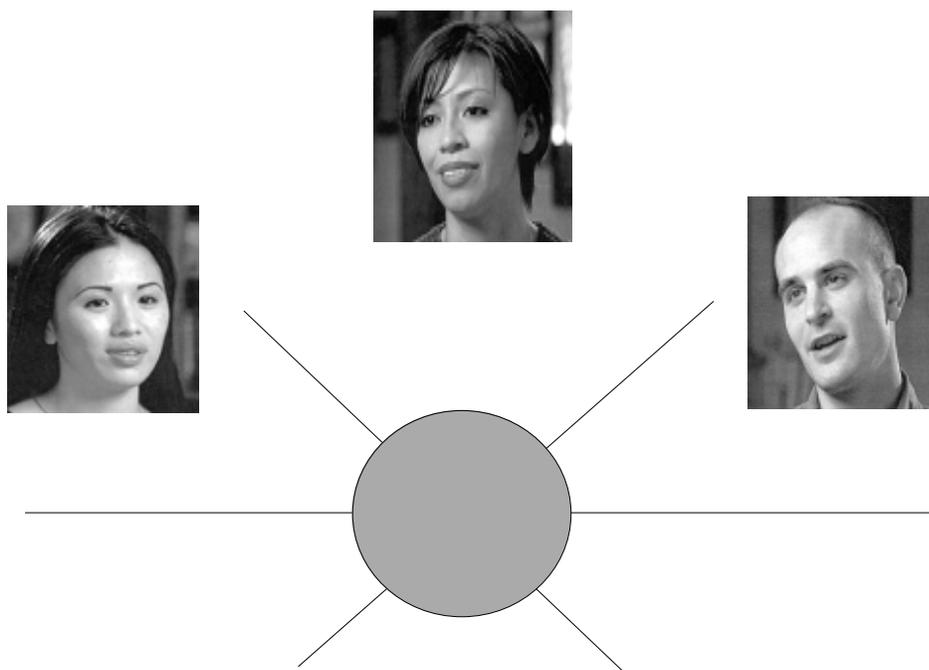


Caregiver Orientation Workbook



For Individual Providers



ADSA Aging & Disability
Services Administration
www.adsa.dshs.wa.gov

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Caregiver Orientation Workbook



Introduction

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How to Use This Workbook and Video

This two-hour self-study course gives you the basic information you need to get started as an in-home caregiver.

This orientation gives you an overview of:

- Communication skills that will help you get a good start with your employer.
- Rights you need to be aware of.
- Infection Control.
- Fire and Life Safety tips and knowledge you need to be a good caregiver.

You will learn more about these and other topics when you take the Basic training class. The Revised Fundamentals of Caregiving is the DSHS curriculum that meets the Basic training requirement.

Although you have 120 days to complete the Basics class, it is to your benefit to take it as soon as possible.

This Workbook is designed for use with the Orientation Workbook Video.

Make sure you have both the Workbook and the Video before you begin.



Getting Ready

- Start by choosing a quiet place to work.
- You'll need a pencil or pen, a VCR, and a TV.
- The self-study course takes about 2 hours. Try to schedule a time when you don't need to do other things.

The course takes about 2 hours.

Information Boxes are found on the right-hand side of workbook pages



Safety

Safety boxes give information on:

- How to prevent accidents.
- How to handle emergencies.
- How to make sure your employer's home is safe.



- Efficiency boxes give tips on how to make your work faster and easier.



Dignity

- Dignity boxes have ideas on:
 - How to show your employer respect.
 - How to build a good relationship with your employer.

The picture tells you what kind of information is in the box.

Orientation Workbook

Using the orientation materials

During this orientation, you will go back and forth between the Workbook and the Video. For each section, you will:

1. Read a section in the workbook.

2. Watch the video when you see a TV in the workbook.



Clip 1

3. Stop the video and go back to the Workbook when you see the stop sign on the video clip.



4. Complete the Safety Check questions. Check your answers on the Answer Key to find out how much you've learned.

Efficiency

Using this self-study course

- Read the Workbook. Learn as much as you can. It's OK to underline new ideas or to write notes on your book.



Chapter 1

- Read the Question Page. Make notes about each caregiver's decision.



Question Page

- Watch the video.



Clip 1

- Go back to the Workbook. Review the information on the Answer Page.



Danger
Caution
Good

- Answer the Safety Check questions.



- Read the Answer Key to find out how much you've learned.



Each chapter follows this order.

Your Job is Important

As a caregiver, you support the well-being of your employer. You help your employer continue to live in his/her own home and keep his/her independence.

Doing your job correctly is so important that rules, called the Washington Administrative Code (WAC), were put into place to outline what is required of you. The information in this orientation course will prepare you to meet the requirements of these WACs.

In the WAC, the employer is called “the client.” AAA is the local Area Agency on Aging.



WAC 388-71-0515

Responsibilities of an Individual Provider

1. Understand the client's service plan.
2. Provide the services as outlined on the client's service plan.
3. Accommodate the client's individual preferences and differences when providing care, within the scope of the service plan.
4. Contact the client's representative or case manager when there are changes which affect the personal care and other tasks listed on the service plan.
5. Observe the client for change(s) in health, take appropriate action, and respond to emergencies.
6. Notify the case manager immediately when the client enters a hospital, or moves to another setting.
7. Notify the case manager immediately if the client dies.
8. Notify the department or AAA immediately when unable to staff/serve the client.
9. Notify the department/AAA (in writing, with two weeks' notice) when the individual provider or home care agency will no longer provide services.
10. Complete and keep accurate time sheets that are accessible to the social worker/case manager.
11. Comply with all applicable laws and regulations.

You must follow these rules.

The Care Team and Setting

The Care Team

For in-home care, a case manager, an Individual Provider (IP), and an employer work together as a team.

Case managers are employees of the Washington State Department of Social and Health Services (DSHS) or the Area Agency on Aging (AAA).

They work with the employers to decide what type of care is needed. Case managers visit your employer to see if there are changes in their care needs.

Between visits, they depend on IPs to report any changes in the employer's condition. You can call the case manager if you have any questions, problems, or concerns.

Individual Providers (IPs) are responsible for doing the care tasks listed on the employer's Service Plan. You will read more about Service Plans in Chapter 1.

Your **employer** is the person receiving care. His or her care team may also include family, friends, doctors, nurses and other medical staff.

The Care Setting

As an IP, your workplace is your employer's home. While providing care, you will learn more about your employer's private life than you would in other types of jobs. You may even lose a sense of what is work and what is personal life.

Over time you may develop strong bonds with your employer - you may feel almost like a friend or family member.

However, it is important that you remember this is your job.

Keep the relationship with your employer professional.



Guidelines for working in home

- Show up on time and be ready to work, as you would for any other job.
- Provide care only as written in your employer's Service Plan.
- Follow your employer's instructions on what food you may eat, and where and if you may smoke.
- Ask permission to use the telephone, TV, radio, or computer.
- Never borrow money or your employer's personal possessions.
- Don't bring your friends, relatives, or pets to your employer's home.
- Never accept gifts, money, or loans from your employer



Keep your relationship professional.

Caregiver Orientation Workbook



Chapter 1. Communication

- Service Plans 1-2

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Communication: Service Plans

Before you were hired, a case manager visited your employer's home. Together they decided the tasks your employer needed help with. They also talked about how these tasks would be done. The case manager then wrote all of these things down in a plan of care, called a Service Plan.

The Service Plan is made up of two sections: the Service Summary and the Assessment Details.

The **Service Summary** gives you:

- An overview of your caregiver responsibilities;
- A description of what other care team members will be doing to support your employer; and
- Contact information for other care team members.

The **Assessment Details** provides information on:

- Your employer's needs, strengths, limitations, and preferences;
- Any special equipment; and
- Caregiver instructions for each task.

Before you begin work, you will get a copy of your employer's Service Plan. Read through it carefully. If you have the Service Plan with you, look at it now. A sample plan is in the back of this workbook.

Your job is to complete the tasks on the Service Plan that are assigned to you.

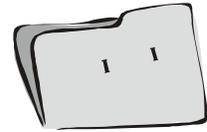
A good way to help you understand your job duties is to talk to your employer about each of your assigned tasks.



Dignity

Talking about the Service Plan

It's important to talk about the Service Plan as soon as you begin a new job because:



- Both you and the employer need to know what you are expected to do.
- Both you and the employer need to understand the limits of your work.
- You can avoid misunderstandings later if you discuss the care tasks carefully.
- You and your employer will feel like part of the same team if you discuss the care tasks together.



Efficiency

An important part of starting your new job

- Sit down with your employer and go through all the tasks on the Service Plan.
- Highlight the tasks that you will do.
- Make sure you understand how and when to do the tasks.
- It may take more than one talk to go over the whole Service Plan.
- If you feel uncomfortable doing any of the tasks, contact the case manager.
- Only the case manager can change the Service Plan.



*Go over the Service Plan
with your employer*

Good Communication:

Ask

Asking good questions is an art. Make sure the way you ask questions of your employer gets you the information you need.

- Ask questions **specific** to the task.

For example:

“Do you prefer to take a bath or shower?”

- Ask questions that are **open-ended** rather than questions that can be answered “yes” or “no”.

For example, asking:

“What would you like for breakfast?”

will get you better information than asking

“Do you want breakfast now?”

- Ask questions that start with ‘**what, when, where, why, and how**’.

For example, the service plan says you are to assist with bathing. Ask questions like:

“How hot do you like your bath water?”

“What type of soap works well for you?”

“Where can I find your towels?”

Asking good questions will help get the information you need to work well with your employer.



Dignity

The foundation of good communication

Be patient if your employer finds talking about these issues difficult.

- They may not be used to talking about such personal matters.
- They may find it hard to admit that they need help.
- It may be hard to explain a routine they have had for years.
- They may be in pain or confused.

Practice patience with your employer.



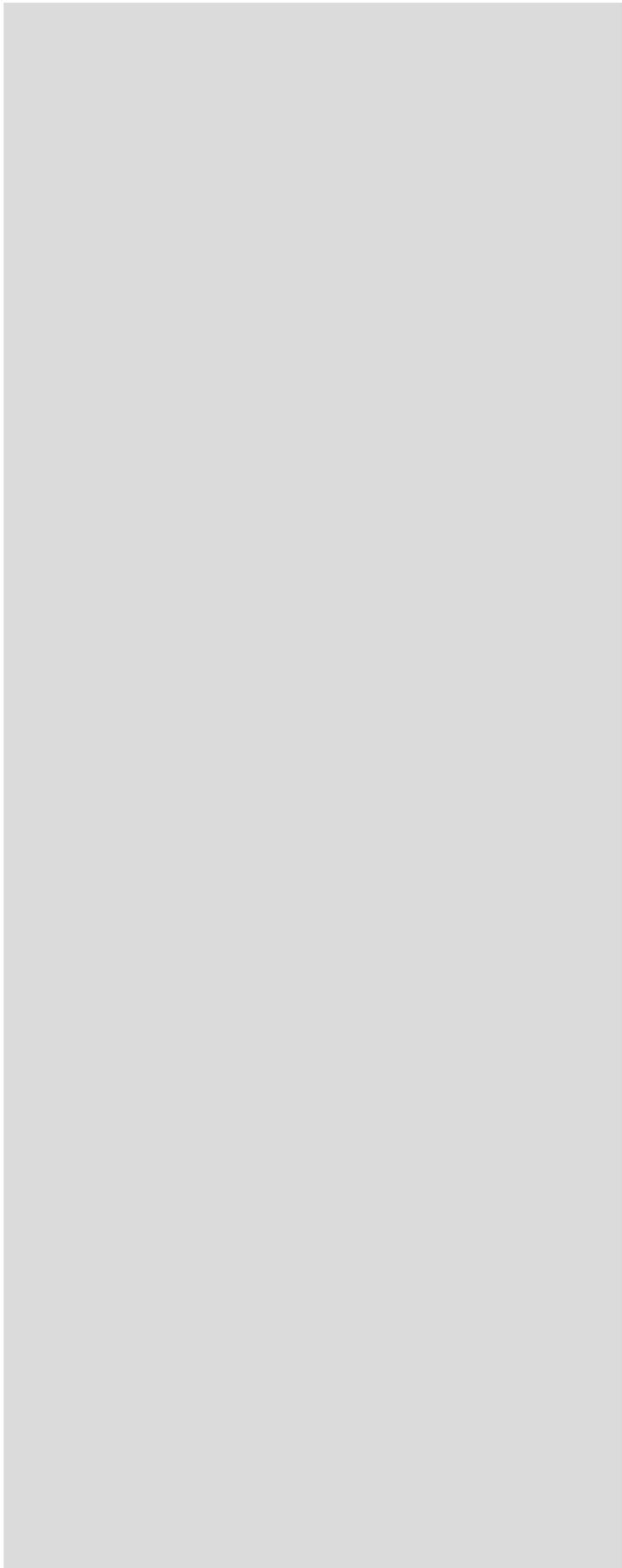
Efficiency

When you begin a new assignment

- Discuss your work schedule with your employer and write down what you decide.
- Decide when you will start and stop work each day.
- Decide when you will take breaks each day and for how long.
- Decide what you will do if you are ill or cannot work.
- Agree on when you will be paid if your employer participates financially for care.



Start your new job with a professional attitude.



Caregiver Example

When making meals was in the Service Plan...



Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

An IP sits down with a new employer, Mrs. Smith, to discuss the Service Plan. The IP says, "The Service Plan says I'm supposed to help you with your breakfast."

Read what Maria, Lilly, and Alex did.



Maria

I said, "Do you like pancakes? Coffee? Do you want to eat at 8 o'clock? Do you always eat in the kitchen?" She said yes. Then I moved on to discuss the next task - I could tell she was getting tired, and I wanted to finish up.

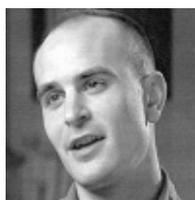
notes _____



Lilly

I asked, "Is it okay with you if I make your breakfast?"

notes _____



Alex

I asked, "What do you like for breakfast?"

notes _____



To learn what happened, watch **Video Lesson #1.**



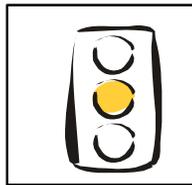
Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

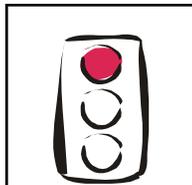
When making meals was in the Service Plan...



Maria

Caution *The next morning, I made scrambled eggs because I couldn't find any pancake flour. Mrs. Smith was annoyed - she said she can't stand eggs. How did she expect me to know what she doesn't like?*

- Even if you ask many "yes-no" questions, you may not get the information you need.



Lilly

Danger *The next morning I made Mrs. Smith an omelet as a special breakfast. "I can't eat this," she said, "I don't like eggs." I realized that we hadn't talked about what she likes for breakfast. So we sat down and made a list of what she'd like me to fix for her.*

- It's worth it to take the time to learn everything you can about your employer's likes and dislikes.



Alex

Good *Mrs. Smith told me that she likes pancakes. Then I asked her what she **doesn't** like. She said she doesn't like eggs. It was easy to fix her breakfast the next day because I knew exactly what she liked. We started our relationship well.*

- To get the most complete information from your employer, ask open-ended questions that use what, why, how, and when. Don't ask questions that can be answered with a simple "yes" or "no".

Listen

Good listening helps build trust with your employer and shows respect.

If you're a good listener, you encourage honest sharing of thoughts and feelings.

You also give your employer time to find the right words.

- Encourage the speaker to continue by saying "I see," or "Um-hmm," or by nodding your head.
- Repeat back what the speaker said to make sure you understood or ask questions for more information.
- Do not jump in with your ideas or advice - wait until you're asked.
- Be willing to listen to things your employer needs to say - don't avoid a subject because you're not comfortable with it.



Dignity

Good listening takes effort

- Give your employer 100% of your attention.
- Don't try to listen while doing something else such as washing dishes or watching TV.
- Face your employer and lean forward slightly. This gives good eye contact and shows interest.



*Good Listening means...
focus on your employer
while listening.*



Dignity

Silence allows time for listening and brings people together

- If your employer is sad or worried, just listening helps.
- Silence gives a person time to think and to choose words.
- Silence gives a person time to control anger or other strong emotions.



Give people time to think and feel.

Observe

As a caregiver, you may be the first to notice a change in your employer’s physical, mental, or emotional condition.

- Use your senses of touch, sight, smell, and hearing as you care for your employer.
- Watch for changes in mood.
- Listen when your employer tells you about feelings or pain.

Contact your employer’s case manager right away if you have any concerns or questions.



Working with your employer

- As you work with your employer, make notes about any concerns or problems you observe.
- Make notes soon after you notice a change so that you don’t forget.
- Describe what you observe, not your opinion.
- Include changes in your employer’s behavior and mood.
- Write down the day you noticed a change, a description of the change, and how long or how often it is happening.
- Use your notes to discuss your observations with your employer and if needed, with his or her case manager.



Keep notes to make it easy to report problems and changes.



Safety

Look for signs of change as you give care

Be ready to report any of the following:

- Change in grooming - dirty clothing, dirty hair, body odor.
- Change in mood - unusually quiet or teary, anxious, fearful, showing extreme grief, or paranoia (saying that someone is out to get them or is taking their money), or is talking of suicide.
- Confusion, forgetfulness, lack of cooperation, giving answers to questions that don’t make sense.
- Any change in ability to walk, stand, or do daily self-care.
- Physical changes that may mean illness, such as swelling, skin rashes, cough, difficulty breathing.
- Change in eating or cooking habits, loss of weight, loss of interest in food and eating, any sign of not having enough to eat.
- Talk of financial problems or asking for help with a problem.
- Remember to write notes about any changes you notice.



When in doubt, report changes to the case manager.

Nonverbal Communication

A person's actions, how they hold their body, and their facial expressions are all nonverbal communication - or body language. Your employer's body language may tell you more about how they feel than their spoken words.

Watch for non-verbal signs that help you observe what is happening with your employer.

For example, what are some non-verbal signs of being in pain? These may include a tight or tense body, rocking back and forth, constantly touching a place that is in pain, a facial grimace or troubled eyes.

For example, what might you assume if you see your employer rocking back and forth, clutching an arm that you know to have arthritis, and notice a grimace on his/her face? You might conclude your employer is in pain.

By being observant of these non-verbal signs of pain, you can:

- Talk to your employer about things you can do to make him or her more comfortable
- Be more careful when performing personal care tasks
- Stay alert to the possibility of a growing problem.

Watch for words and body language that do not match. In most cases, the body will tell you what is really happening.

For example, if your employer says "I'm fine" but their body language tells you they are in pain, the chances are they are not "fine" but are unable or uncomfortable talking about what they are feeling.

Be aware of what **your** non-verbal communication is telling your employer. Your cheerful expression and pleasant tone of voice show a positive attitude.



Dignity

Touch shows feelings

- Ask your employer, "How do you feel about touch?" - some people don't like it.
- A touch on your employer's shoulder or hand can give comfort and show you care.
- Make sure your touch is gentle, neither hurried nor rough.



Nonverbal communication is powerful.

Help

It is your job to help your employer with your assigned personal care and household tasks. For the health and safety of your employer, it is important that you complete all of the tasks assigned to you.

You may have many tasks to do in a short period of time. It is important to establish a routine and help only with the tasks that are your responsibility.

One good rule to follow is this:

- If it is not listed on the Service Plan as your responsibility, don't do it.

If your employer asks you to do something that is not on the Service Plan, you should say:

“I am sorry but I cannot do that. It is not one of the tasks that I am to assist with on your Service Plan.”

An employer's family member or friend may ask you to do something for them. What should you do? You should say:

“I am sorry. I am not here to help family members. It is my responsibility to provide care for my employer only.”



Establish a routine

- When you begin a new assignment, agree with your employer on a routine and then stick with it.
- A routine (or schedule) helps you to finish all your tasks.
- Both you and your employer will know what to expect each day.
- As part of your routine, set aside a time each week to discuss how things are going.

Routines help you and your employer

Caregiver Example



When the brother wanted help with laundry...

Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

Mr. Jones' Service Plan says the IP is to do laundry twice a week. Mr. Jones' brother, who lives with him, brings a basket of dirty clothes to the IP on laundry day.

"Since you're doing laundry anyway, how about doing a load for me?" he says.

Read what Alex and Lilly did.



Alex

I thought about the brother's request, then decided it was no big deal. It wouldn't take much time to do an extra load. Besides, I want to cooperate with Mr. Jones' brother since he lives in my employer's home.

notes _____



Lilly

I said, "I'm sorry, but I can't help you." Mr. Jones' brother didn't like that. So I explained that doing laundry for family members was not part of my employer's Service Plan.

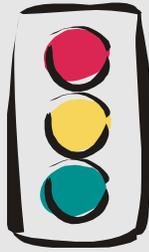
notes _____



To learn what happened, watch **Video Lesson #2.**



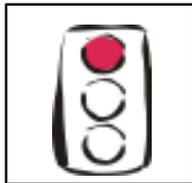
Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

When the brother wanted help with laundry...



Alex

Danger *One day, when I was in the basement doing the brother's laundry, I didn't hear Mr. Jones call for help with his toileting. By the time I got upstairs, he had soiled himself. I felt terrible. I told Mr. Jones' brother that he'd have to do his own laundry.*

- Taking on extra work for an employer's family members is not part of the Service Plan - your job is to care for your employer.
- Any extra work could distract you from giving your employer the best care possible.



Lilly

Good *It was hard for me to say "no" to Mr. Jones' brother, but the Service Plan does not allow me to work for family members. "I have to be ready to help your brother at any time," I said.*

- It's not easy to say "no" to requests that aren't on your Service Plan. Caring for family members is not your job.
- Talk with the case manager if your employer's family members or friends keep asking you to do tasks not on the Service Plan.

Ask again

After working for your employer for a while, it is a good practice to talk with him or her again about tasks in the Service Plan.

Is there anything he or she would like done differently?

By asking again, you can make sure you understand your employer's routine and keep doing the tasks the way that works best for him or her.

Sometimes your employer may not want you to do one of your assigned tasks. It may be that your employer does not feel up to it that day but will the next time you are there. Ask again the next time you are scheduled to do the task.

If your employer continues to refuse assistance with a task, write this down and call the case manager. The case manager will talk to your employer about it.

If your employer decides not to receive help with that task, the case manager will need to change the Service Plan.

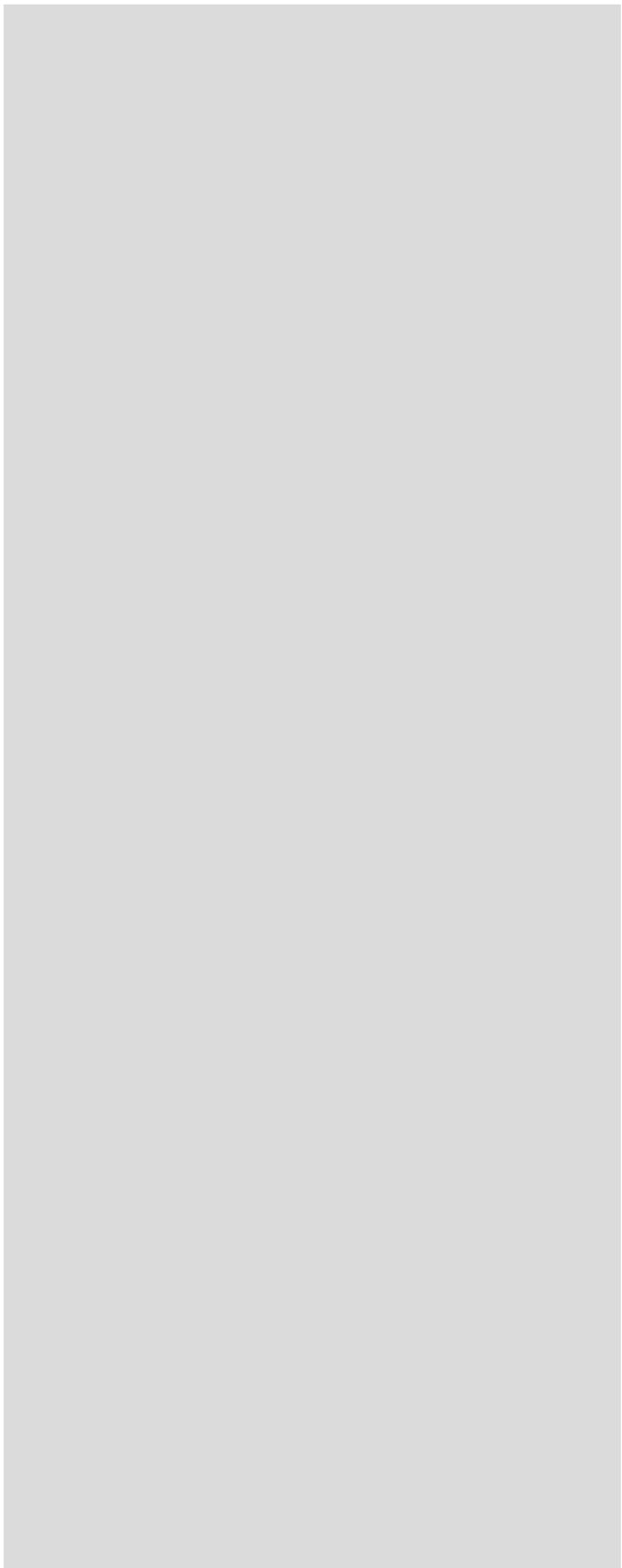
When changes have been made, the case manager will send you a copy of the Service Plan with changes.



Asking Again Helps You

- Make sure you understand your employer's routine.
- Assist with tasks in the way that works best for your employer.
- Learn more about the your employer's preferences.
- Get feedback on how you are doing.

*Ask Again to Know You Have
Done Your Job Well*



Caregiver Example



When the employer didn't want her bath...

Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

The Service Plan says the IP will help Mrs. Smith take a bath two times a week. She recently fell while bathing alone and broke her hip. This is one reason Mrs. Smith needs in-home care. Mrs. Smith doesn't want her IP to bathe her. "I like to take a bath before I go to bed. You go home at 5 p.m. I can take a bath by myself," Mrs. Smith says.

Read what Maria and Lilly did.



Maria

I told her, "The Service Plan says I'm supposed to help you with your bath. You and the case manager agreed on this. I can't change the Service Plan, but let's talk about the timing of your bath. "

notes _____



Lilly

I told her that I was supposed to follow the Service Plan. She insisted that she could bathe herself. I finally said okay. Mrs. Smith promised to be very careful. After all, I'm supposed to help my employer be as independent as possible.

notes _____



To learn what happened, watch **Video Lesson # 3**



Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

When the employer didn't want her bath...



Maria

Good *We agreed that I would help her bathe in the late afternoon so her bath would be as close to her bedtime as possible. I'm glad we worked together to find a solution.*

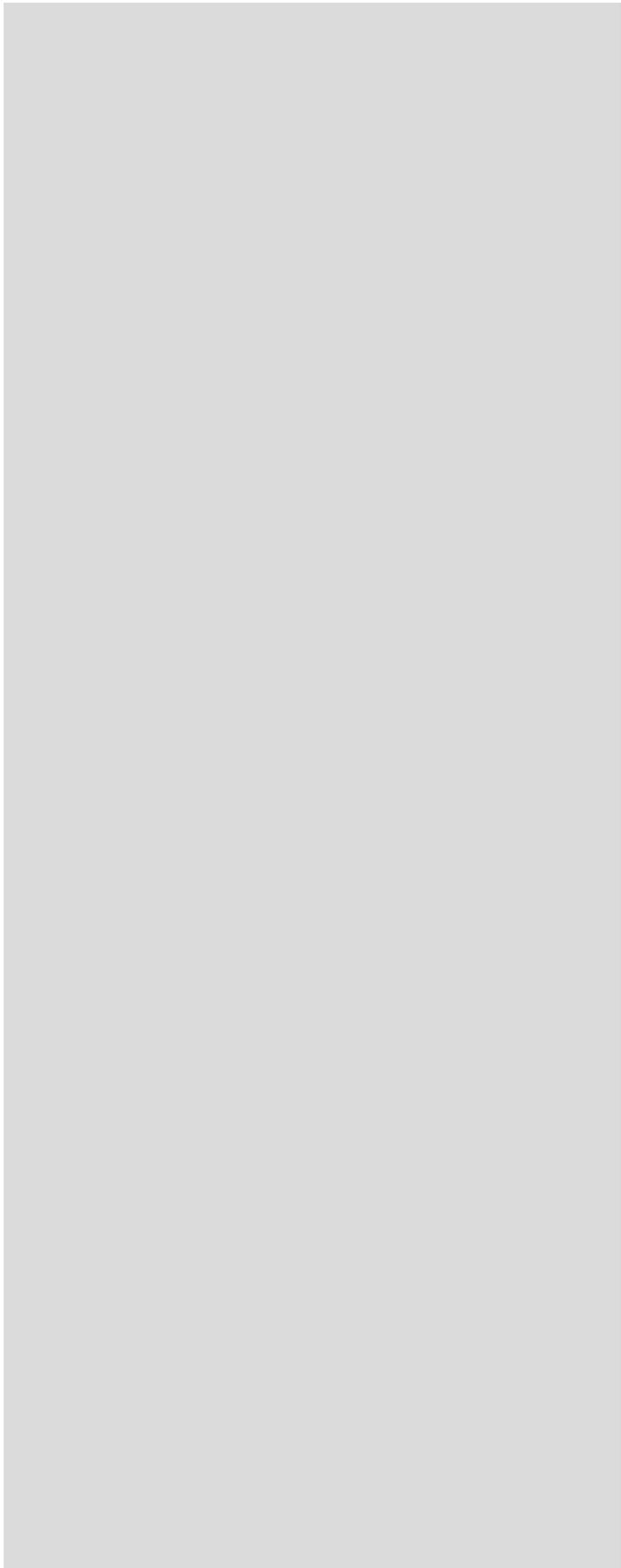
- Make sure you and your employer both understand what is in the Service Plan. Talk to your employer about how and when he or she would like the tasks done. Always stick to the written plan.
- Find a routine that works for both of you.



Lilly

Danger *Several days later, while helping Mrs. Smith dress, I noticed she had a strong body odor. I also saw a patch of red skin that looked like the start of a pressure sore. It turns out that she wasn't bathing at all. I called the case manager.*

- If your employer continues to object to a task in the Service Plan, call the case manager.
- Only the case manager, working with your employer, can make changes in the Service Plan. If changes are made, the case manager will send you a copy of the revised Service Plan.



Tips for Working With People Who Have Special Needs

Confusion

If your employer has dementia, confusion, or memory loss, you may need to take special steps to communicate.

- Face your employer and speak slowly and clearly. Do not shout.
- Use your employer's name each time you give care.
- Tell your employer who you are and be ready to repeat this frequently.
- Give simple, one-step directions.
- Ask clear and simple questions and give your employer time to answer. For example: "Mrs. Smith, do you want to drink coffee or tea?"
- Persons with dementia often have their own sense of reality - do not try to talk them out of it.
- Do not force a confused employer to give a "right" answer - this may cause more anxiety or confusion.
- Be ready to hear the same comments or requests over and over - people with dementia often repeat themselves.
- You may need to try a new approach to gain your employer's cooperation.
- If your employer is comfortable with touch, use it to show caring.



Safety

People with dementia may act hostile

- Look for signs of frustration and try to stop the hostile behavior before it starts.
- Make sure your employer has a balance of rest and activity to avoid stress.
- Distract an angry employer by offering food, a change of activity, calming music or quiet conversation.
- Speak calmly and slowly - don't yell or act with anger.
- Reduce noise and activity.
- Respond to your employer's feelings - "You seem upset. Can I help?" They may be in pain or have to go to the bathroom.
- Give your employer an object they like that is calming.
- Try not to take the anger personally.
- If you feel you are in danger, back off and seek help.

*Confusion may be frustrating and scary
for people with dementia.*

Mental Health

Some employers may be depressed, anxious, agitated, or have suicidal thoughts. Contact the case manager with questions about your employer's mental health, or if you think you can't handle a situation. If the Service Plan includes a crisis plan, follow it.

If you see signs of depression:

- Be patient and willing to listen.
- Take the feelings of sadness seriously - don't criticize your employer for being weak or tell them to "cheer up" or "snap out of it."
- Avoid being overly cheerful.
- Encourage your employer to continue to do things, but give gentle directions. For example, if your employer doesn't want to get dressed and go on an outing, suggest that they at least get dressed.
- Contact the case manager if the depression is new or becoming worse.
- Watch for signs of suicidal thoughts - call 911 if you think your employer is suicidal.

If you see signs of anxiety or agitation:

- Take your employer to a safe, quiet place.
- Give them privacy and space.
- Move slowly and speak calmly.
- Back off.
- Don't make threats.
- Avoid talking about YOUR feelings. Instead, listen to your employer's feelings.
- Get help if needed - call the case manager or get your employer medical attention.



Safety

Signs of mental health problems

Signs of depression:

- Sad or 'down' mood.
- Loss of interest in personal grooming or usual activities.
- Change in appetite or sleep patterns.

Signs of extreme anxiety:

- Feelings of uneasiness or danger, even if there is no real threat.
- Pounding or racing heart, difficulty with breathing, or sweating.

Signs of agitation:

- Acting extremely upset, restless, or crying.
- Hand-wringing, scratching, or hair-twisting or pulling.

Signs a person may be at risk for suicide:

- Talking of a wish to die or saying others would be "better off without me."
- Talking about ending it all.
- Having a plan for committing suicide.
- Hoarding pills, buying a gun or poisons.
- Giving away all money or possessions.

Take all signs of mental health problems seriously.

Developmental Disabilities

Some employers need in-home care because they have developmental disabilities. These disabilities usually result from an injury or other condition which affects the brain or spinal cord.

The disabilities that result from a developmental disability usually last the person's whole life.

Don't focus only on your employer's disabilities. Talk with your employer to learn as much as you can about his or her abilities, too. If your employer is unable to communicate, talk to their contact person or case manager.

If your employer has a developmental disability:

- Take time to listen.
- Pay attention to body language.
- Respect the employer's choices and concerns.
- Ask limited choice questions, such as: "Do you want pancakes or eggs for breakfast?" instead of asking the open-ended question: "What do you want for breakfast?"
- Be aware of the employer's need for private time and time alone with friends.
- Be consistent to build trust.
- Humor may be helpful.



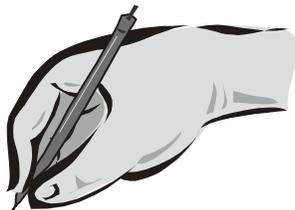
Dignity

**Build trust
by showing respect**

- Avoid treating your employer as a child.
- Allow your employer to set the schedule -- don't make him or her adjust to your schedule.
- Respect choices -- don't force your employer to do anything she or he doesn't want to do.

*Understand your employer's abilities
as well as disabilities.*

Safety Check



Instructions:

These five questions cover some of the important ideas in this chapter.

This is not a test. It is not graded.

Instead, this is a Safety Check to make sure you understand important ideas from this chapter.

Read each question carefully.
Circle the letter for the best answer.
Only one answer is best.

When you are finished with all five questions, go to the next page and check your answers.

1. Your employer's Service Plan:
 - a. Lists all of the tasks you are assigned to do.
 - b. Is nothing you have to worry about - it is between your employer and the case manager.
 - c. Never has to be changed.

2. To understand how to do your assigned tasks in the Service Plan:
 - a. Start doing them and wait to see if your employer likes what you're doing.
 - b. Ask, listen, observe, help, ask again.
 - c. Ask lots of "yes-no" questions of your employer.

3. Observing changes in your employer's mental and physical condition is an important part of being an IP. When you observe a change, you should:
 - a. Keep it to yourself - you might be wrong.
 - b. Contact the case manager.
 - c. Write it down and wait until the case manager asks you about it.

4. To be a good listener...
 - a. Start doing some easy task, like wiping off a kitchen counter, while the speaker talks.
 - b. Listen until you understand the problem and then give your best advice.
 - c. Be willing to listen quietly to encourage the speaker.

5. When working with an employer who has dementia or confusion, it is important to:
 - a. Never use touch to communicate with the employer.
 - b. Gently correct the employer when she or he says something that doesn't make sense.
 - c. Give simple, one-step directions.

Answer Key



Instructions:

On this page, you will find the best answer for each of the questions from page 1-21.

The reason why the answer was best is given for each question.

If you miss more than two of the questions, please go back and review the chapter again. You may have missed information that can help keep you and your employer safe.

When you are done, go on to the next chapter.

1. a.

Your employer's Service Plan lists all of your assigned tasks and information on how your employer would like them done. It is an important document for all members of the care team - including you. The Service Plan is a snap shot of the original services your employer needed when he or she first met with a case manager. Since your employer's needs and required services may change, the Service Plan will be updated from time to time.

2. b.

Take the initiative and ask good questions and listen to your employer to get the information you need to do your job. Remind yourself of the steps you need to take (ask, listen, observe, help, ask again). Asking a lot of "yes-no" questions will not get you all of the information you need. Ask open-ended questions that allow your employer to fill in all of the information you need to understand everything about the tasks you are to perform.

3. b.

As an IP, you are often the first to notice important changes. If you are concerned, don't keep it to yourself. Talk with your employer about it. If it requires a change of services and for any reason your employer can't or won't contact the case manager, call him or her yourself. It is a good practice for you to keep notes of any changes or concerns, but don't wait until you are asked to speak up. The case manager relies on you to alert the care team of problems and concerns.

4. c

To listen well, give the speaker 100 percent of your attention - don't try to listen while doing something else. Face the person and lean forward slightly to show your interest. Encourage the speaker by nodding, saying "Yes", or "Um-hmm". Avoid giving advice or solutions unless the speaker asks you for them.

5. c

Ask clear and simple questions and break directions into steps when working with a employer who has dementia or confusion. If your employer seems comfortable with gentle touch, it can be a good way to communicate. Don't try to convince the employer of a "right" answer - this may cause more anxiety or confusion.

Caregiver Orientation Workbook



Chapter 2. Rights

- Rights 2-2
- Abuse and Neglect 2-5
- Reporting Abuse/Neglect 2-8

Rights

Understanding and protecting your employer's rights is part of your job.

You are expected to treat employers with respect, to support their choices, and to protect their privacy. Both state and federal laws protect the rights of the elderly and disabled.

Employers have the right to:

Respect:

- Be treated with respect and consideration.
- Be spoken to politely.
- Be listened to completely.
- Be valued as a person.

Choice & Freedom:

- Not be restrained.
- Take an active role in making or changing their Service Plans.
- Refuse service or medications.
- Choose their schedules (e.g. meal times) and activities.
- Express a complaint or concern without fear.

Privacy:

- Have all medical and other personal conditions kept private.
- Manage their own financial affairs.
- Meet with friends and family members.



Dignity

Your employer needs privacy

- Give your employer privacy for phone calls and visits.
- Let your employer open mail in private.
- Screen or cover your employer when giving personal care.
- Make sure doors and window curtains are closed when giving personal care.
- Never share any medical, financial, or other information unless you have written permission from your employer.



Respect privacy.



Safety

Restraints

- Are anything that stops your employer from moving. Examples are a belt or vest, bed rails, or a chair that the person cannot get out of.
- Can cause serious injuries.

Caregivers may NOT use restraints.

Caregiver Example

When the neighbor called...



Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

During an IP's first week on the job, one of the employer's neighbors calls. The IP answers the phone. "Poor Mrs. Smith, she's really going down hill, isn't she?" the neighbor says. "Does she have Alzheimer's?"

Read what Alex and Lilly did...



Alex

I didn't want the neighbor to think Mrs. Smith has dementia. "No, she doesn't have Alzheimer's," I said. "But her arthritis is much worse, and she's developed some heart problems."

notes _____



Lilly

I thanked the neighbor for her concern and said I was sorry but I couldn't talk about Mrs. Smith's medical condition.

notes _____



To learn what happened, watch **Video Lesson # 4**



Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

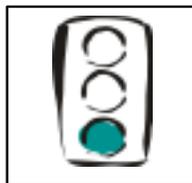
When the neighbor called...



Alex

Danger *A few days later, Mrs. Smith and I ran into the neighbor when we were going for a walk. “So sorry to hear about your heart and your arthritis,” the neighbor said. Mrs. Smith was angry that I had told the neighbor about her health. For the next few weeks, I had to work hard to rebuild her trust.*

- Any information about an employer is private.
- Be careful of what you may say about your employer in casual conversations.



Lilly

Good *The neighbor said, “I’m just showing my concern!” and hung up. I told Mrs. Smith about the call. She thanked me for not gossiping about her.*

- It’s not only wrong to share private information about an employer - it’s illegal.

Abuse and Neglect

As an IP you are a **mandatory reporter** of suspected abuse or neglect. This means that you **MUST** report right away if you have reasonable cause to believe your employer or any vulnerable adult is being harmed. It's the law.

A vulnerable adult is anyone:

- Receiving personal or health care services in his/her own or family's home.
- Over the age of 60 unable to care for him or herself.
- Living in a nursing home, boarding home, or adult family home.
- With a developmental disability.
- With a legal guardian.

Some helpful definitions:

Abuse means intentionally causing pain, suffering, and/or injury to a vulnerable adult. Abuse can be physical, mental, or sexual.

Neglect means not giving a vulnerable adult what she or he needs for health and safety or not taking action to prevent harm or pain.

Abandonment means leaving a vulnerable adult without the ability to obtain necessary food, clothing, shelter, or health care.

Exploitation means intentionally taking advantage of a vulnerable adult either personally or financially.



Safety

Signs of possible physical abuse

- Unexplained bruises, black eyes, wounds, or broken bones.
- Several injuries in different stages of healing.
- Sudden changes of behavior - the person becomes fearful, depressed, or has low self-esteem.
- Missing patches of hair.
- A family member or other caregiver refusing to allow visitors.
- Missing medical appointments or changing doctors frequently - the victim may want to avoid being questioned about injuries.
- Someone reports abuse.

*If your employer reports abuse,
take it seriously.*

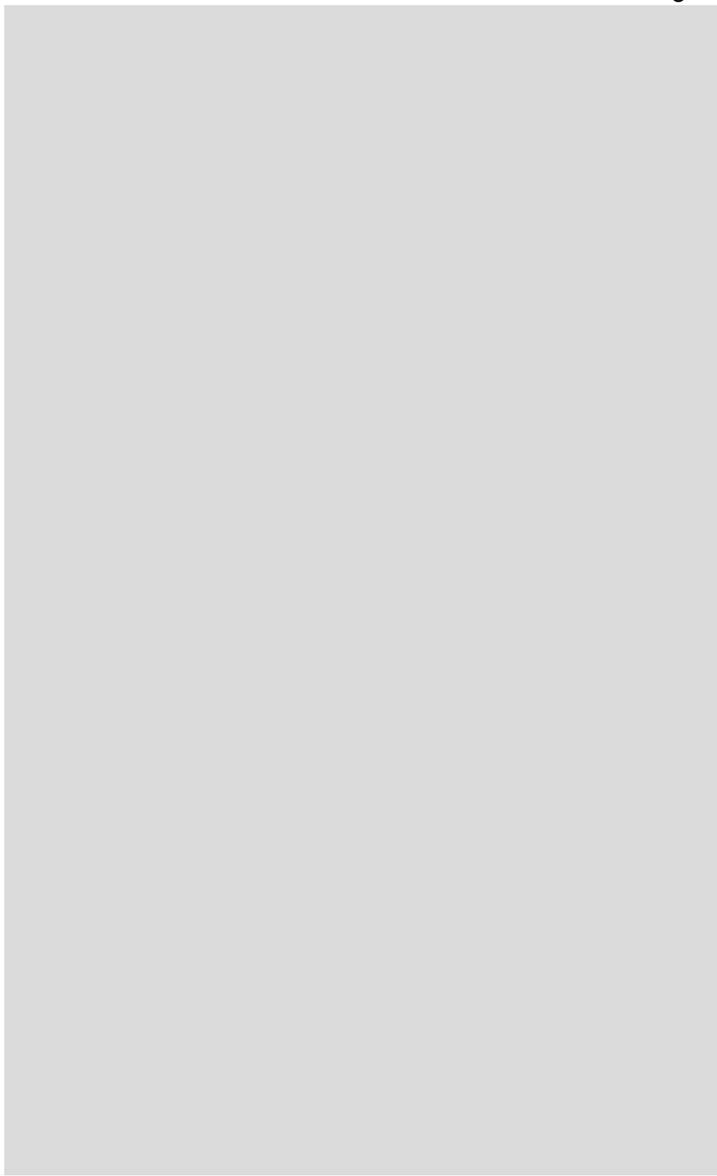
When a family member is the abuser . . .

A family member or friend may be abusing, neglecting, or exploiting your employer. Victims may not report abuse, neglect, or exploitation because they:

- Fear more harm.
- Feel ashamed that a family member has hurt them.
- May feel shame that they can't protect themselves.

People who are abusing, neglecting, or exploiting your employer may:

- Blame the employer for poor grooming or incontinence.
- Say that an employer's story about what happened is not true.
- Complain about the employer being a burden.
- Try to stop the employer from seeing or speaking to visitors.



Safety

Signs of possible mental abuse

- Emotionally upset, agitated, withdrawn, or unresponsive.
- Nervous around certain people.
- Family member or other caregiver does not allow victim to have visitors or join in family events.
- The person reports abuse.

Signs of possible sexual abuse

- Bruising around breasts and/or genital area.
- An unexplained venereal disease.
- Soiled underclothes or bedding.
- Sudden change of behavior.
- The person reports sexual abuse.

Some abuse is not as obvious as a black eye.

**Safety****Signs of possible neglect or abandonment**

- Dehydration (lack of water) or malnutrition (poor or inadequate food).
- Untreated injuries, health problems, or dental problems.
- Person is dirty, poorly groomed, or smells of urine and feces.
- Home is dirty or smells of urine and feces.
- There is no food in the cupboards or refrigerator.
- Person may not have the proper clothing for the season, or the clothing may be dirty or smell badly.
- Person is left in a public place or alone in the home.
- Person reports being left alone.

Violence is not the only kind of abuse.

**Safety****Signs of possible exploitation**

- Unexplained or unusual use of bank cards, or a sudden transfer of money.
- Forged signature on checks.
- Possessions have disappeared.
- Bills for home repairs or other work are higher than what is reasonable.
- Signs of offers from telephone or mail solicitors.
- Use of home or possessions for illegal activities.

Watch for signs that someone is taking advantage of your employer.

Reporting Abuse or Neglect

You may feel nervous or unsure about reporting. These are normal feelings. But don't let them keep you from reporting. You do not need proof to call. You do not need your employer's permission to call. Also, if you report in good faith and it turns out there was no abuse or neglect, you cannot be blamed. Your name will be confidential unless there is a legal proceeding.

If you think your employer may be in immediate danger or need urgent help, call **911**.

If you suspect physical or sexual assault, report it to law enforcement.

Call the Adult Protective Services (APS) abuse reporting number in the Home and Community Services Office for your county, as listed below:

1-800-459-0421 (TTY) 509-568-3068
Spokane, Grant, Okanogan, Adams, Chelan, Douglas, Lincoln, Ferry, Stevens, Whitman, and Pend Oreille

1-877-389-3013 (TTY) 1-800-973-5456
Yakima, Kittitas, Benton, Franklin, Walla Walla, Columbia, Garfield, and Asotin

1-800-487-0416 (TTY) 1-800-843-8058
Snohomish, Skagit, Island, San Juan, and Whatcom

1-866-221-4909 (TTY) 1-800-977-5456
King

1-800-442-5129 (TTY) 1-800-688-1165
Pierce

1-888-833-4925 (TTY) 1-800-688-1169
Kitsap

1-877-734-6277 (TTY) 1-800-672-7091
Thurston, Mason, Lewis, Clallam, Jefferson, Grays Harbor, Pacific, Wahkiakum, Cowlitz, Skamania, Klickitat, and Clark



Safety

**Report any
abuse or neglect**

Who to contact:

- If you think your employer may be in immediate danger or need urgent help, call 911.
- Call the APS abuse reporting number listed on this page and report the abuse.
- If you suspect physical or sexual assault, you must also report it to law enforcement.
- Next, call your employer's case manager.



What to Report:

- Name, address, telephone number, and age of your employer.
- Any information about why you think your employer is being harmed (including safety concerns).
- Any information you have regarding the person you think is harming your employer.
- Names of any other people who can give information about the situation.
- Your name and address.

Reporting abuse protects your employer.

Caregiver Example



When Mrs. Smith seemed worse on Mondays...

Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

When she arrives for work on Monday, an IP notices that her employer, Mrs. Smith, is dirty, withdrawn, and in the same clothes she was wearing on Friday. There is hardly any food in the refrigerator, either.

The IP asks the employer if her niece has been by that weekend to take care of her, as planned. "Oh yes. She's so busy, but she takes such good care of me," Mrs. Smith says. The next Monday, the IP notices the same situation.

What did Maria and Lilly do?



Maria

I wasn't sure, but I thought there might be abuse or neglect. I called the abuse report number for my county and told them about the situation. Then I called my employer's case manager.

notes _____



Lilly

I called the niece and told her what I'd noticed. "My aunt is getting confused," she said. "She must have thrown away all the food I put in the refrigerator. And she refused to take a bath on Saturday. You know, she is getting harder and harder to manage."

notes _____



To learn what happened, watch
Video Lesson # 5



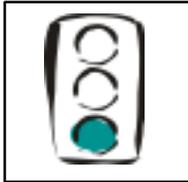
Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

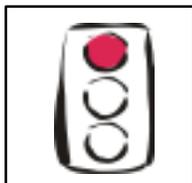
When Mrs. Smith seemed worse on Mondays...



Maria

Good *There was an investigation. It turned out that reporting was the right thing to do. Most weekends, the niece hadn't even dropped by. And even when she did, Mrs. Smith didn't get the care she needed. Mrs. Smith didn't want to complain because her niece is her only relative in town. The case manager thanked me for making the report and made arrangements for Mrs. Smith to get the weekend help she needed.*

- If you suspect neglect, call the reporting number for your county (see p. 2-8). Then call the case manager.
- Victims of abuse or neglect may not “tattle” on the abuser because they fear more harm or because the abuser is a family member.

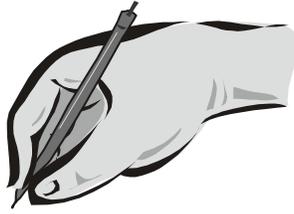


Lilly

Danger *The next Monday, I found that Mrs. Smith was in bed with a high fever. She was so dehydrated that her lips were dry and sticky. Her breathing was shallow and rapid. She seemed confused and it was hard to get her to respond to me. I called 911, and they sent an ambulance. The doctor at the emergency room told me that he suspected neglect. I felt terrible that I didn't report what I had seen. Mrs. Smith could have died.*

- You must report any signs of abuse or neglect, even if you just suspect a problem.
- If your employer is in danger, call **911**. Then call both the APS abuse reporting number and the case manager immediately

Safety Check



Instructions:

These five questions cover some of the important ideas in this chapter.

This is not a test. It is not graded.

Instead, this is a Safety Check to make sure you understand important ideas from this chapter.

Read each question carefully.
Circle the letter for the best answer.
Only one answer is best.

When you are finished with all five questions, go to the next page and check your answers.

1. As an IP must respect an employer's right to privacy.
You should:
 - a. Screen or cover an employer when providing personal care.
 - b. Tell other people about your employer's medical condition.
 - c. Stay with your employer during family visits.
2. Your employer has the right to:
 - a. Refuse the help or services that you offer.
 - b. Expect you to do something that is not on the Service Plan.
 - c. Be restrained when it is for their own good.
3. Which of these is a sign of neglect?
 - a. The employer is getting more forgetful and withdrawn.
 - b. The employer is filthy or smells strongly of urine or feces.
 - c. The employer complains that she doesn't like the food the caregiver prepares for her.
4. If you think that your employer is a victim of abuse, you should:
 - a. Wait until you notice it several times so you don't give a false alarm.
 - b. Ask your employer if they see it as abuse.
 - c. Call the abuse reporting number for your county, then call your employer's case manager.
5. As a mandatory reporter, you must:
 - a. Report any suspected abuse or neglect.
 - b. Wait until you have proof before reporting abuse.
 - c. Get permission from your employer before reporting abuse.

Answer Key



Instructions:

On this page, you will find the best answer for each of the questions from page 2-11.

The reason why the answer was best is given for each question.

If you miss more than two of the questions, please go back and review the chapter again. You may have missed information that can help keep you and your employer safe.

When you are done go on to the next chapter.

1. a.

Always screen or cover an employer when providing personal care.

Never share information regarding your employer unless you have written permission from your employer.

2. a.

Your employer has the right to refuse care.

Your employer does not have a right to expect you to do something that is not on the Service Plan. If care needs change, your employer should talk to the case manager to make changes to the Service Plan.

You do not have the right to restrain your employer at any time for any reason.

3. b.

An employer should not be dirty or smell strongly of urine or feces. Untreated injuries and health problems that are not being cared for are also signs of neglect.

4. c.

You are legally responsible for reporting abuse. If you suspect someone is hurting or neglecting your employer, call the Adult Protective Services reporting number for your county. Physical abuse is assault - if you see it happening, **report it to law enforcement also**. Then, call the case manager.

5. a.

The law states you must report immediately if you suspect a vulnerable adult is being harmed.

You do not need your employer's permission to report.

You do not need proof; you need only to suspect abuse or neglect.

Caregiver Orientation Workbook



Chapter 3. Infection Control

- Basics 3-2
 - Hand Washing 3-3
 - Glove Use 3-6
 - Clean and Disinfect 3-7
 - Contaminated Waste 3-8
- Standard Precautions 3-9
- Reporting Exposure 3-12
- Caregiver Illness 3-12

Infection Control: Basics

As a caregiver, it is important to protect your employer and yourself from disease and infection. Employers who are frail, elderly, or have a weakened immune system may catch infections easily. For them, infections could lead to serious or life-threatening problems.

Infection control techniques help prevent the spread of disease by stopping harmful germs from entering the body.

Germs are organisms that cause infection by entering the body and growing. They can be spread from one person to another. To prevent infection, you must stop germs before they enter the body or have time to spread.

To control the spread of infection:

- Wash your hands.
- Use disposable gloves and other protective equipment.
- Clean and disinfect to kill germs before they can cause harm.
- Safely dispose of contaminated waste.

Words to remember:

Contaminated - dirty, or having touched blood or bodily fluids.

Communicable disease - an illness that can be passed from one person to another (also called a contagious disease).

Immune system - what the body uses to fight off infection.



Stop germs from spreading

- Wash often.
- Cover your mouth and nose with a tissue when coughing or sneezing, as the spray can carry germs from one person to another. Put your used tissue in the waste basket. Wash your hands with soap and water.
- If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Throw dirty items away, including paper products, water, and food that may be contaminated with bodily fluids, blood, or germs.
- Launder linens, clothing, or bedding soiled with bodily discharges.

Cleanliness for infection control.

Proper Handwashing

Washing your hands carefully and frequently is the best way to control germs.

Proper handwashing is the MOST important infection control skill.

Wash your hands:

- Before starting personal care.
- After using the toilet.
- Before putting on disposable gloves.
- After removing gloves or protective clothing.
- After contact with any wastes, bodily fluid, or contaminated items.
- Before eating.
- Before preparing food.
- After blowing nose, sneezing, or coughing.
- After cleaning an area.
- After smoking.

Remember, proper handwashing takes at least **20 seconds** of scrubbing.

Use hand lotion after each wash to protect your hands from drying.



Safety

Liquid soap works best

- Use liquid soap - it is fresh and clean every time.
- Germs can grow on a wet bar of soap or in a soap dish.
- If you must use bar soap, rinse the soap with hot water before you wash your hands.
- Antibacterial soap isn't needed, regular soap rinses away just as many germs.



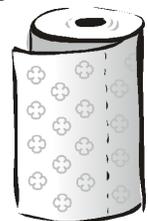
Use soap.



Safety

Paper towels are best

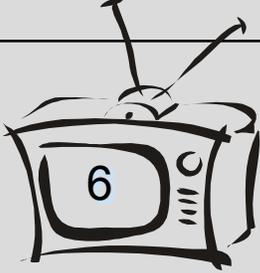
- Use a fresh paper towel to dry your hands.
- If you must use cloth towels, launder them frequently.



Germs may grow on cloth towels.



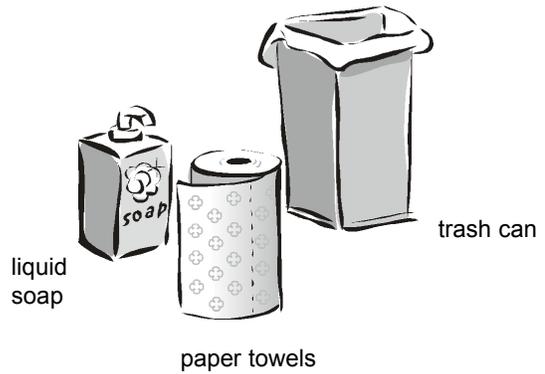
Watch Video Lesson #6
to learn the important steps
in proper handwashing.



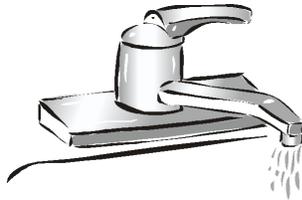


Proper Handwashing Guidelines

1) Make sure you have everything you need at the sink.



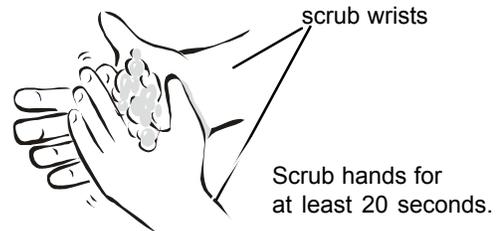
2) Turn on warm water.



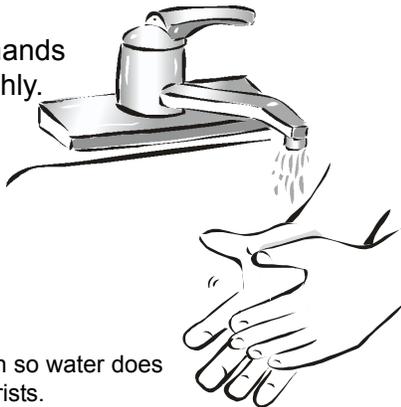
Keep warm water running while washing your hands.

3) Rub palms together to make lather. Scrub between fingers and entire surface of hands and wrists.

Clean fingernails by rubbing the tips of your fingers against your palms.



4) Rinse hands thoroughly.



Point fingers down so water does not run up your wrists.

5) Dry hands with clean towel



Use hand lotion if available, to prevent chapping.

Handwashing is the most important infection control skill

Use of Disposable Gloves

Putting on Disposable Gloves

- Remove jewelry, watches, and rings.
- Wash your hands.
- Put on the gloves. Interlace your fingers to make sure the gloves fit snugly.
- Check the back and front of each glove for any tears, holes, or nicks.



Safety

Never use gloves that are damaged or ripped.

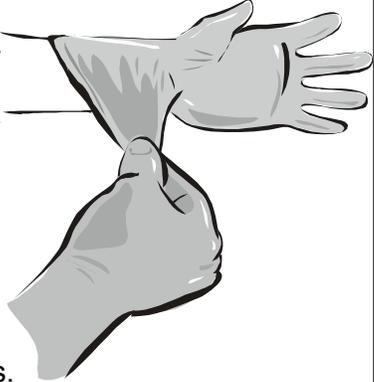




Safety

Disposable gloves help control infection

- Always keep plenty of new disposable latex gloves in your employer's home.
- Learn how to put on and take off gloves correctly.
- Never re-use gloves.



Put on new gloves each time you give care.



Efficiency

Keep gloves handy

- Keep a box of disposable gloves in bedrooms, bathrooms, and kitchen.
- Make sure gloves are easy to find when you need them.
- Call the case manager if your employer does not have any gloves.

Make it easy to use gloves.

Clean and Disinfect

Stop the spread of infection by cleaning up as you go. This is especially important in bathrooms and kitchens.

Cleaning Tips:

- Clean kitchen and bath surfaces with soap and water to wash away dirt and germs.
- Disinfect with a disinfectant product.

Note: A disinfectant can be made by mixing one tsp. bleach with one gallon of water. The bleach solution is only good for 24 hrs.

- Wear household gloves when cleaning.
- Flush bodily fluids and dirty water used for cleaning down the toilet.
- Wash dirty dishes in soap and hot water. Rinse with hot running water, and air dry. Put dishes away when dry.



Safety

Make life hard for germs

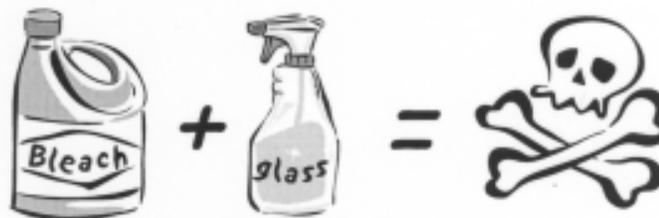
- Keep surfaces clean and dry - germs need moisture to grow.
- Let in lots of fresh air and sunlight - germs like darkness.
- Clean spills immediately - germs need food to grow.
- Store food in the refrigerator - germs grow in warm temperatures.

Know what germs need to grow.



Safety

Use cleaning products with care



(cleaner/ammonia)

- Never mix bleach with ammonia or other household cleaners, such as glass cleaners.
- Mixing bleach and ammonia creates a poisonous gas that could harm you or your employer.

NEVER mix bleach and ammonia.

Contaminated Waste

Proper disposal of garbage and waste is part of infection control.

The three types of waste are:

- Regular garbage or trash.
- Contaminated waste: Anything that might have come in contact with blood or bodily fluids.
- Sharps: syringes, razors, finger sticks, or other things with sharp edges.

Be sure that you separate contaminated waste from regular garbage.

Never put sharps in a regular wastebasket or garbage can.

Never place your foot or hand in a garbage can to compact the trash.



Safety

Dispose of contaminated items safely



- Wear disposable gloves when picking up contaminated things.
- Put any contaminated waste in a heavy-duty garbage bag and tie it.
- Put this bag in another garbage bag, tie it, and label it "Biohazard".

Proper waste disposal is part of infection control.



Safety

No sharps in garbage bags

- Put all "sharps" in a special hard-plastic sharps container.
- Never put sharps into a regular trash bag or directly into a garbage can - sharps could prick someone's skin and pass on germs from bodily fluids.
- Check with the pharmacy for rules about sharp disposal.



Safe disposal prevents injury and infection.

Standard Precautions

Standard Precautions protect you and your employer from exposure to blood and bodily fluids.

Standard Precautions are to be done **ALWAYS**, by **EVERYONE**, in **EVERY** situation that could involve contact with blood or other bodily fluids.

Germs and diseases can enter the body when bodily fluids or blood touch sores, nicks, or cuts on the skin.

Bodily fluids are:

- Blood
- Semen
- Vaginal secretions
- Feces (stool)
- Urine
- Vomit

Proper use of disposable gloves and good handwashing are the most important things you can do to protect you and your employer from exposure.

In special cases, you may use a gown and mask to prevent the spread of contagious diseases.

Standard Precautions include:

- Handwashing - before and after use of gloves, and before and after personal care activities.
- Disposable gloves - use a new pair each time you give personal care or if you are in contact with bodily fluids.
- Mask and protective eyewear - may be used if there are droplets of bodily fluids or if employer is coughing.



Safety

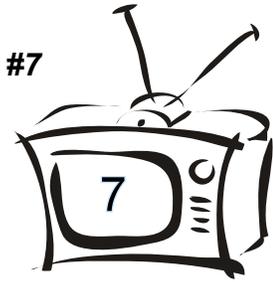
When to use gloves

- Every time a care activity involves contact with blood or bodily fluids.
- When you begin personal care tasks.
- When giving care to another person.
- After handling things that may be contaminated with blood or bodily fluids.

Never reuse disposable gloves - throw them away.



Watch Video Lesson #7
to learn the important
steps in proper glove
use.





How to Remove Gloves Safely

Assume that all used gloves are contaminated. When you remove them, follow these steps so that the outside of the gloves does not touch your bare skin.

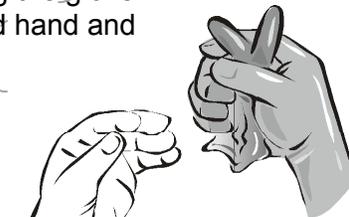
1) With one gloved hand, grasp the other glove just below the cuff.

2) Pull the glove down over your hand so it is inside out.

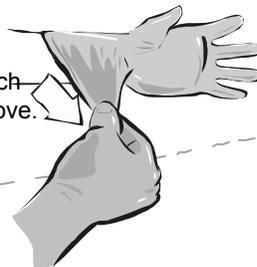


3) Keep holding the glove with your gloved hand and crumple it into a ball.

4) With two fingers of the bare hand, reach under the cuff of the second glove.



Danger: do NOT touch bare hand to dirty glove.



5) Pull the glove down inside out so it covers the first glove.



6) Both gloves are now inside out. You can throw them away safely.



7) Wash your hands.

Never let the outside of a used glove touch your skin.

Reporting Exposure

If you follow the rules for Standard Precautions carefully, there is little chance that you will be exposed to blood or bodily fluids.

However, if you think you might have been exposed, you should tell your doctor right away.

Caregiver Illness

If you are ill or not feeling well, it may be dangerous for you to care for your employer.

Your mild cold or flu can spread to a frail employer. For them, it may turn into a serious problem like pneumonia.

Do all you can to limit your employer's exposure to germs and illness. Don't work when you are sick. Call your employer's case manager or refer to the Service Plan for a back-up plan of care.



Safety

What to do if you've been exposed to blood or bodily fluids

- Tell your doctor immediately.
- To best protect you and your employer, both of you should be tested for HIV and Hepatitis.
- If test results are negative, you can be retested in six weeks, then at three months and six months to make sure that the result is still negative.
- You also can choose to be vaccinated for Hepatitis.

Reporting exposure is part of your job.



Safety

What to do if you are ill

- Work out a plan with your employer about what to do if you are ill. This should be part of going over the Service Plan.
- If you can't work, call your employer. Also call the case manager, if needed.
- Do NOT care for your employer if you have a communicable illness, such as stomach flu or a respiratory infection.
- Make sure you are well before returning to work.

Frail people can get sick easily.

Caregiver Example

When the caregiver didn't wear gloves...



Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

While the employer is taking antibiotic pills for an infection, she drops a water glass, and it breaks. The employer picks up the broken glass and gets a cut on her hand.

Read what Maria and Lilly did.



Maria

The cut was bleeding heavily so I got a tissue and stopped the bleeding. Then I noticed I had blood on my hands. I washed my hands carefully. I didn't report the exposure. After all, my employer was on antibiotics, so I wasn't worried about catching a blood-borne disease.

notes _____



Lilly

I handed my employer a wad of tissues to press on the wound. Next, I washed my hands and put on disposable gloves. Then I helped stop the bleeding and helped my employer clean up.

notes _____



To learn what happened, watch **Video Lesson # 8**



Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

When the caregiver didn't wear gloves...



Maria

Danger *I mentioned what happened to the case manager. She told me to report the exposure to my doctor. The case manager also said that both my employer and I needed to be tested for HIV and Hepatitis.*

- If your skin is exposed to blood or bodily fluids, immediately wash with soap and water.
- Report any exposure to your doctor and get tests for blood-borne diseases.
- If you are exposed, both you AND your employer should be tested for HIV and Hepatitis.

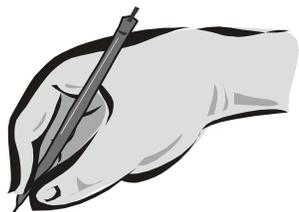


Lilly

Good *My employer and I have talked about Standard Precautions and the risk of blood-borne infection. She understands why I put gloves on before giving her first aid, even though there is little chance that she has HIV or Hepatitis.*

- Treat all blood and bodily fluids as contaminated.
- Make sure your employer understands the rules for Standard Precautions and why they are important.

Safety Check



Instructions:

These five questions cover some of the important ideas in this chapter.

This is not a test. It is not graded.

Instead, this is a Safety Check to make sure you understand the important ideas from this chapter.

Read each question carefully.
Circle the letter for the best answer.
Only one answer is best.

When you are finished with all five questions, go to the next page and check your answers.

1. Germs are spread...
 - a. From one person to another.
 - b. By not dressing warmly enough.
 - c. By not using antibacterial soap.

2. Proper handwashing takes at least...
 - a. 5 to 7 seconds of scrubbing.
 - b. 10 to 15 seconds of scrubbing.
 - c. 20 seconds of scrubbing.

3. The best way to wash away dirt is to use...
 - a. Ammonia.
 - b. Bleach.
 - c. Soap and water.

4. When removing disposable gloves, do NOT...
 - a. Let the outside of the gloves touch bare skin.
 - b. Throw them away.
 - c. Get them wet.

5. Dispose of sharps in...
 - a. A metal wastebasket.
 - b. Two heavy-duty trash bags.
 - c. Special disposal containers.

Answer Key



Instructions:

On this page, you will find the best answer for each of the questions from page 3-15.

The reason why the answer was best is given for each question.

If you miss more than two of the questions, please go back and review the chapter again. You may have missed information that can help keep you and your employer safe.

When you are done, go on to the next chapter.

1. a.

Germs are spread from one person to another. Always cover your mouth when coughing or sneezing. Then wash your hands. Antibacterial soap is not necessary for proper handwashing.

2. c.

Proper handwashing takes 20 seconds of scrubbing. You may have to scrub even longer if your hands are very dirty. You will need to wash your hands 10 or more times each day. So remember to use lotion after washing to prevent chapping.

3. c.

Soap and water take care of dirt. Bleach disinfects but does not cut grease. Ammonia cleans glass.

4. a.

When removing disposable gloves, NEVER let the outside touch bare skin. Assume that the outsides are contaminated.

The gloves may become wet during care, but this is not a problem. The gloves provide a barrier.

Always dispose of contaminated gloves immediately after taking them off.

5. c.

Always put sharps in a special sharps disposal container.

Sharps could puncture even two garbage bags. Someone could prick themselves on any sharps in a metal or other type of wastebasket.

Caregiver Orientation Workbook



Chapter 4. Fire and Life Safety

- Emergency Communication 4-2
- Safety & Prevention: Falls 4-5
- Safety & Prevention: Fire 4-9
- Emergency Escape Plans 4-13
- Protecting Yourself 4-17

Emergency Communication

Part of your job as an IP is being prepared to handle emergency situations. If an emergency does occur, you may be the only person in the home to provide assistance. Know ahead of time what to do so you are prepared with a plan before an emergency strikes.

Calling for help

You need to know:

- **When** to call for help
- **Who** to call for help
- **What** to tell emergency workers

When to call for help

Call for help in any situation you think MIGHT be an emergency.

Examples of medical emergencies:

- If your employer has serious trouble breathing.
- If your employer passes out and can't be easily awakened.
- If your employer has fallen and can't get up on their own.
- If your employer takes poison or a drug overdose.
- Any serious change in your employer's health.

Examples of safety emergencies:

- Fires you can't put out quickly and easily.
- Any threat that puts an employer in danger.



Who should you call in an emergency?

911



Dial 911 for medical and safety emergencies.

There is only one emergency number.



Employer safety comes **FIRST**

- If you think it might be an emergency, call 911 for help.
- If in doubt, call 911.
- Emergency workers are trained to help you decide if there is an emergency — it's part of their job.

Play it safe: call for help.

Who to call for help

In an emergency, it is easy to panic and forget information that you would normally remember.

During your first week on the job, work with your employer to fill out the Emergency Contact List on page 4-4.

Take a few minutes now to look at the Emergency Contact List. You'll find copies of the list in the Forms section of this workbook.

- When completing the Emergency Contact List, check the Service Plan. Your employer's physician, case manager, and family contact person are listed there.

What to tell emergency workers

- What the problem is.
- The address and nearest cross street.



Dignity **Privacy**

- All employer information is confidential. Only share it with emergency workers and your employer's case manager.

Respect your employer's privacy.



Safety **Emergency Contact List**

Keep the Emergency Contact List by every phone in your employer's home.

- Review the list frequently with your employer so the numbers stay up to date.

It's hard to remember under stress.



Efficiency **Responding to Emergencies**



- Call 911 — even if you're not sure it is an emergency.
- Describe the problem to the 911 operator — emergency staff are trained to help.
- Follow the emergency staff's directions.

Being prepared saves lives.



Emergency Contact List

911

created on ___/___/___ Initials___

dial 911 first

(Extra copies in the Forms section.)

Employer's Name: _____ Date of Birth: ___/___/___

Employer's telephone number	home (____) ____-____ cell (____) ____-____
Employer's address Include street, apartment numbers, zip code	
Nearest cross streets and landmarks (e.g. apartment name, house color, etc.)	
Employer's physician and nearest hospital Names and phone numbers	Physician _____ Hospital _____ (____) ____-____ (____) ____-____
Employer's case manager Name:	Phone Cell/Pager (____) ____-____ (____) ____-____
Contact person(s) Names and phone numbers	(____) ____-____ (____) ____-____ (____) ____-____ (____) ____-____

Keep a copy at every phone

Safety and Prevention: Falls

This section gives you information about fire and accident prevention. You may want to review this information with your employer.

Work with your employer to check his or her home for hazards. Look for anything that could cause fires, falls, and injuries.

Watch for hazards every day and tell your employer if you find them.

If your employer cannot take care of these hazards, make a list of the problems. Then call the employer's case manager and review your list.

Falls can be serious

Frail employers can be seriously hurt if they fall.

Falls can...

- Break brittle bones in the hips or legs.
- Break or seriously injure wrists and arms.
- Cause head injuries.
- Be a sign of other serious medical problems.



Safety

If your employer falls...

If the employer can get up...

- Ask "How do you feel?" and observe employer carefully for signs of injury. You may need to call **911**.
- Help your employer up, but do NOT lift your employer.

If the employer can NOT get up...

- Do NOT try to lift or move your employer.
- Cover employer with a blanket if they are not able to get up.
- Do NOT offer anything to eat or drink.
- Call **911**, and report that your employer has fallen and can't get up.

Report any falls to your employer's case manager.



Fall Prevention: Frail people can fall easily... especially those who have trouble walking



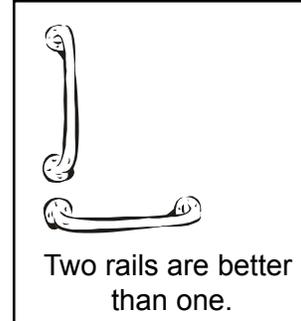
**Wet, slippery surfaces make
bathrooms high-risk areas for falls.**



- Use mats in showers and tubs.



- Use hand rails in tubs and next to toilets.



Raised seat rests on normal toilet.



Hand grips

- Safety toilet seats make standing and sitting easier. Hand grips help prevent falls. Special seats for the bath are also available.



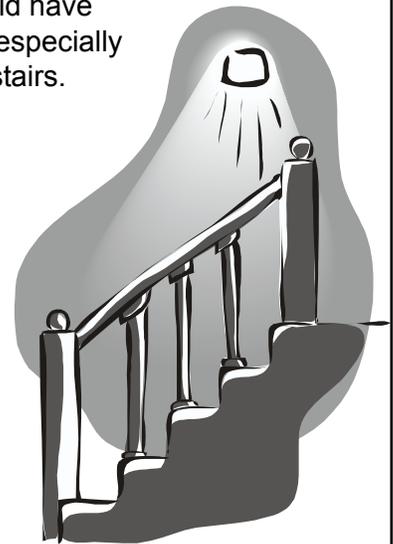
Watch for fall hazards.



- Throw rugs are a serious trip hazard - even if they have a non-slip mat.

- All rooms should have good lighting, especially hallways and stairs.

- Stairs should have a strong hand rail and be free of clutter.



Work with your employer & case manager to fix fall hazards.

Caregiver Example

When the employer fell...



Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

The IP is in the kitchen fixing lunch for her employer, Mrs. Smith, when she hears a crash. The IP rushes to the living room and finds that Mrs. Smith has fallen and is lying in the middle of the room.

Read what Maria and Lilly did...



Maria

I asked Mrs. Smith if she was all right. "I'm fine," she said, "but don't leave me lying here in the middle of the living room floor! Move me over to the sofa!" Just sitting up made her cry out in pain. I could tell I'd have to carry her to the sofa. "I need to call 911," I thought. "I'll do it after I get her comfortable."

notes _____



Lilly

I couldn't tell how badly she was hurt. I asked her if she could get up. She tried, but it was too painful. I asked her to stay there and try not to move while I called 911.

notes _____



To learn what happened, watch **Video Lesson # 9**



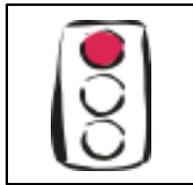
Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

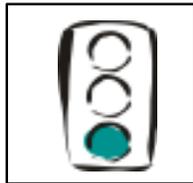
When the employer fell...



Maria

Danger *When I started to help Mrs. Smith stand up, she screamed in pain. I settled her on the floor again and immediately called 911. It was clear she couldn't make it to the sofa. It turned out that she had broken her hip. The emergency worker said I may have made it worse by lifting her.*

- If a person who has fallen can't get up on their own, do not try to lift them.



Lilly

Good *After a few minutes Mrs. Smith said she could "probably get up now." I offered my arm to help her balance. She tried to get up but it still hurt too much. I brought her a pillow and covered her with a blanket. Later, the emergency workers said I had done the right thing not to move her. She had a broken hip.*

- If a person has fallen and feels pain when they try to get up, do not move them. Call 911 immediately.



Safety

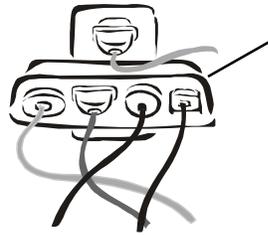
Fire Prevention: Watch for fire hazards

Using damaged electrical cords or plugging too many cords into an outlet can start a fire. Other fire hazards include:

- Lamp, appliance and extension cords that are frayed, discolored, or cracked.
- Cords under rugs - stepping on them can break the cord and start a fire.
- More cords in the outlet than it is made to take.

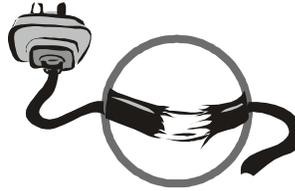


This outlet is made for 2 cords.



danger

Outlet splitters can cause fires.



Sparks can cause fires.

If your employer smokes, encourage smoking safety rules.



- No smoking in bed or when sleepy.
- No smoking near oxygen. It is like smoking near a bomb.

- Move ashtrays away from things that burn easily, including papers, drapes, bedding, and cloth furniture.

Smoke Alarms



- Encourage your employer to replace batteries twice a year.



- Empty ashtrays when ashes are cool. Hot ash can cause fires.

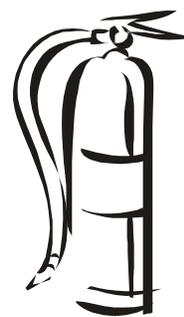


Work with your employer & case manager to fix fire hazards.

**Safety****If you discover
a fire...**

If you discover a fire in your employer's home:

- Always get your employer to safety before you do anything else.
- Call 911 and report the fire - use a cell phone or a neighbor's phone.
- Never put water on a grease or liquid fire. Water will cause the fire to spread.
- Putting water on an electrical fire can give you a serious shock.
- Never re-enter a burning building to save pets or valuables.
- Never try to move a burning object out of the room.
- Never use an elevator as a fire escape route.



*If the fire is NOT
quick-and-easy to put out,
don't even try.*

Caregiver Example



When the dryer caught fire...

Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

A caregiver goes to the basement to do laundry. The room is full of smoke because the clothes dryer has caught fire. The employer is upstairs and so is the nearest phone.

Read what Alex and Maria did.



Alex

The fire was in the basement so I figured we'd have plenty of time to get out of the house. On the way to my employer, I stopped and called 911 to get help fast. Then I went to help my employer out of the house.

notes _____



Maria

It didn't look like a bad fire, but I thought I should get my employer out of the house right away. Once we were outside, I had a neighbor call 911.

notes _____



To learn what happened, watch **Video Lesson # 10**



Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

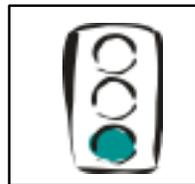
When the dryer caught fire...



Alex

Danger By the time I had finished calling 911, smoke was coming up the basement stairs and filling the living room. We got out of the house, but both of us were coughing and hacking from the smoke. If the fire had been much worse, we might not have made it.

- Even if a fire has more smoke than flames, it is dangerous. Smoke can burn lungs, and the gases in smoke are poison.



Maria

Good I remembered that I have to keep my employer safe. Even a little smoke can hurt a frail person. That's why I got my employer to safety FIRST and called for help SECOND. When the firefighters came, they told me I'd done the right thing.

- Your first job in case of fire or other emergency is to get your employer to safety.

Emergency Escape Plans

Talk with your employer about his or her evacuation plan for escaping from the home in case of a fire or other emergency.

If your employer requires assistance to evacuate, refer to your employer's Service Plan for further instructions.

When planning an escape route, think about your employer's mental and physical ability.

Some Things to Think About:

Can your employer...

- Move quickly to an exit in case of emergency?
- Use stairs?
- Climb out a window if necessary?
- Crawl under smoke in case of fire?
- Hear a ringing smoke alarm and understand what it means?



Safety

If fire prevents you
from evacuating

- Stay with your employer.
- Call 911 and tell them that you are trapped.
- Stay in a room with the door shut to slow the fire down.
- Stuff clothing or towels in openings around doors and vents.

*Heat and smoke rise -
Stay close to the floor
where there is less smoke*



Safety

Take care of your employer

- Smoke, stress, and activity in an emergency can make your employer go into shock. Shock is very common in emergencies.
- Employer may feel faint, weak, or anxious. They may vomit. Skin may be pale, cold, or clammy. Employer may be sweating. Breathing may be shallow and rapid. They may pass out.

Shock recovery position

No food, drink, or smoking

Cover with blanket



Feet raised

Get employers to safety - then stay with them.

Caregiver Example

When the smoke alarm went off...



Directions:

Read what each caregiver chose to do. Then write notes on what you **like** or **don't like** about each choice.

A caregiver is helping her employer dress in the bedroom. The bedroom door is closed to protect the employer's privacy. Suddenly, the smoke alarm in the hallway goes off. As the caregiver reaches to open the door, she notices that the doorknob is hot.

Read what Maria and Lilly did.



Maria

I decided not to open the door. Maybe the hallway was on fire. Maybe the room would fill with smoke. It was too risky. I went right to my escape plan.

notes _____



Lilly

I had to decide. Did I need to start the escape plan? To find out, I opened the door to see how bad the fire was.

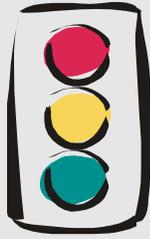
notes _____



To learn what happened, watch **Video Lesson # 11.**



Danger
Caution
Good



What happened?

*This situation could have ended many ways.
Read on to learn what happened this time.*

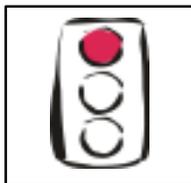
When the smoke alarm went off...



Maria

Good I stuffed towels along the bottom of the door to keep smoke from coming in. Then I helped my employer out the window. Once we were out, I closed the window to slow down the fire. Then I had a neighbor call 911. My employer didn't look so good, so I put him in the shock position.

- Know your escape plan. Be sure it works for your employer.
- Stay with your employer and check for injuries or shock. Put your employer in the shock recovery position (see page 4-14).



Lilly

Danger When I opened the door, I noticed the door handle was hot. That should have told me the fire was close by. But I opened the door anyway, and smoke came pouring in. We got out the window, but the smoke stung our eyes and made it hard to see. We were both hacking and coughing from the smoke.

- If you think fire may be on the other side of a closed door, don't open it.
- If you are trapped by a fire, keep the doors and windows closed. Call 911, and tell the operator where you are trapped in the home.

Protecting yourself

Providing care for your employer may sometimes be difficult. It may be hard to help them because of their size or disabilities. Also, dealing with some behaviors may be challenging. Knowing how to protect yourself is important. You can't do your job if you are injured.

Providing Heavy Care

Your work may involve bending, lifting, and transferring your employer from one place to another. To prevent injury, use good body mechanics.

Dealing with Difficult Behaviors

People who are coping with illness or disability such as advanced dementia, high fever, or drug reactions may feel angry and frustrated. This is normal. They may swear, bite, hit, scratch, spit, or kick their caregiver.

How should you respond?

- Follow any care guidelines in the Service Plan.
- Remain calm, but firm and controlled.
- Do not raise your voice, threaten, yell back, or show your own anger.
- Stay at least an arm's length away from the employer while they are acting hostile.
- Make normal eye contact - don't stare or avoid eye contact.
- Listen and reflect back what you hear.
- Do not try to argue or reason.
- Do not turn your back on the employer.



Safety

Use good body mechanics

- Always keep your back straight when lifting objects or transferring your employer. Grasp the trunk and hip areas, not the arms and legs.
- Face the direction you plan to move the employer.
- Explain each step during transfers and other procedures so your employer will know what to expect.
- Gain your employer's confidence by being clear with your directions.

Talk your employer through transfers.



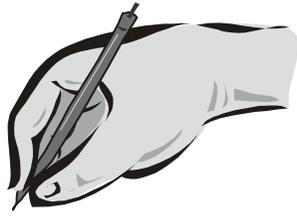
Dignity

Preventing aggressive behavior

- Make mutual respect and good communication a top priority.
- Provide one-step directions to avoid frustrating your employer.
- Follow a consistent routine - prepare your employer for any new tasks or changes in the daily schedule.
- Listen and use silence to give your employer a chance to express feelings.

Good communication is the key.

Safety Check



Instructions:

These five questions cover some of the important ideas in this chapter.

This is not a test. It is not graded.

Instead, this is a Safety Check to make sure you understand important ideas from this chapter.

Read each question carefully.
Circle the letter for the best answer.
Only one answer is best.

When you are finished with all five questions, go to the next page and check your answers.

1. If a room fills with smoke, what should you do?
 - a. Cover your nose and mouth with a towel or other cloth. Run as quickly as you can to an exit.
 - b. Crawl on your hands and knees to an exit.
 - c. Hold your breath and move as quickly as you can to an exit.
2. What should you do first when you discover a fire?
 - a. Carry the burning object outdoors.
 - b. Get your employer to safety.
 - c. Call 911.
3. During your first week on a new work assignment, you should:
 - a. Call 911, for practice.
 - b. Talk to your employer about their emergency escape plan.
 - c. Practice using the elevator as an escape route.
4. If your employer yells or tries to hit you, you should:
 - a. Yell back to get things under control.
 - b. Get out of the house as quickly as possible.
 - c. Keep at least an arm's length away and speak calmly but firmly.
5. If your employer falls, you should:
 - a. Try to get them up.
 - b. Offer them something to eat or drink.
 - c. Ask your employer "how do you feel" and observe him/her carefully for signs of injury.

Answer Key



Instructions:

On this page, you will find the best answer for each of the questions from page 4-19.

The reason why the answer was best is given for each question.

If you miss more than two of the questions, please go back and review the chapter again. You may have missed information that can help keep you and your employer safe.

When you are done, go on to the next chapter.

1. b

If a room is filled with smoke, the clean air will be near the floor. Crawl on your hands and knees to an exit.

Covering your mouth and nose with a towel or holding your breath will not protect you from smoke.

2. b

Always get your employer to safety first. Then call 911.

NEVER try to move a burning object out of a room. You may spread the fire.

3. b

Talk to your employer about his or her escape plan during your first week on the job. Contact your employer's case manager to discuss any questions you have about helping your employer leave the home safely in an emergency.

Dial 911 only if you think you have an emergency.

NEVER use an elevator as an escape route in case of fire.

4. c

If your employer shows aggressive or angry behavior, protect yourself by keeping at least an arm's length away. Speak calmly but firmly and express your fear of violence. Resist the urge to yell back.

Know what the Service Plan says you should do if your employer becomes aggressive.

If you think you can't handle the situation, call for help. And be sure to report what happened to the case manager.

5. c

Always ask your employer how he or she feels. If your employer shows any signs of injury, do not move him or her.

You may have to call 911.

Never offer food or drink to anyone who has been injured.

Caregiver Orientation Workbook



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Assessment Details

Pending Initial

Client Demographics

Client Information

Client Name: Doe, Jane M

Worker Name: Fitzharris, Karen

Primary CM at Assessment Creation: Fitzharris, Karen (DigreK)

Office: Olympic AAA/Port Hadlock/Jefferson

Assessment date: 09/22/2004

Presenting Problem

Client requesting in-home services following a stroke that has limited her ability to care for herself independently.

Was client the primary source of information? Yes

Collateral Contacts

Name: Johnson, Sam

Relationship: Not related

Role:

Physician

Name: Doe, Pete

Relationship: Child

Role:

Emergency Contact, Informal caregiver

Communication

Speech/Hearing

Making self understood expressing information content however able:

Usually Understood

Modes of expression:

Speech

Ability to understand others however able: Understood

Progression Rate: Deteriorated

Hearing Progression Rate: No Change

Hearing: Minimal difficulty in noisy setting

Assessment Details

Pending Initial

Telephone Use

How telephone calls are made or received (with assistive devices such as large numbers on telephone, amplification as needed).

Client Needs:

Independent, No difficulty

Vision

Ability to See: Adequate

Limitations:

None of these

Mental/Physical Health

Diagnosis

1. Stroke

Occured on August 20, 2004

2. Hypertension

first diagnosed in 1989

Indicators:

Dizziness/vertigo, Edema

Is client comatose? No

Medications

This list of medications was obtained from medical record/client/caregiver on the date of this assessment. Do not use this list as the basis for assistance with or administration of medications

1. ASPIRIN TABLETS DELAYED RELEASE USP

Dose Qty: 250.000 mg **Route:** Oral

Frequency: BID (2 x day) **Rx:** Yes

2. ATENOLOL

Dose Qty: 100.000 mg **Route:** Oral

Frequency: QD (once daily) **Rx:** Yes

Assessment Details Pending Initial

Medication Management

Self Administration: Assistance required

Frequency of need: Daily

Client Strengths:

Able to put medications in mouth

Client Limitations:

Cannot open containers

Caregiver Instructions:

Open containers

Provider
SMITH SHIRLEY
Doe, Pete

Clients son fills medi-set on a weekly basis

Indicators

Height: 5 feet 5 inches

Weight: 165 pounds

Weight loss: 5% or more in last 30 days; or 10% in last 180 days: No

Weight gain: 5% or more in last 30 days; or 10% in last 180 days: No

In general, how would you rate your health? : Good

In the last 6 months or since last assessment (if less than 6 months ago):

Number of times admitted to hospital with an overnight stay: 1

Number of times visited emergency room without an overnight stay : 1

Date of last doctor visit: 09/02/2004

Doctor name: Johnson, Sam

Sleep

Preferences:

Prefers to have the light off

Patterns:

Arises early

Is client satisfied with sleep quality? Yes

Memory

Recent memory :

Assessment Details Pending Initial

Recent memory : Recent Memory is OK

Long Term memory: Long term memory is OK

Is individual oriented to person? Yes

Progression Rate: No Change

Decision Making

Rate how client makes decisions:

Independent - Decisions are consistent and organized;reflecting client's lifestyle,choices,culture, and values

Is client always able to supervise paid care provider? Yes

ADL

The following are the clients functional limitations as they impact ADL functioning:

Cannot raise arm(s), Unsteady gait, Right sided weakness

Stamina

Number of days individual went out of the house or building in which individual lives (no matter for how short a period): One day/week

Overall self-sufficiency has changed significantly as compared to status of 90 days ago: Deteriorated

Potential for improved function in ADL's and/or IADL's:

Difference between AM & PM

Task segmentation ADL's: No

Task segmentation IADL's: No

Universal Precautions

The formal and informal caregiver will use latex/plastic gloves when in contact with any secretions to prevent spread of infection. Thorough hand washing with soap will be done before and after gloving. Gloves will be put on and discarded at the end of each task. If the primary care provider orders these gloves they can be paid for through the medical coupon.

Walk in Room, Hallway, and Rest of Immediate Living Environment

Client Needs:

Independent, No setup or physical help

Assessment Details Pending Initial

Equipment:

Type	Status	Supplier
Walker	Has, uses	

Locomotion in Room and Immediate Living Environment

How individual moves between locations in his/her room and immediate living environment.

Client Needs:

Independent, No setup or physical help

Client Strengths:

Client is weight bearing

Client Limitations:

Leans to right

Equipment:

Type	Status	Supplier
Walker	Has, uses	

Locomotion outside of Immediate Living Environment to include Outdoors

How the individual moves to and returns from areas outside of their immediate living environment.

Client Needs:

Extensive assistance, One person physical assist

Client Strengths:

Remembers to use assistive device

Client Limitations:

Needs assist with stairs

Caregiver Instructions:

Keep assistive device within reach

Equipment:

Type	Status	Supplier
Walker	Has, uses	

Assessment Details Pending Initial

Provider

SMITH SHIRLEY

Bed Mobility

How individual moves to and from lying position, turns side to side, and positions body while in bed.

Client Needs:

Independent, No setup or physical help

Client Strengths:

Aware of need to reposition

Transfer

How client moves between surfaces, to/from bed, chair, wheelchair, standing position, (exclude to/from bath/toilet).

Client Needs:

Extensive assistance, One person physical assist

Client Strengths:

Transfers with some support

Caregiver Instructions:

Bring walker to client

Provider

SMITH SHIRLEY

Eating

How individual eats and drinks (regardless of skill). Includes intake of nourishment by other means (e.g., tube feeding, total parenteral nutrition)

Client Needs:

Independent, No setup or physical help

Client Strengths:

Client has a good appetite

Client Limitations:

Cannot cut food

Caregiver Instructions:

Assessment Details Pending Initial

Cut food into small pieces

Toilet Use

How individual uses the toilet room (or commode, bed pan, urinal); transfers on/off toilet, cleanses, changes incontinence pads, manages ostomy or catheter, adjusts clothes.

Client Needs:

Independent, No setup or physical help

Client Strengths:

Aware of need to use toilet

Continence Issues

Bladder control (last 14 days): Continent

Change in bladder continence (last 90 days): No Change

Bowel control (last 14 days): Continent

Change in bowel continence (last 90 days): No Change

Bowel Pattern (last 14 days):

Regular

Appliances & Programs (last 14 days):

Pads/briefs

Individual management (last 14 days): Uses independently

Dressing

How individual puts on, fastens, and takes off all items of street clothing, including donning/removing prosthesis.

Client Needs:

Extensive assistance, One person physical assist

Client Strengths:

Can select clothing

Client Limitations:

Cannot put on shoes/socks

Caregiver Instructions:

Put on/take off footwear

Assessment Details Pending Initial

Provider

SMITH SHIRLEY

Personal Hygiene

How individual maintains personal hygiene, including combing hair, brushing teeth, shaving, applying makeup, washing/drying face, hands, and perineum.

Client Needs:

Extensive assistance, One person physical assist

Client Limitations:

Cannot raise arms

Caregiver Instructions:

Comb hair as needed, Trim fingernails as needed, Brush client's teeth daily

Provider

SMITH SHIRLEY

Bathing

How individual takes full-body shower, sponge bath, and transfer in/out of Tub/Shower.

Client Needs:

Physical help/part of bathing, One person physical assist

Client Strengths:

Client is cooperative with caregiver

Caregiver Instructions:

Shampoo client's hair, Transfer in/out of tub/shower, Wash back, legs, feet

Provider

SMITH SHIRLEY

Skin Care

Pressure ulcers:

Skin intact over pressure points

Number of current pressure ulcers: 0

Client had skin ulcer that was resolved or cured in the last year: No

Assessment Details Pending Initial

IADL

Meal Preparation

How meals are prepared (e.g., planning meals, cooking, assembling Ingredients, setting out food and utensils.

Client Needs:

Extensive assistance, Some difficulty

Client Strengths:

Client can prepare a simple breakfast

Client Limitations:

Cannot cut/peel/chop, Cannot reach upper shelves

Client Preferences:

Eats 3 meals/day

Caregiver Instructions:

Prepare meals for client to reheat

Provider
SMITH SHIRLEY

Nutritional/Oral

Nutritional Problems:

None of these

Oral hygiene and dental problems:

None of these

Nutritional Approaches:

Diet	Adhere To
Low sodium	Yes

Ordinary Housework

How ordinary work around the house is performed (e.g., doing dishes, dusting, making bed, tidying up, laundry).

Client Needs:

Extensive assistance, Some difficulty

Caregiver Instructions:

Take out garbage, Clean bathroom weekly, Change/wash linens weekly, Vacuum weekly

Assessment Details Pending Initial

Provider

SMITH SHIRLEY

Managing Finances

How bills are paid, checkbook is balanced, household expenses are managed.

Client Needs:

Limited assistance, Some difficulty

Provider

Doe, Pete

Shopping

How shopping is performed for food and household items (e.g., selecting items, managing money).

Client Needs:

Extensive assistance, Great difficulty

Caregiver Instructions:

Carry heavy packages for client, Put items away

Provider

SMITH SHIRLEY

Doe, Pete

Transportation

How client travels by vehicle for medical needs and shopping (e.g., gets to places beyond walking distance).

Client Needs:

Extensive assistance, Some difficulty

Client Limitations:

Assist w/transfer in/out of vehicle

Caregiver Instructions:

Take wheelchair/walker

Provider

SMITH SHIRLEY

Assessment Details Pending Initial

Provider

Doe, Pete

Wood Supply

How client gets wood for heat (this must be only source of heat).

Is wood only source of heat? No

Social

Provider Information

Provider Information

Informal Providers:

Provider: Johnson, Sam

Phone: () -

Provider: Doe, Pete

Phone: () -

Assigned Tasks:

Finances, Med. Mgmt., Essential Shopping, Transportation

Formal Providers:

Provider: SMITH SHIRLEY

Phone: (509)000-0000

Assigned Tasks:

Bathing, Dressing, Housework, Locomotion Outside Room, Med. Mgmt., Meal Preparation, Personal Hygiene, Essential Shopping, Transportation, Transfers

Definitions

ADL Self-Performance Codes Definitions

Independent:

No help or oversight OR help/oversight only 1 or 2 times

Supervision:

Oversight (monitoring, standby) encouragement or cueing provided 3 or more times OR supervision 3 or more times PLUS physical assistance provided only 1-2 times

Service Summary

Pending Initial

Client Information

Client Name: Doe, Jane M

Address:

6824 152nd St, Olympia, WA, 98504

Phone: (360)725-5555 **Ext:**

Gender: Female **Age:** 73

Primary Language: English

Speaks English? Yes

Interpreter Required? No

Contacts

Emergency Contact: Doe, Pete

Services

Client is functionally eligible for: COPES waiver services

Recommended Living Situation:

In Home

Planned Living Situation:

In Home

Classification: A High (3)

Daily Rate: N/A

Monthly Hours: 73

Personal Care

Waiver #1 _____

Waiver #2 _____

Waiver #3 _____

Total authorized hours _____

Provider Information

Informal Providers:

Provider: Johnson, Sam

Phone: () -

Provider: Doe, Pete

Phone: () -

Assigned Tasks:

Finances, Med. Mgmt., Essential Shopping, Transportation

Formal Providers:

Provider: SMITH SHIRLEY

Phone: (509)000-0000

Service Summary Pending Initial

Assigned Tasks:

Bathing, Dressing, Housework, Locomotion Outside Room, Med. Mgmt., Meal Preparation, Personal Hygiene, Essential Shopping, Transportation, Transfers

Referrals/Indicators**Nursing Service Indicators**

Indicator: Immobility issues affecting plan	Refer? No
Indicator: Caregiver training required	Refer? No
Indicator: Unstable/potentially unstable diagnosis	Refer? No

Worker Information

Primary CM at Assessment Creation: Fitzharris, Karen (DigreK)

Case Manager Name: Fitzharris, Karen

Phone: (360)725-2607 **Ext:**

The role of the Case Manager is to:

1. Conduct assessments and reassessments to determine program eligibility and to authorize payment for services.
2. Develop a plan of care with participation from the client.
3. Verify that services are provided in accordance with the plan of care and to modify the plan as needed.

Clients have the right to waive case management services other than those listed in items 1, 2, and 3 above.

Service Summary Pending Initial

Client Signature

I am aware of all alternatives available to me, and I agree with the above service

Client/Representative signature

Date

Provider

Date

Social Worker/Case Manager signature

Date



911

dial 911 first

Emergency Contact List

created on __/__/__ initials __

Employer's Name: _____ Date of Birth: __/__/__

Employer's telephone number	home (____) ____-____ cell (____) ____-____
Employer's address Include street, apartment numbers, zip code	
Nearest cross streets and landmarks (e.g. apartment name, house color, etc.)	
Employer's physician and nearest hospital Names and phone numbers	Physician _____ Hospital _____ (____) ____-____ (____) ____-____
Employer's case manager Name:	Phone _____ Cell/Pager _____ (____) ____-____ (____) ____-____
Contact person(s) Names and phone numbers	(____) ____-____ (____) ____-____ (____) ____-____ (____) ____-____

Keep a copy at every phone

Many DSHS/ADSA publications and materials can be ordered on the Aging and Disability Services Administration website.

Visit
www.adsa.dshs.wa.gov

August, 2007