not normal bowel and bladder function for an individual; 17. encourage the individual to make choices to maintain good urinary and bowel function; 18. know what to document and report to the appropriate person in


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		<p>your care setting if there are problems in this area; and</p> <p>19. respond to the individual’s toileting needs as quickly as possible.</p> <p>As a reminder the following are general tips when assisting a client with toileting.</p> <ul style="list-style-type: none"> • Assist the client as much as possible into a normal, sitting position. • If assisting with a transfer to a toilet or assistive device, make sure the item is stable or locked down before beginning the transfer. • Put anything the client requires within easy reach (e.g. toilet paper or soap to wash up afterwards). • If assisting with wiping, move from front to back and wear gloves.
Note		<p>Note to Facilitator: As you can imagine practicing toileting skills is a little bit impractical. Remember what we talked about with the hands when we started this chapter? Just remember that you don’t always have to grab or hold personal parts to move them around.</p>
Immerse: Bedpan assistance		
Say		<p>Have you ever been a very vulnerable position and had someone make a joke of it? How did that feel? (uncomfortable, embarrassing) As you can imagine, being in bed, not able to move and needing to go to the bathroom makes all of vulnerable. This skill is more about ensuring that you don’t spill anything out of the bedpan! If you have someone who is bed bound, it is more likely that they will feel more comfortable sitting up using the bedpan than lying down, however, each situation will come with it’s own specifics. Be sure to check this out before providing a bed pan for use.</p>
Toolkit		<p>Review the skills with students.</p> <p>Skill: Assist Individual with Use of Bedpan</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Place bedpan correctly under individual’s buttocks (standard bedpan: position bedpan so wider end of pan is aligned with the individual’s buttocks. Fracture pan: position bedpan with handle toward foot of bed). Have individual bend knees and raise hips (if able). 3. Put toilet tissue within individual’s reach. 4. Ask individual to let you know when he/she is finished. 5. Put on gloves before removing bedpan. 6. Remove bedpan and empty contents into toilet. 7. Provide pericare, if needed. 8. Rinse bedpan, pouring rinse water into toilet. Return to proper storage. 9. Assist individual to wash hands and dispose of soiled washcloth
		





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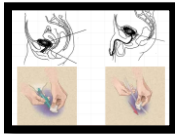
		<p>or wipe in proper container.</p> <p>10. Remove gloves and wash hands.</p>
<p>Show</p> 		<p>While it is preferable to use the toilet in the bathroom, that is not always possible. Assistive equipment, such as a bedpan, commode, or urinal may be used by a client. The client’s Case Manager or your supervisor can assist the client in getting assistive equipment when it is needed. The following are some general tips when helping a client with a bedpan.</p> <p>Show Bedpan Assist video (6 min. and 41 sec.)</p> <p>https://www.youtube.com/watch?feature=player_embedded&v=pEaFac4yjFo</p> <ul style="list-style-type: none"> • Always help the person as soon as requested. • Put a protective pad on the bed before the person uses the bedpan. • If the pan is cold, warm it with warm water. • Once the person is done, keep the bedpan level so it doesn’t spill. <p>Note to facilitator: This skill will not be tested. However, it is part of this curriculum to maintain “sameness” for all training of LTCWs.</p>
Immerse: Pericare		
<p>Say</p> 		<p>Imagine if you will that your Mother just called and said she needs your help. What’s your first response? Of course – I’ll be right over. And then she tells you that she has broken both of her arms and can’t go to the bathroom or take care of her personal needs. Now, what’s your response? Sure! Do you think she was going to be comfortable with you washing and wiping her?</p>
<p>Perineal care (peri care) female</p>		<p>An individual will want to do his/her own pericare if possible. Providing privacy and preserving the client’s dignity are very critical if help is needed by the client. You will be tested on pericare. Pericare is the process of ensuring cleanliness in genitals. It’s a step in preventing bacteria and infection and is part of the activities of daily learning when bathing. Improper wiping after toileting, wearing pads for menses for long periods of time without changing them, not changing briefs can all lead to infections and bacteria growth. This is a simple process in an uncomfortable and personal body location. Dignity and respect are the first things to consider when providing pericare to anyone.</p>

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		<p>Discuss people who need this level of support in your agency. What does that look like when pericare is provided for them? Are there differences from one to the other?</p> <p>Peri care test skills are all about the folding of the washcloth and privacy. If you can remember the folding and wash and rinse process, you will pass this test for the Home Care Aide Certificate, but more importantly the test of relationship building with the person you are supporting. Do it well and quickly. It doesn't matter if you know this person well or not, they will appreciate your confidence and skill in getting the task completed quickly.</p> <p>Before we turn to the skills for this task let's talk about some things that will need to be done first.</p> <p>The following are some general tips when helping a client with pericare.</p> <ul style="list-style-type: none"> • Put down a pad or something else to protect the bed before beginning the task. • Stay alert for any pain, itching, irritation, redness, or rash in this area. Report any concerns to the appropriate person in your care setting. • Alcohol-free, commercial wipes may be preferred by a client instead of a washcloth and soap. • If the client is incontinent, protect him/her from the wet incontinent pad by rolling the pad into itself with the wet side in and the dry side out. Remove the pad and use a clean, dry pad.
<p>Toolkit</p>		<p>Skill: Assist Individual with Pericare</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Test water temperature and ensure that it is safe and comfortable before washing, and adjust if necessary. 3. Put on gloves. 4. Expose perineal area, making sure that the individual's privacy is maintained. 5. Gently wash entire perineal area with soapy washcloth, moving from front to back, while using a clean area of the washcloth or clean washcloth for each stroke. 6. Rinse entire perineal area moving from front to back, while using a clean area of the washcloth or clean washcloth for each stroke. 7. Gently dry perineal area, moving from front to back and using a blotting motion with towel. 8. Wash, rinse, and dry buttocks and peri-anal area without contaminating perineal area. 9. Dispose of linen in proper containers. 10. Empty, rinse, wipe basin, and return to proper storage.

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		<p>11. Remove and dispose of gloves without contaminating self after returning basin to storage.</p> <p>12. Wash hands.</p>
<p>Show</p> 		<p>Show Pericare video. (11 min. and 17 sec.) Please note how many times the cloth is folded and moved so that no part of the cloth touches the skin twice. Ask them how comfortable they will be in their old age without a same gender stand-by performing this task on them? Are you able to provide same sex support at your agency?</p> <p>https://www.youtube.com/watch?feature=player_embedded&v=znJWfio_gjtQ</p>
<p>Note</p>		<p>Best practice is with an anatomically correct mannequin. Since they cost a ton you may find other options at Lovers or Castles. We found those to be expensive too.</p>
<p>Activity</p>		<p>Ok – we are going to practice this. If you do not have an anatomically correct mannequin you should at the very least practice folding the wash cloth for use during washing and another one for rinsing. Hand out the washcloths and</p> <ol style="list-style-type: none"> 1. Demonstrate how to fold the cloth so that all four corners are together. The wash cloth will end in a square. Check to ensure that everyone has folded their cloth the same way. 2. Add a little bit of soap to each corner, folding back the top layer back and keeping the cloth facing in the same direction. Add soap to all four layers – just a little soap will do. 3. Go through the motions of wiping, turning the cloth just as shown from the video. 4. Place the cloth on a dry towel designated for “dirty” 5. Repeat without the soap for rinsing by place the cloth in warm water, wringing it out and then rinsing all of the areas just washed. 6. Place the cloth in the “dirty” pile.
<p>Teach and Train: catheter care</p>		



The following are general tips when helping a client with catheter care.

- Make sure the bag is kept lower than the bladder.
- Make sure the catheter is always secured to the leg to prevent tugging of the tube.
- When emptying the urinary catheter bag, be sure the end of the bag doesn't touch anything. This helps stop germs from entering the bag.
- In some care settings, you may be asked to measure the amount of urine in the bag.

Make sure to observe and report if:

- the urine appears cloudy, dark-colored, or is foul smelling;
- there isn't much urine to empty (as compared to the same time on other days);
- an in-dwelling catheter comes out;
- pain, burning, or irritation.

Urinary catheters

Catheters are tubes that drain urine into a bag. A client may have a catheter because of:

- urinary blockage;
- a weak bladder unable to completely empty;
- unmanageable incontinence;
- surgery (used to drain the bladder during and after surgery);
- skin breakdown (allows skin to heal or rest for a period of time).

Internal catheters

There are three types of catheters that go directly into the bladder to drain urine.


1. **Straight (in and out catheter).**

The straight catheter is inserted into the bladder, urine is drained, and then the catheter is removed.

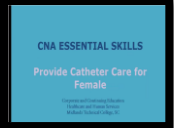




If a caregiver is to insert this type of catheter, the task needs to be delegated to the caregiver under nurse delegation or by the in-home client under self-directed care. The task must be documented in the DSHS care plan and special training is required.

2. **Indwelling Suprapubic catheter.**

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		<p>The indwelling suprapubic catheter is a straight tube with a balloon near the tip. It is placed directly into the bladder through a hole made in the abdomen just above the pubic bone. The balloon is inflated with a normal saline solution after the catheter has been placed in the bladder and keeps the catheter from falling out.</p> <p>3. Indwelling/Foley urethral catheter.</p> <p>The indwelling urethral catheter is also a straight tube with a balloon near the tip but is inserted through the urethra. Caregivers may be asked to clean the tubing or empty the urinary drainage bag (see next page).</p> <p>For either the Suprapubic or Foley catheter, the catheter attaches to tubing that drains the urine into a urinary drainage leg bag or overnight bag. The leg bag is attached to the leg, thigh, or calf. An overnight drainage bag hangs on the bed or chair.</p> <p>This catheter can be left in place for one to two months if there are no problems. It can be removed and replaced with a new one once the old one is removed.</p>
<p>Toolkit</p>		<p>Review the skills with students and ask that they refer to these skills while they watch the video.</p> <p>Skill: Catheter Care</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Test water in basin. Determine if water temperature is safe and comfortable before washing, and adjust if necessary. 3. Put on gloves before contact with linen and/or individual. 4. Expose area surrounding catheter only. 5. Place towel or pad under catheter tubing before washing. 6. Avoid tugging the catheter. 7. Apply soap to wet washcloth. 8. Hold catheter near opening where it enters the body to avoid tugging it. 9. Clean at least four inches of the catheter nearest the opening, moving from the opening downwards away from the body, using a clean area of the cloth for each stroke. 10. Rinse at least four inches of the outside of the catheter nearest the opening, moving from the opening downwards away from the body, using a clean area of the cloth for each stroke. 11. Make sure there are no kinks in catheter tubing. 12. Dispose of linen in proper containers. 13. Empty, rinse, wipe basin and return to proper storage. 14. Remove and dispose of gloves without contaminating self after

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		<p>returning basin to storage.</p> <p>15. Wash hands.</p> <p>Caregivers are not permitted to insert or replace indwelling catheters. Caregivers may be asked to change the urinary drainage bag.</p>
<p>Show</p> 		<p>Show Catheter Care video (6 min. and 54 sec.)</p> <p>https://www.youtube.com/watch?feature=player_embedded&v=jcOT5EXsH1s</p>
<p>Activity</p>		<p>Provide students with some play doh and a catheter. Insert the catheter into a blob of play doh and practice washing the catheter by following the steps in the Fundamentals section of the Toolkit. As you can see, the blob of clay can be male or female as the steps are to clean the catheter, not the person.</p>
<p>Say</p>		<p>The following are general tips when helping a client with condom catheter care.</p> <ul style="list-style-type: none"> • Condom catheters can be difficult to keep in place and should be changed regularly. <p>Making a homemade condom catheter out of a regular condom and tubing is not recommended.</p> <p>Skill: Assist Individual with Condom Catheter Care</p> <ol style="list-style-type: none"> 1. S.W.I.P.E.S. 2. Put gloves on. 3. Expose genital area only. 4. Wash and dry penis carefully, cut long hairs. 5. Observe skin of penis for open areas. 6. If sores or raw areas are present, do not apply condom. 7. Put skin adhesive over penis. 8. Roll condom catheter over penis area. 9. Attach condom to tubing. Check that tip of condom is not twisted. 10. Check that tubing is one inch below tip of penis. 11. Remove gloves and wash hands.
<p>Testing</p>		<p>You are now ready to take the Prometrics Exam for your Home Care Aide Certificate. To prepare you for the exam you should visit the Prometrics website for sample test questions and instructions for applications. The Prometrics written exam is available in 12 languages.</p> <p>Provisional certificates: If you need additional assistance due to a learning disability or English is your second language and you need more</p>

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		time to complete the test, please ask for this at the time of your application. Additional test time can be accommodated with advance notice. See the Prometrics website for additional information.
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Brush Teeth	Wash hands
Change sheets	Set the table
Write a letter	Make a Peanut Butter and jelly sandwich

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Bumper Cars:

Have people pair up with someone they don't know. One person stands behind the other and they face in the same direction. The person in front is the "car" and the person in back is the "driver".

Say: Every day we work with people whom we ask to trust us. Trust us with your money, your personal care, your safety and your activities. Let's see what that feels like.

1. To start your car, tap lightly on the back one time.
2. To move your car forward, tap lightly twice.
3. To turn right tap lightly on the right shoulder and left on the left shoulder.
4. To back up tap three times on the back.
5. To stop place both hands on the shoulders.

Remind everyone that this is a brand new car and you don't want to remove any of the new car smell or paint finish!

Give that a try. Allow a minute to move around the room.

Blow a whistle to stop movement.

How many of you drive your car in silence? I bet some of you listen to the radio!

1. To turn the radio on tap lightly on the top of the head.
2. To change the channel, pull gently on the right earlobe.
3. To change the volume, pull gently on the left earlobe.
4. To turn the radio off, tap gently twice on the top of the head.

Allow about 30 seconds for this to take place. Blow your whistle again and ask that the team change places, the car becomes the driver!

Debrief – what did it feel like to put your trust in another person?