Providing Personal Care Services to Elders and People with Disabilities¹

Module 3. Infection Control

Goal

The goal for this module is to prepare participants to practice infection control effectively and apply the principles of standard precautions appropriately in everything they do with consumers.

Time

3 hours and 30 minutes (includes 30 minutes for opening, closing, and break)

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Activities	Teaching Methods	Time
Opening		10 minutes
3.1 Overview of Infection	Interactive presentation	30 minutes
3.2 Infection Control Strategies,	Interactive presentation, pairs	1 hour
Standard Precautions, and	work, pairs reporting, large-group	
Consumer Education	discussion, and large-group	
	exercise	
Break		10 minutes
3.3 Demonstration and Practice	Interactive presentation and	1 hour
Lab—Hand Washing, Using	demonstration, practice triads,	
Gloves, and Mixing Universal	large-group discussion	
Solutions		
3.4 Demonstration—Disposing of	Interactive presentation and	30 minutes
Wastes	demonstration	
Closing		10 minutes

Supplies

- Flip chart, markers, and tape
- Paper and pencils
- Index cards
- Access to at least one sink (for hand-washing) or several basins
- Paper towels, antimicrobial liquid soap
- Disposable gloves in range of available sizes
- Disposable aprons, masks, eye protectors
- Liquid bleach, white vinegar, large containers of water, basins for mixing, plastic funnels, and containers for storing universal solutions
- Plastic garbage bags
- Trash cans



Handouts

- Handout 3.1: Infections and Germs
- Handout 3.2: How Germs Spread
- Handout 3.3: Who Is Most Likely to Get Sick from Germs
- Handout 3.4: Signs of Infection
- Handout 3.5: Infection Control and Standard Precautions
- Handout 3.6: Strategies for Controlling Infections
- Handout 3.7: Washing Your Hands
- Handout 3.8: Wearing Gloves
- Handout 3.9: Cleaning Up Germs
- Handout 3.10: Making Cleaning Products
- Handout 3.11: Show Your Skills: Washing Your Hands
- Handout 3.12: Show Your Skills: Putting on and Taking Off Gloves
- Handout 3.13: Touching and Washing Dirty Laundry Safely
- Handout 3.14: Getting Rid of Wastes Safely
- Handout 3.15: Getting Rid of Sharps Safely

Advance Preparation

Review all training and presentation materials for this module.

Copy all handouts for participants.

Opening

Plan an appropriate opening activity for this module. If this is the start of a new day of training, some kind of warm-up activity might be good to help focus participants' attention on being back in the learning environment. If this is a continuation of a full-day session, resuming after lunch, a quick energizer might be useful to refocus participants mentally and physically after eating.



Activity 3.1 Overview of Infection

Prepare the following flip chart pages:

- "Learning Agenda" (Step 2)
- "Infection and Germs" (Step 3)
- "Cycle of Infection" (Step 5)

Activity 3.2 Infection Control Strategies, Standard Precautions, and Consumer Education

Using **Handout 3.6: Strategies for Controlling Infections**, print each infection control strategy on a piece of paper, 8 ½ x 5 ½ (half-sheets) or 5x8 index card. If using colored paper, use the same color for each flip chart exercise in this activity (see next instructions). Laminating the half-sheets is highly recommended to allow for re-use.

Do the same for the rules under "When Should You Wash Your Hands?" from **Handout 3.7: Washing Your Hands**, and for the rules under "When To Wear Gloves" from **Handout 3.8: Wearing Gloves**.

Create the same kind of card for the four types of household disinfectant—detergent and hot water, bleach and hot water, vinegar and water, and commercial disinfectants described in **Handout 3.9: Cleaning Up Germs**.

Prepare the following flip chart pages:

- "Preventing and Controlling the Spread of Germs" (Step 4)
- "When to Wash Hands" (Step 7)
- "When to Wear Gloves" (Step 10)
- "Household Disinfecting Solutions" (Step 13)



Activity 3.3 Demonstration and Practice Lab: Hand Washing, Using Gloves, and Mixing Universal Solutions

Set up enough workstations around the room so that there is one station for each group of three participants. At these stations, set out supplies for the following:

- Hand washing
- Putting on & removing gloves
- Mixing bleach solution
- Mixing vinegar solution

Place copies of the performance checklists and guidelines (**Handouts 3.10, 3.11, 3.12**) at the workstations (one set for each participant). These will be used by the observers during practice lab.

Make one additional set of the checklist for hand washing to be completed by an instructor during return demonstrations.

Since you may want to observe a return demonstration in hand washing for every participant, it would be helpful to have several instructors or qualified staff available to observe and evaluate return demonstrations.

Activity 3.4 Demonstration: Disposing of Wastes

Prepare one workstation to demonstrate proper handling of laundry and appropriate waste disposal.

Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)



Activity 3.1 Overview of Infection

30 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define the terms infection and germs.

Name the three main phases of the cycle of infection.

Explain how infections spread.

List body fluids that can spread infections.

Name four symptoms of infection.

Identify groups of people who are most vulnerable to infection.

Key Content

- Infections are conditions or diseases that happen when germs enter the body and grow.
- Germs are micro-organisms (i.e., tiny living things) that are virtually everywhere inside and outside our bodies. Some germs are considered helpful; others cause diseases. Types of germs are bacteria, viruses, fungi, and parasites.
- The cycle of infection involves the initial host for the germs (a person, place, or carrier), a way to move out of the host, and a way to move into a new host.
- Germs can be passed through body fluids, through the air, by animals and insects, and through food.



- Body fluids that can spread infections are: blood, urine, feces, vomit, mucus, vaginal discharge, semen, and saliva.
- Symptoms of infection include redness of tissue, swelling, discharge, warmth, or pain in the infected area, fever, chills, nausea, vomiting, or fatigue.
- The people who are most likely to become infected after exposure to germs are those who are very young or very old, are already sick, have inadequate nutrition, poor hygiene, weakened immune systems, or are feeling tired or stressed.
- As health care workers, it is important to control infections. Thus direct-care workers must work to prevent the spread of germs.

Activity Steps

Teaching Tips

Throughout this training, as in this module, the selection and sequence of training methodologies follows well-established principles for adult learner-centered education. Timing may vary in some steps or some activities, but to maximize participant learning, every effort should be made to follow the teaching instructions. Participants will not likely retain critical information if taught through a lecture format. See "Adult Learner-Centered Training: An Introduction for Educators in Home and Residential Care" (PHI, November 2008) for more information about principles of adult learner-centered training and specifics about using each training methodology to its greatest advantage.

In this activity, interactive presentations are interspersed with brainstorming to show participants that, as a group, they already know quite a bit about this topic. Brainstorming also allows the trainer to assess just how much participants do already know and how to pace the presentations.

In Activity 3.2, the brainstorming is done in pairs. This is important for several reasons: to keep learners engaged and attentive (even brainstorming can be repetitive and ineffective if overused); to make sure that every participant gets involved (brainstorming can easily be dominated by a few



individuals, especially in early stages of training); to show participants that they can learn from each other; and to begin developing teamwork. Working in pairs also decreases the sense of shame or failure when a task is not done exactly right, or when all the answers aren't what the trainer was looking for. Ensuring and reinforcing successful learning at the beginning is very important in a long and intense training program.

Interactive Presentation—30 minutes

- 1. Introduce the module. Explain that protecting consumers from infectious disease is an important part of a direct-care worker's job. It is equally important for direct-care workers to protect themselves from infections that could limit their ability to work. Also, if the direct-care worker becomes ill, she or he may pass disease to others. In this module, participants will learn about several important ways to control the spread of germs that cause infections. "Infection control" refers to all the strategies that are used to control and limit the spread of infection.
- **2. Introduce the "Learning Agenda**." Post and review the prepared flip chart page with the topics to be covered in this module.

Flip Chart

LEARNING AGENDA: MODULE 3 Infection Control

- What infections are and how they are spread
- Strategies to control the spread of infections
- Definition of standard precautions
- Key strategies:
 - ✓ Hand washing
 - ✓ Use of gloves
 - ✓ Disinfecting
 - ✓ Disposing of wastes



3. Review definitions. Begin by asking: *What does the word "infection" mean to you?* After a few responses, follow up by asking: *What is a germ?* After a few more responses, post and review the prepared flip chart page. Note that participants will get handouts with all this information, so for now you would like them to listen and join in the discussion.

Flip Chart

INFECTION

Conditions or diseases that happen when germs enter the body and grow

GERMS

Micro-organisms (tiny living things) that are everywhere, inside and outside our bodies.

- **4. Give additional information.** Note that germs can be bacteria, viruses, afungi, or parasites. Germs are nearly everywhere—in the air, on surfaces, on your hands, in your nose. Some germs are considered good and help you stay healthy, but others cause infections and illnesses. As health care workers, it is important to try to keep infections from spreading. Thus direct-care workers must try to prevent the spread of germs. After this discussion, distribute **Handout 3.1: Infections and Germs**.
- **5. Explain how infection spreads.** Post and review the prepared flip chart page on "Cycle of Infection."



Flip Chart

CYCLE OF INFECTION

- A host for the germs—person, place, animal. The host may or may not show signs of infection or illness
- A way to move out of the host
- A way to move into a new host
- **6. Give additional information**. It is important to note to participants that the original "host" may not show any signs of infection, and may never get sick—this person is called a "carrier." This will be important later when you discuss standard precautions. For now, it is safe to assume that direct-care workers will come in contact with consumers who are being treated for infections or infectious diseases. The consumer is the first host.
- **7. Facilitate brainstorming**. Ask about the ways that germs can move out of the host—that is, how are germs spread? Write participants' answers on a flip chart page, "How Germs Travel."

Flip Chart

HOW GERMS TRAVEL



Teaching Tip

Responses that you are looking for include:

- In the air (sneezing, coughing, etc.)
- Contact with body fluids
- Contact with animals
- Insects
- Food and water
- Skin-to-skin contact
- **8. Explore in more detail.** Expand on "body fluids," and ask:

What body fluids could a direct-care worker come in contact with that may contain germs? [Answers: blood, urine, feces, mucus, vomit, semen, vaginal secretions, saliva, and sweat]

Add these to the flip chart page, or start another sheet for "Body Fluids."

9. Continue the large-group discussion. Following the path of infection, explain that now the germs have found a way to the potential new host. Note that participants will learn in Module 5, Body Systems and Common Diseases, that the skin is the first layer of defense against infections and a lot of germs never get any further. Ask:

So, how will the germs get past the skin barrier in the new host?

Refer back to the flip chart page, "How Germs Travel," and for each pathway, consider how that traveling germ could get into a new host. After completing this discussion, distribute **Handout 3.2: How Germs Spread** and review any information not mentioned during the discussion.



Teaching Tip

Responses that you are looking for [for each pathway]:

- [In the air] Breathing the germs in (to the lungs)
- [Contact with body fluids] Contact with mucus membranes (eyes, mouth, vagina, anus); or directly into a scratch or cut; or being stuck by a sharp instrument used by an infected person
- [Contact with animals] Animal bites
- [Insects] Insect bites
- [Food and water] Eating and drinking
- [Skin-to-skin contact] Open sores or cuts; plus some infections affect the skin (e.g., scabies, lice); skin contact is all it takes to spread
- **10. Facilitate brainstorming**. Note that not everyone who is exposed to germs will become infected or get sick. Ask:

Who are the people most likely to become sick after exposure to germs?

Teaching Tip

Responses that you are looking for include:

- Children (babies especially) and elders
- People who are already sick
- People with poor nutrition
- People whose immune systems are weak (due to long-term illness, chemotherapy, or auto-immune diseases)
- People with poor personal hygiene or with poor living conditions
- People who are over-tired or stressed

After brainstorming answers, distribute **Handout 3.3: Who Is Most Likely to Get Sick from Germs?** and identify any populations on the list not mentioned in the brainstorm.

11. Lead a large-group discussion. Ask:

What are the symptoms or signs that someone may have an infection?

After a few responses, distribute **Handout 3.4: Signs of Infection**. Review the list, noting which ones they already mentioned and which ones they did not. Note that



some infections happen around or within a cut or wound, and others affect internal organs or body systems. Identify which symptoms go with which kind of infection.

12. Wrap up the presentation. Note that several of these groups of people who are especially susceptible to infection are the very people that participants will work with as direct-care workers. Thus, it is especially important for them to practice infection control—so they protect the consumers from exposure to "new" germs, and so that they protect themselves from exposure to germs that the consumers may be transmitting. In the next activity, they will focus on infection control strategies based on what they have just learned.

Activity 3.2 Infection Control Strategies, Standard Precautions, and Consumer Education

1 hour

Learning Outcomes

By the end of this activity, participants will be able to:

Define infection control.

Explain why "standard precautions" are important for infection control.

List eight ways that a direct-care worker can help to prevent the spread of germs.

Explain when a direct-care worker should wash his or her hands.

Explain when a direct-care worker should use gloves.

Describe how to handle and wash soiled clothing or linens.

Explain which household disinfecting solutions to use for different needs.

Key Content

- Infection control is any activity that prevents or stops the spread of germs.
- Because some infections have no symptoms, particularly those that infect internal body systems, there is no way to be sure that a consumer does not have an infection. Thus, the best way to prevent transmission of disease between direct-care workers and consumers is to assume that contact with *all* body fluids from *every* consumer carries a risk of infection.



- Using "standard precautions" means using infection control practices to prevent contact with all consumers' body fluids.
- The key steps for standard precautions are the use of gloves, wearing an apron, a mask, and eye protectors, and proper handling and disposal of linens and wastes that contain body fluids and of sharp instruments that could cut or jab the worker.
- Hand washing is the single most important infection control activity. Direct-care workers should wash their hands before and after contact with consumers. They should also be aware of when they have touched a potentially contaminated surface and wash their hands to prevent spreading germs to themselves.
- Using gloves when handling all body fluids is another major component of infection control (and a key component of standard precautions). The challenge is to identify where contact with body fluids might occur (e.g., in soiled bed sheets) and to think ahead about when that might happen.
- Disinfecting surfaces in the bathroom and the kitchen, using universal solutions made with bleach and with vinegar, can also help to prevent spread of germs. Soiled linens and clothing (including uniforms) can also spread infection, so disinfecting is important in handling and cleaning laundry as well.
- Staying healthy is one of the direct-care worker's main responsibilities. If the worker is sick, he or she should stay home. A simple cold for the worker could turn into something much worse for a consumer who is vulnerable to infection.
- Consumers can also help to prevent the spread of germs if they are aware of the need. Some consumers may be confused or concerned about the use of gloves and disinfectants. Explaining that "standard precautions" mean that this is done with *all* consumers, regardless of their diagnosis or condition, may help to relieve anxiety. Explaining infection control and standard precautions to consumers is thus part of the direct-care worker's educational role.



Activity Steps

Interactive Presentation—5 minutes

1. Introduce key concepts. Explain the first two bullets of "Key Content," the definition of infection control and standard precautions. After presenting the information and taking questions, distribute Handout 3.5: Infection Control and Standard Precautions for participants' resource binders.

Pairs Work—5 minutes

- 2. Set up pairs work. Ask participants to form pairs. Distribute the 8 ½ x 5 ½ papers ("cards") with the 16 strategies from **Handout 3.6: Strategies for Controlling**Infections (see Advance Preparation), one or two cards to each pair. (Keep any extra cards for yourself.)
- 3. Begin pairs work. Explain that there are many ways a direct-care worker can work to prevent the spread of germs. Each of their cards describes one of those ways. Ask each pair to read their card together, figure out how it helps to prevent or control the spread of germs, and then plan a brief explanation for the rest of the group. Encourage participants to look back at the flip chart pages, and their handout about infection and how it spreads, in order to explain how this rule would help. They will have five minutes to prepare, and can consult with the instructor if they have questions.

Pairs Reporting and Large-Group Discussion—10 minutes

4. Facilitate reporting back to the large group. Starting with the pair who has "Wash your hands," ask the two participants to read their card and explain why washing one's hands helps to prevent or control the spread of infection. Ask if there are any questions. Make additional comments or corrections, as needed. After each card is read and explained, tape it to a flip chart page titled "Preventing and Controlling the Spread of Germs." Note, again, that participants will get this information in a handout at the end of the activity.



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PREVENTING AND CONTROLLING THE SPREAD OF GERMS

5. Repeat this process for each rule. Continue with the remaining cards, in the order they are listed in the handout. Post and explain the cards that remained after distributing them to the pairs in Step 2.

Pairs Work and Large-Group Discussion—10 minutes

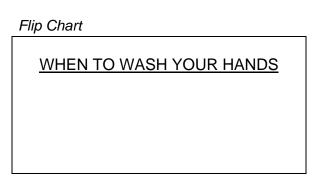
6. Conduct brainstorming in pairs. Ask each pair to brainstorm and list all the times when a direct-care worker should wash his or her hands. Give them about 3 minutes.

Teaching Tip

Flin Chart

While the pairs are working, post the flip chart page, "When to Wash Your Hands," and find the cards based on the bullets from **Handout 3.7: Washing Your Hands** (see Advance Preparation).

7. Facilitate reporting back to the large group. Have each pair read one of their "times." If it matches one from the list on the handout, find the matching card and tape it on the flip chart page titled "When to Wash Your Hands."





Teaching Tips

If the participants suggest something that is not on the list, but makes sense, add it to the flip chart page with a marker.

If they suggest something that doesn't make sense, briefly explain why and go on to the next idea.

8. Review additional cards. After each pair has had at least one turn, post and briefly explain the cards that you are still holding (if any). Note that they will learn how to wash their hands properly during the demonstration activity (3.3).

Pairs Work and Large-Group Discussion—10 minutes

9. Set up pairs work. Ask each pair to brainstorm and list all the times when a direct-care worker should use gloves. Remind them that this is most important to prevent contact with body fluids.

Teaching Tip

While the pairs are working, post the flip chart page, "When to Wear Gloves," and find the cards based on the bullets from **Handout 3.8: Wearing Gloves** (see Advance Preparation).

10. Facilitate reporting back to the large group. Have each pair read one of their "times." As before, if it matches one from the list in the handout, find the matching card and tape it on the flip chart paper titled "When to Wear Gloves."

Flip Chart
WHEN TO WEAR GLOVES



11. Review additional cards. After each pair has had at least one turn, post and briefly explain the cards that you are still holding (if any). Note that they will learn how to put on and take off gloves, to avoid contamination, during the next activity (3.3).

Interactive Presentation—15 minutes

- 12. Highlight key points. Briefly review the following topics, based on Key Content, Handout 3.9: Cleaning Up Germs, and Handout 3.10: Making Cleaning Products.
 - Disinfecting equipment, bathrooms, and kitchens; when to use commercial detergents; when to use universal solutions; composition of bleach solution and vinegar solution.
 - Keeping oneself healthy and staying home from work when sick.
 - The importance of including consumers in infection control strategies and how to inform them about their role.

Large-Group Exercise—5 minutes

Flip Chart

13. Set up pairs work. For a quick review, take all the cards off the flip chart pages—"Preventing and Controlling the Spread of Germs," "Wash Your Hands" and "When to Wear Gloves." Post a new flip chart page, titled "Household Disinfecting Solutions," and add the cards on detergents and solutions into the pile (see Advance Preparation). Mix up the cards and distribute them at random to all the pairs until all the cards have been handed out. Each pair must figure out which category each of their cards goes with, and tape it on the flip chart page.

PREVENTING AND CONTROLLING
THE SPREAD OF GERMS



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WASH YOUR HANDS
Flip Chart
WHEN TO WEAR GLOVES
Flip Chart

HOUSEHOLD DISINFECTING
SOLUTIONS

Teaching Tip

If there is limited time for this review, instead of taking off all the cards, you can select several cards from each flip chart page—enough for one or two for each pair—and distribute those. It will be less challenging, but still energizing and fun for the participants to show what they remember!



- **14. Go over results**. Read the cards on each flip chart page, moving cards to the correct page, if necessary.
- **15. Wrap up the activity.** Congratulate everyone for all their hard work! Distribute the handouts that support this activity (**Handouts 3.6–3.10**). Note that next they will learn how to *do* some of these key action steps.

Activity 3.3 Demonstration and Practice Lab—Hand Washing, Using Gloves, and Mixing Universal Solutions

1 hour

Learning Outcomes

By the end of this activity, participants will be able to:

Demonstrate the steps in proper hand-washing.

Demonstrate the steps in putting on and removing gloves.

Demonstrate how to mix a universal solution with bleach and with vinegar.

Key Content

- Proper technique for hand-washing and using gloves is important for effective infection control. These will be demonstrated in this activity, and participants will have a chance to practice.
- Wearing an apron is relatively common during personal care. The use of masks and protective eye wear is less common, but participants need to know when and how to use them.
- The bleach solution is made with one part bleach and ten parts water. This is used for disinfecting surfaces that may be used for eating or washing.
- The vinegar solution is made with one part vinegar and three parts water. This is used for deodorizing items like bedpans and urinals.
- Hand washing and proper use of gloves are skills that participants will continue to practice throughout the training. They will also apply their knowledge about when and how to implement other action steps of infection control while assisting



consumers with activities of daily living. The purpose of this activity is to be sure that participants are clear about the proper techniques—proficiency will come with practice.

Activity Steps

Interactive Presentation and Demonstration—10 minutes

- 1. Introduce the activity. Explain to participants that in the last activity they learned about the importance of washing hands, wearing gloves, and using disinfectants. In this activity they will learn to how to make cleaning products, properly wash their hands, and put on and take off gloves.
- 2. Conduct the first demonstration. Go to a workstation and ask everyone to circle around so they can see. Following the steps in Handout 3.10: Making Cleaning Products, demonstrate the steps for mixing the universal solution (bleach and water). Explain to participants that they should watch the demonstration without taking notes, as their handout shows all the steps. After the demonstration, ask participants if they have questions. Ask:

What should be cleaned with the bleach and water solution?

3. Conduct the second demonstration. Next demonstrate mixing a vinegar and water solution. Ask participants if they have questions about the procedure. Ask:

What should be cleaned with a vinegar solution?

Practice Triads—20 minutes

4. Set up triads. Explain to participants that most of the practice labs in this training will be conducted through practice teams—usually triads (teams of three). By working in teams, participants are able to support each other while learning, reinforcing what they were taught by observing others and helping them to follow the guidelines for each skill. Ask participants to form triads for this practice lab.



- **5. Match teams with materials**. Point out the workstations that are set up around the training space. Ask each team to go to a workstation.
- **6.** Note the ongoing role of the instructor(s). Explain that the instructor(s) will be moving around the room to assess how participants are doing, to answer questions, and to provide additional instruction as necessary.
- 7. Give instructions. In their triads, explain that participants will take turns practicing mixing the two cleaning solutions. While one person is practicing the task, the other team members should follow along with **Handout 3.10: Making Cleaning Products** and provide encouragement when needed. After one participant completes the bleach solution, switch roles, so that the second participant, and then the third, can practice mixing the solution. Then do the same with the vinegar solution.
- **8.** Transition to next demonstration. When participants have completed their skills practice, call participants back to the large group for the next demonstration.

Demonstration and Large-Group Discussion—10 minutes

- 9. Conduct the third demonstration. Ask participants to gather around a workstation. Following the steps in Handout 3.11: Show Your Skills—Washing Your Hands, demonstrate how to properly wash one's hands. Explain each step; then take questions.
- **10. Conduct the fourth demonstration.** Following the steps in **Handout 3.12: Show Your Skills—Putting On and Taking Off Gloves**, demonstrate how to properly put on and take off gloves. Explain each step; then take questions.
- **11. Distribute handouts and lead a large-group discussion.** Following the demonstrations, distribute **Handouts 3.11** and **3.12**. Give participants a chance to review the handouts, and then ask:

What steps are most important to ensure that your hands are clean and you won't spread germs?



When should you wash your hands?

How do you get gloves off without spreading germs?

When is it most important to wear gloves?

Practice Triads—20 minutes

- **12. Set up small-group work**. Ask participants to return in their triads to the workstations. Each person should practice hand washing while the other members of the team use the checklist to observe and encourage the person practicing. Do the same for putting on/taking off gloves.
- **13. Note the ongoing role of the instructor(s).** Explain that the instructor(s) will be moving around the room to assess how participants are doing, to answer questions, and to provide additional instructions as necessary.
- **14. Wrap up the activity**. When participants have completed their skills practice, or when the time has run out, call participants back to the large group and answer any questions participants may have.

Teaching Tip

If there is enough time, make sure each participant is given an opportunity to do their hand washing return demonstration. This demonstration should be assessed at a workstation with a working sink.



Activity 3.4 Demonstration—Disposing of Wastes

30 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Explain when a direct-care worker should wear an apron, mask, or protective eye wear.

Describe how to handle soiled linens.

Describe how to dispose of wastes with body fluids.

Describe how to dispose of sharp instruments.

Key Content

- Soiled linens and clothing should not be set down on any surface. They should go directly into a non-porous laundry bag. There are specific guidelines for cleaning with bleach (whites) or vinegar solution (colored clothing).
- Wastes that contain body fluids are never set down on any surface, but are immediately double-bagged in garbage bags.
- Used needles, syringes, razor blades, or other sharp instruments must be placed in puncture-proof plastic or metal containers with secure lids.

Activity Steps

Interactive Presentation and Demonstration—30 minutes

1. Introduce the activity. For each of the topics in this activity, the instructor will demonstrate proper procedure, then distribute the appropriate handout and review



with participants. All materials and supplies should be ready in advance (see Advance Preparation).

- 2. Conduct the first demonstration. Following the guidelines in Handout 3.13: Touching and Washing Dirty Laundry Safely, demonstrate how to handle dirty laundry. Explain each step and answer participant questions.
- **3.** Lead a large-group discussion. Distribute Handout 3.13. Give participants a chance to review the handout and then ask:

How can you prevent the spread of germs when doing a consumer's laundry?

How is doing a consumer's laundry different from what you do at home?

Are there any other questions about the procedures for handling laundry?

- **4.** Conduct the second demonstration. Review what is defined as "wastes" and how to dispose of them. Then following the guidelines in **Handout 3.14: Getting Rid of Wastes Safely**, demonstrate how to dispose of waste materials properly. Explain each step and answer any questions.
- **5.** Lead a large-group discussion. Distribute Handout 3.14. Give participants a chance to review the handout. Ask:

How many plastic bags are needed to dispose of waste materials safely?

What guidelines protect you from spreading germs?

6. Conduct a third demonstration. Define "sharps" and why they are dangerous. Following the guidelines in **Handout 3.15: Getting Rid of Sharps Safely**, demonstrate how to properly dispose of sharps. Explain the steps and ask for questions.



7. Lead large-group discussion. Distribute **Handout 3.15** and give participants a chance to review it. Ask:

What items qualify as sharps and need to be disposed of in a special way?

How can you help the consumer dispose of sharps safely?

What are the special safety rules associated with needles and syringes?



Module 3. Infection Control¹

Handouts

Activity 3.1: Overview of Infection

Handout 3.1
Infections and Germs

Handout 3.2 How Germs Spread

Handout 3.3 Who Is Most Likely to Get Sick from Germs

Handout 3.4 Signs of Infection

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Module 3. Infection Control

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Handout 3.14 Getting Rid of Wastes Safely

Handout 3.15 Getting Rid of Sharps Safely



Handout 3.1

Infections and Germs

It's important to understand infections and how they spread. Here's what you need to know.

What are infections?

Infections are problems or diseases. They happen when germs get into the body and grow.

What are germs?

Germs are tiny living things. They live almost everywhere, inside and outside our bodies. Some germs help people. Others cause problems or diseases.

Types of germs include:

- Bacteria
- Fungi
- Parasites
- Viruses

How Germs Spread

Handout 3.2

Page 1 of 2

Infection is spread in 3 stages:

Stage 1

Germs live in a **host.** The host may be a person or other animal.

Stage 2

The germs **move out** of the first host.

Stage 3

The germs **move into** a new host.

How Germs Spread

Germs use many routes to get from one host to another. Here are some ways that germs spread:

Through the air

The first host coughs or sneezes. The new host breathes in the germs.

- Through animal bites
- Through insect bites
- Through eating or drinking infected food or water



How Germs Spread

Handout 3.2

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Through touching

The first host and the new host touch each other. Germs move from one open sore to another. Scabies and lice spread from one body to another.

Through body fluids

Germs get out of the first host in:

- Blood
- Fluid from a cut
- Fluid from a penis or vagina
- Mucus
- Pus
- Saliva
- Stools
- Urine
- Vomit

Germs get into the new host when infected body fluids:

- Are on a needle or other sharp thing that goes into the skin of the new host
- Get into a cut or scratch
- Touch mucus membranes, like those inside your mouth



Handout 3.3

Who Is Most Likely to Get Sick from Germs

Some people are more likely than others to get sick from germs. They are **susceptible** to germs.

Susceptible people may be:

- Already sick
- Under stress
- Very old
- Very tired
- Very young

Susceptible people may be people who:

- Don't eat a healthy diet
- Don't wash their hands well
- Have a weak immune system. That means their body is not good at fighting off things from outside.

Handout 3.4

Signs of Infection

It's important to know the signs of infection. Here's what to look for.

If a cut is infected:

- Fluid comes out of the cut.
- The cut hurts.
- The skin around the cut is red and puffy. It feels warm.

If a body part or body system is infected, a consumer may feel:

- Pain in the infected area
- Sick to their stomach, or throw up
- Very hot or cold
- Very tired



Infection Control and Standard Precautions

What is infection control?

Infection control is anything you do to prevent or stop germs from spreading.

Take these steps to control infections:

- Wash your hands.
- Do not touch consumers' body fluids.
- Wear gloves, an apron, and a mask, as needed.
- Get rid of germs on things and in work areas.
- Put waste in the right place.

What are standard precautions?

You cannot always tell if someone is infected just by looking at them. So you need to follow these rules **every time** you work with a consumer. This is called **standard precautions**.



Strategies for Controlling Infections

It's important to understand how to control infections.

Follow these general rules.

To keep germs from spreading:

- Cover your mouth when you cough or sneeze.
- Do **not** come to work when you're sick.
- Eat a healthy diet.
- Keep your nails short.
- Wash your hands.
- Wear a mask and gloves, as needed.
- Wear simple jewelry.

Follow these specific rules.

When you cook:

- Clean cooking areas before and after cooking meat, fish, and poultry.
- Put away food carefully.
- Rinse can tops before opening them.
- Wash fruits and vegetables before eating or cooking them.
- Wash meat, fish, and poultry before cooking them.

When you clean:

- Keep your work area clean and free of insects.
- Put dirty linens in a laundry bag.
- Put out clean towels often.
- Throw away waste and used needles in the right place.



Washing Your Hands

Handout 3.7

Page 1 of 2

Why should you wash your hands?

Washing your hands is the best way to control infections!

When should you wash your hands?

Follow these general rules.

Wash your hands:

- Before you touch a consumer. This protects the consumer from your germs.
- After you touch a consumer. This protects you from the consumer's germs.
- After you touch a thing or surface that could have germs on it.
- Follow these specific rules.

Wash your hands before you:

• Leave a consumer's home

Wash your hands after you:

- Cough, sneeze, or blow your nose
- Get to a consumer's home
- Tear your glove
- Use the toilet



Washing Your Hands

Handout 3.7

Page 2 of 2

Wash your hands before and after you:

- Eat, drink, or touch food
- Put on your makeup or lip balm
- Smoke
- Touch a consumer
- Touch items used in personal care, like a toothbrush
- Touch your contact lenses
- Wear gloves

Questions and Answers

• Question: The consumer's saliva is on my elbow. What should I do?

Answer: Sometimes a part of your body touches things that may have germs on them. If this happens, wash the part with soap and water right away. If germs get in your eyes, nose, or mouth, rinse them well with plenty of water.

• Question: I know that germs live on faucets and inside sinks. How should I wash my hands?

Answer: Have a clean paper towel ready. Use it to turn the faucet on and off. If you touch the inside of the sink, wash your hands again.



Wearing Gloves

Handout 3.8

Page 1 of 2

It's important to understand how to wear gloves. Here's what you need to know.

Why should you wear gloves?

Wearing gloves keeps you from touching body fluids. Body fluids have germs in them.

When should you wear gloves?

In general, wear gloves any time you might touch body fluids.

Follow these specific rules for when to wear gloves.

Wear gloves when you:

- Change bandages or dressings
- Clean areas where body fluids have spilled
- Collect or touch urine or stool samples
- Press down to stop bleeding
- Touch dirty items used in personal care
- Touch dirty or bloody linens, towels, or clothes

Wear gloves when you assist consumers to:

- Bathe
- Take care of their mouth
- Clean between their legs
- Use a toilet, bedpan, or urinal
- Change their pad or brief
- Take care of their catheter



Wearing Gloves

Handout 3.8

Page 2 of 2

How often should you wear gloves?

Use gloves only once. Never use them again, even if you wash them.

If a glove tears:

- Take off both gloves right away.
- Wash your hands well.
- Put on another pair of gloves.

Questions and Answers

• Question: One of the people I help is coughing and sneezing a lot. Other than gloves, what can I wear to protect myself from germs?

Answer: You can wear a mask.

• Question: Sometimes the bed linens are very dirty. What can I wear to protect my clothes when I change the sheets?

Answer: You can wear an apron. You can also wear an apron when you assist a consumer to bathe.



Cleaning Up Germs

Handout 3.9

Page 1 of 2

Why should you clean up germs?

Cleaning up germs keeps the consumer, family members, visitors, and you from getting sick.

How should you clean up germs?

To clean dishes:

- Wash the consumer's dishes with warm water and dish soap.
- Rinse and air-dry the dishes. If you dry dishes with a towel, use a clean towel each time.

To clean items used in personal care:

- Handle razors with care. Throw them away the same way you throw away needles.
- Wash thermometers in cool water and soap. Wipe them with alcohol before and after use.
- Make sure the consumer does not share personal care items with other family members.

To clean spilled body fluids:

- Put on gloves.
- Wipe up the spill with paper towels.
- Throw away the paper towels in the garbage. Use 2 bags.
- Take off and throw away your gloves. Wash your hands.
- Use bleach and water solution to get rid of germs.

Wear special gloves.

Wear rubber utility gloves. They will protect your hands from cleaning products. Do not wear latex gloves.



Cleaning Up Germs

Handout 3.9

Page 2 of 2

Use different cleaning products for different jobs.

Use detergent and hot water to clean:

- Clothes
- Dishes
- Sheets and towels

Use bleach and water to clean:

- Bathroom and kitchen surfaces
- Spilled body fluids
- Toilets

Use vinegar and water to clean and prevent odors on:

- Surfaces in the bathtub, shower, and kitchen
- Urinals, bedpans, commodes, and toilets

Making Cleaning Products

Handout 3.10

Page 1 of 2

Here's how to make bleach and water solution, or "universal solution."

You will need:

- 1-cup measuring cup
- Empty plastic bottle with a cap. Make sure it can hold more than 11 cups of fluid.
- Label and marker, or permanent marker
- Liquid bleach
- Rubber utility gloves
- Water

Take these steps:

- 1. Wash your hands.
- 2. Put on gloves.
- 3. Measure 10 cups of water. Pour them into the bottle.
- 4. Measure 1 cup of bleach. Pour it into the bottle.
- 5. Put the cap on the bottle. Shake the bottle.
- 6. Write "Bleach solution 1:10" and the date on the label or bottle.
- 7. Put away the solution and the things you used. Keep the solution and the bleach out of reach of children.
- 8. Take off and rinse the gloves. Hang them up to dry.
- 9. Wash your hands.



Making Cleaning Products

Handout 3.10

Page 2 of 2

Here's how to make vinegar and water solution.

You will need:

- 1-cup measuring cup
- Empty plastic bottle with a cap. Make sure it can hold more than 4 cups of fluid.
- Label and marker, or permanent marker
- Water
- White vinegar

Take these steps:

- 1. Wash your hands.
- 2. Measure 3 cups of water. Pour them into bottle.
- 3. Measure 1 cup of vinegar. Pour it into the bottle.
- 4. Put the cap on the bottle. Shake the bottle.
- 5. Write "Vinegar solution 1:3" and the date on the label or bottle.
- 6. Put away the solution and the things you used. Keep the solution out of reach of children.
- 7. Wash your hands.



Show Your Skills: Washing Your Hands

Trainee's Name:			Date:		
Tr	rainer's Name:				
What to Do		Shows Skill?		Trainer's Notes	
Ge	et ready to wash your hands.				
1.	Stand back from the sink. Your clothes and hands must not touch the sink.		Yes No		
2.	Turn on the water with a dry paper towel.		Yes		
	Make it warm and comfortable.		No		
Wash your hands.					
3.	Get your hands wet. Point your fingertips		Yes		
	down.		No		
4.	Put liquid soap on your hands and wrists.		Yes		
_	Dub your hands finance and youists Class		No		
5.	Rub your hands, fingers, and wrists. Clean between your fingers.		Yes No		
6.	Rinse your hands. Rub them under the water for at least 30 seconds. That's about how long it takes to sing "Happy Birthday" two times.		Yes No		
Dr	y your hands.				
	Dry your hands with a clean paper towel. Do not shake water off your hands.		Yes No		
8.	Turn off the water with a clean paper towel.		Yes No		
9.	Throw the paper towel in the garbage.		Yes No		
Signature of Trainer(s)				Date	
Signature of Trainee				Date	



Show Your Skills: Putting On and Taking Off Gloves

Handout 3.12

Trainee's Name:	Date:		
What to Do	Shows Skill?	Trainer's Notes	
Put on gloves.			
1. Wash your hands.	 ☐ Yes ☐ No ☐ Yes 		
2. Dry your hands well with a paper towel.	\square No		
3. Check the gloves for tears or holes. Do not use the gloves if you find any.	 ☐ Yes ☐ No 		
4. Put the gloves on when you are ready to work with a consumer.	 □ Yes □ No 		
Take off gloves.			
5. Use your gloved right hand to hold the left glove, near the wrist. Do not touch bare skin.	□ Yes □ No		
6. Peel the left glove off from the wrist. It should now be inside out.	 ☐ Yes ☐ No 		
7. Ball up the left glove in your right hand. Leave it inside out.	□ Yes □ No		
8. Put two fingers of your left hand inside the right glove. Do not touch the outside of the glove with your bare hand.	□ Yes □ No		
9. Peel the right glove off from the wrist. It should now be inside out, over the left glove.	□ Yes □ No		
10. Throw away the gloves in the right place.	 ☐ Yes ☐ No 		
11. Wash your hands.	 ☐ Yes ☐ No 		
Signature of Trainer(s) Signature of Trainee		Date Date	



Handout 3.13

Touching and Washing Dirty Laundry Safely

Page 1 of 2

Why should you handle dirty laundry with care?

Dirty laundry may have body fluids on it. Body fluids have germs in them. Germs can make people sick.

How should you handle dirty laundry?

Take these steps:

- 1. Put on gloves and an apron.
- 2. Put a laundry bag where you can reach it.
- 3. Roll items away from your body. Wrap the dirty areas inside the clean areas.
- 4. **Never** shake out dirty laundry. This can put germs into the air.
- 5. Put dirty laundry right into the laundry bag. Do **not** put dirty laundry on the floor, on a chair, or on a counter.
- 6. Take off your gloves. Wash your hands.

How should you wash dirty laundry?

To wash dirty white laundry:

- 1. Soak very dirty items in a bleach solution for at least 10 minutes.
- 2. Wash the laundry in the washing machine with 1 cup of bleach.
- 3. Wash the laundry with regular laundry soap.
- 4. Dry the laundry in the dryer.



Handout 3.13

Touching and Washing Dirty Laundry Safely

Page 2 of 2

To wash dirty colored laundry:

- 1. Wash the laundry in the washing machine with 1 cup of household disinfectant, such as Lysol[®].
- 2. Wash the laundry with regular laundry soap.
- 3. Dry the laundry in the drier.

To wash laundry by hand:

- 1. Use a basin, bathroom sink, or bathtub. **Never** use the kitchen sink.
- 2. Put on gloves.
- 3. Wash the laundry in 1 ounce of disinfectant per gallon of water, plus detergent.
- 4. Rinse the laundry well at least 3 times.
- 5. Clean the basin, sink, or tub with universal solution.



Getting Rid of Wastes Safely

Page 1 of 2

Why should you handle wastes with care?

• Body fluids and things that touch body fluids have germs in them. Germs can make people sick.

How should you get rid of body fluids?

• Flush them down the toilet.

Body fluids include:

- Stools
- Urine
- Vomit

Things that touch body fluids are called waste materials.

Waste materials include:

- Used briefs and pads
- Used catheters
- Used dressings and bandages
- Used paper towels
- Used tissues



Getting Rid of Wastes Safely

Handout 3.14

Page 2 of 2

How should you get rid of waste materials?

Always double-bag waste materials.

Take these steps:

- 1. Keep a garbage can for waste materials in the consumer's room. Line it with 2 plastic bags. The inner bag is "dirty." The outer bag is "clean."
- 2. Put on gloves. Put on an apron if your clothes may get dirty. Put on glasses and a mask if fluids may splash your face.
- 3. Put the waste materials in the inner bag.
- 4. Close the inner bag tightly.
- 5. Take off your gloves, apron, glasses, and mask. Put them in the clean bag.
- 6. Wash your hands (so that you don't make the outside of the clean bag "dirty").
- 7. Close the clean bag. Take it out of the consumer's room.
- 8. Throw the double-bagged waste materials away with other garbage—but only if you are sure it will stay out of reach of animals and children.



Getting Rid of Sharps Safely

Handout 3.15

Page 1 of 2

What are sharps?

• Used needles and razors

Why should you handle sharps with care?

- Used needles and razors have body fluids on them. Body fluids have germs in them. So if you get stuck with a needle or cut with a razor, you can get sick.
- Needles and razors can tear through garbage bags. So they need to go in a sharps box.

How should you get rid of sharps?

You will need:

- Gloves
- Label or permanent marker
- Plastic bags
- Sharps box made of tough plastic with a cap



Getting Rid of Sharps Safely

Handout 3.15

Page 2 of 2

Take these steps:

- 1. Write "needles, sharps" on the label or box. Keep the box out of reach of children.
- 2. Put on gloves.
- 3. Put the box where the consumer can reach it **before** they use any sharps.
- 4. Assist the consumer to take the cap off the box.
- 5. Make sure the consumer puts used sharps in the box **right away.**
- 6. Make sure all the sharps are in the box.
- 7. Assist the consumer to put the cap on the box.
- 8. When the box is full, make sure the cap is on tightly. Put tape on the cap if you think it could come off.
- 9. Put the sharps box in 2 garbage bags. Throw it away with other garbage.

What should you not do?

Follow these safety rules for all sharps:

- Never put sharps anywhere except the sharps box.
- **Never** put sharps in a garbage bag.
- **Never** try to put a sharp in the box after the box is full.

Follow these safety rules for needles:

- Never bend or break a needle.
- **Never** recap used needles.
- Never take used needles out of syringes.
- **Never** use a needle again.



Providing Personal Care Services to Elders and People with Disabilities¹

Module 4. Body Mechanics

Goal

The goal for this module is to help participants learn the principles of good body mechanics and how to use these principles to prevent injury when lifting or moving an object and/or helping a person to change position.

Time

3 hours and 30 minutes (includes 30 minutes for opening, closing, and break)

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Activities	Teaching Methods	Time
Opening	10 minutes	
4.1 Group Warm Up—Mirroring	Large-group exercise	5 minutes
4.2 Demonstrating Good Body	Interactive presentation,	45 minutes
Mechanics—Lifting an Object	demonstration, and large-group	
	discussion	
4.3 Demonstrating Good Body	Demonstration, large-group	50 minutes
Mechanics—Positioning a Person	discussion, and small-group work	
Break	10 minutes	
4.4 Practice Lab	Practice triads	1 hour &
		20 minutes
Closing	10 minutes	

Supplies

- Flip chart, markers, and tape
- Paper and pencils
- CD/audiotape player and "energizer" tape or CD
- Ten-pound objects, such as filled boxes, bags of potatoes, sugar, cat litter (preferably non-perishable or sealed containers)
- Beds (completely made, with turning sheet)

Handouts

- Handout 4.1 Good Body Mechanics: What It Is and Why It's Important
- Handout 4.2 Using Good Body Mechanics
- Handout 4.3 Show Your Skills: Lifting a Thing
- Handout 4.4 Tips for Lifting and Moving
- Handout 4.5 Show Your Skills: Raising a Consumer's Head and Shoulders
- Handout 4.6 Show Your Skills: Moving a Consumer to the Side of the Bed
- Handout 4.7 Show Your Skills: Assisting a Consumer to Move Up the Bed
- Handout 4.8 Show Your Skills: Turning a Consumer in Bed



Advance Preparation

Review all training and presentation materials for this module.

Copy all handouts for participants.

Gather all necessary supplies and equipment.

Opening

For this module, Activity 4.1 is already designed as a warm-up to the topic of Body Mechanics, as well as a physical warm-up for the work that participants will be doing with their bodies. Another five minutes can be spent in welcoming participants back and answering questions, if they have any.

Activity 4.2 Demonstrating Good Body Mechanics—Lifting an Object

Prepare the following flip chart pages:

- "Learning Agenda" (Step 1)
- "Good Posture" (Step 3)
- "1. Keep a Wide Base of Support" (Step 8)
- "2. Lift With Your Legs and Buttocks" (Step 11)
- "3. Turn Your Whole Body" (Step 14)
- "4. Get Close to What You're Lifting" (Step 16)

Put ten-pound objects on floor at the front of the room with a table close behind.

Activity 4.3 Demonstrating Good Body Mechanics—Positioning a Person

Set up a demonstration area with bed fully made, including turning sheet.



Activity 4.4 Practice Lab

Set up practice stations with two or three beds, fully made.

Put ten-pound objects around the room.

Make two extra sets of all skills checklists (**Handouts 4.3–4.8**) for the demonstration stations during the practice labs. One set is for participants to observe each other; the other is for instructors to use for return demonstrations.

Have additional instructors available to observe return demonstrations.

Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)



Activity 4.1 Group Warm-Up—Mirroring 5 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Relax, stretch, and warm up their muscles in preparation for the skills practice of body mechanics.

Key Content

 This activity is intended to energize participants but also to reinforce for them the importance of stretching and warming up muscles before strenuous physical activity.

Activity Steps

Large-Group Exercise—5 minutes

- 1. Introduce the activity. Open this module with an energizing, fun warm-up and stretching exercise. This will help prepare participants for the skills practice components of this topic.
- **2. Set up the activity.** Have each participant find a partner. You may need to pair with someone if the numbers are uneven. Have partners spread out so that they have enough room to move about freely without touching anything. Partners should stand about two feet apart, facing each other.
- **3. Give instructions and demonstrate.** Explain that they will pretend that their partner is a mirror. Each partner will take a turn making a series of stretching



motions—stretching their arms, rolling their necks, bending, lunging sideways, etc.—which their partner must mirror. Demonstrate with a volunteer.

- **4.** Explain how partners will change roles. Have them decide which partner will start. Explain that, after a minute, you will say "switch" at which time they are to switch roles. You may call "switch" several times during the exercise.
- 5. Conduct the activity and segue to module topic. Once you begin this exercise, continue it until the participants seem relaxed, but end it before they get bored. Call "stop" and invite the participants to return to their seats. Explain that the exercise was meant to get them warmed up for the primary content of this topic—body mechanics. Although these stretches are not one of the "rules" of body mechanics, all athletes know that they have fewer injuries when their muscles are warmed up and stretched before doing sports.

Teaching Tip

Playing some music during the warm-up can make this even more energizing.



Activity 4.2 Demonstrating Good Body Mechanics—Lifting an Object

45 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define the term "body mechanics."

List benefits of using good body mechanics for the direct-care worker and the consumer.

Describe good posture.

List the four principles of body mechanics.

List three other key guidelines to follow when lifting or moving objects or people.

Key Content

- The responsibilities of a direct-care worker frequently require physically lifting objects and/or equipment, and helping people move from one place or position to another. This lifting and assistance require the use of proper body mechanics in order to avoid injuring oneself or the consumer.
- "Body mechanics" refers to the proper use of muscles to move and lift objects safely. It is defined as: a way of using one's body so that the work is performed by several groups of muscles with the strongest ones being used. With good body mechanics, workers maximize their strength and minimize strain.

² Birchenall, J. and Streight, E. *Mosby's Textbook for the Home Care Aide*, 2nd Edition. St. Louis: Mosby, 2003, p. 203.



- Good body mechanics benefit the direct-care worker in the following ways:
 - Reducing muscle strain, fatigue, and injury to the body
 - Maintaining personal safety
 - Performing tasks efficiently
- Good body mechanics benefit the consumer in the following ways:
 - Reducing anxiety and fear about being moved and/or falling
 - Avoiding injury
 - Increasing confidence in the worker's abilities
- Good posture should be maintained at all times—head erect, buttocks pulled in, stomach muscles tight, chest high, and shoulders back.
- The principles of body mechanics are:
 - 1. Maintain a wide base of support
 - 2. Use your legs; keep your back straight
 - 3. Turn your whole body
 - 4. Stay close to the object being lifted or moved
- Other guidelines for safely lifting and moving objects and people include:
 - Wear non-skid shoes and loose clothing.
 - Plan the move.
 - Push, pull, or roll instead of lifting, if at all possible.
 - Use assistive devices or ask for help if needed.
 - Let the consumer know what you're going to do and what he or she can to do assist you in the move.



Activity Steps

Interactive Presentation—15 minutes

1. Review the Learning Agenda. Refer to the prepared flip chart you have posted.

Flip Chart

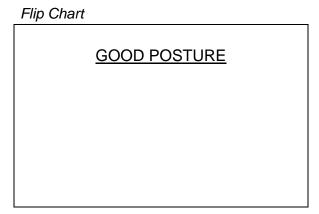
<u>LEARNING AGENDA: MODULE 4</u> <u>Body Mechanics</u>

- What does "good body mechanics" mean?
- The principles of good body mechanics
- How to lift heavy objects using good body mechanics
- How to position a consumer in bed using good body mechanics
- **2. Define good body mechanics and explain its importance**. Emphasize the need to use proper body mechanics whenever lifting objects or transferring people. Distribute and review Handout 4.1: Good Body Mechanics: What It Is and Why It's Important.
- **3. Review good posture**. Explain that maintaining good body posture is essential to good body mechanics. Most of us have some idea about what "good posture" means. Ask participants to sit in their chairs using good body posture. Then have everyone look around the room at each other. Ask:

What is each person doing to demonstrate good body posture?



Label a flip chart page, "Good Posture," and write only the responses that correspond with the elements of good body posture.



- **4. Describe and model good posture.** Review and demonstrate the essential elements of good body posture: head erect, buttocks pulled in, stomach muscles tight, chest high, and shoulders back. Ask everyone to practice this for a moment while sitting. Then ask them to stand and practice good posture while standing. Explain that, with each of the skills taught in this module, maintaining good body posture will help to avoid strain and save energy.
- **5. Make a transition to the demonstration steps**. Note that, in addition to good posture, there are four basic principles of good body mechanics. Explain that you will demonstrate each principle now, and they will practice during the last activity.

Demonstration—20 minutes

6. Set up and conduct the first demonstration. To demonstrate the first principle, ask for two volunteers to assist you. Have one participant stand near you at the front of the room, with his or her feet right next to each other. Ask the other participant to stand beside the first volunteer, ready to catch the person if she or he falls. Ask the other participants:

Do you think it will be easy or hard to push this person over with her (or his) feet so close together?



After their responses, gently nudge the participant until he or she starts to sway. Both you and the other volunteer should be ready to catch the person if she or he does actually fall over!

7. Repeat the demonstration. This time have the volunteer place his or her feet at shoulder's width. Ask the other participants:

Do you think it will be easy or hard to push her (or him) over with their feet so far apart?

8. After their responses, **gently nudge the first volunteer again**, with the second volunteer still ready to catch him or her just in case. Keep nudging harder, until it becomes clear that you would have to use a lot of force to push the person over. If the volunteer starts to sway, ask him or her to put one foot slightly ahead of the other and bend his or her knees. Push again with the same force, and ask the other participants:

Is this person more stable now or less?

9. Summarize Rule 1. Thank your volunteers. Ask participants what they learned about body mechanics from this demonstration. After a few responses, post and review the prepared flip chart page for Rule 1, "Keep a Wide Base of Support."

Flip Chart

1. KEEP A WIDE BASE OF SUPPORT

- Move your feet apart and stand with one foot slightly forward.
- A broad base of support makes it easier to stay balanced.



10. Set up the demonstration for Rule 2. Go to the ten-pound bag of potatoes (cat litter, etc.) that you placed on the floor before the beginning of the module. Ask participants:

How do you think I should lift this?

Follow their instructions exactly, but do not try to lift the bag until they make suggestions using good body mechanics (Rules 1 and 2).

11. Conduct the demonstration and debrief. Lift the bag, then ask:

What would have happened if I had tried to lift the bag without my knees bent? What would have happened if I had not kept my back straight?

- **12. Demonstrate poor body mechanics.** Without actually lifting anything, show position of the body when lifting something without good body mechanics and point to the areas of the body that would be strained.
- **13. Summarize Rule 2**. Post and review the flip chart page for the second principle, "Lift with Your Legs and Buttocks."

Flip Chart

2. LIFT WITH YOUR LEGS

AND BUTTOCKS

When reaching down to lift an object or to assist a person to change position:

- Bend your knees and reach down— NEVER bend from the waist.
- Use the LARGE muscles of your legs to push up.
- Keep your back straight.



14. Demonstrate Rule 3. Set the bag on the floor again, with a table behind you. Stand beside the bag, facing the participants, bend sideways, and prepare to lift the bag with one hand. Ask participants:

Does this look okay? Can I do this without hurting myself? [Hopefully, participants will say, "No! Stop!"]

Ask them what you should change to use good body mechanics. Follow their instructions until you are facing the object, with your feet pointing forward (i.e., toward the object), with no turning or twisting of the back. Using good posture and Rules 1 and 2, you can now lift the object.

Teaching Tip

The table and the bag should be positioned so that, once you have lifted the bag, you are close enough to the table to just turn and place the bag on it. This is for the next step, to demonstrate how NOT to turn the upper body, but rather to turn the whole body.

- **15. Continue the demonstration**. Holding the bag, tell participants: I want to put this bag on the table behind me. How should I do that? Listen to participants' instructions, but do not move until someone advises you to turn your whole body to face the table, and then set the bag down. After you set the bag down on the table, show the position of your body if you had turned your upper body only, in order to reach the table with the bag. Point out the twisting of the spine. Note that this can cause damage to your spine when you twist while carrying or holding a weight.
- **16. Summarize Rule 3**. Post and review the flip chart page for the third principle, "Turn Your Whole Body."

Flip Chart

3. TURN YOUR WHOLE BODY

- Turn your body as a unit, using legs and feet.
- Never bend to the side to lift an object.
- NEVER twist your upper body when lifting or transferring.
- **17. Demonstrate Rule 4**. Post and review the prepared flip chart page for the fourth rule of body mechanics, "Get Close to What You're Lifting." Demonstrate by setting your object on the floor again, practicing all three previous rules of good body mechanics, but then stretching your arms out to grab the bag. (Stretching, or reaching, makes you bend your back, violating the second rule!) Ask:

Which body parts would be strained if a person tried to lift the bag while reaching? [The back]

Which body parts are used to lift that way? [The arms]

How much strength will you have if you try to lift that bag while reaching? [Not much!]

18. Emphasize importance of safe lifting and summarize the fourth principle.

Explain that while it might seem silly to reach for that heavy bag, all of us, every day, try to lift something that is just beyond our reach. Sometimes it hurts and sometimes it doesn't. When working with consumers, direct-care workers have to be aware that, if they hurt themselves while assisting a consumer to change positions, the consumer also may get hurt (for example, by being dropped).

Flip Chart

4. GET CLOSE TO WHAT YOU'RE LIFTING

- Do not reach or stretch.
- Work at waist level, if possible.
- Do not try to lift objects over your head.
- 19. Encourage participants to integrate these rules into their lives. Remind everyone that they will get a chance to practice using good body mechanics during the practice lab. However, they should keep in mind that good body mechanics are important for everything they do. They can "practice" at home, in the rest of the training, or wherever they go. Distribute and review **Handout 4.2: Using Good Body Mechanics.**
- **20. Review key points.** Distribute **Handout 4.3: Show Your Skills: Lifting a Thing** and note that it identifies each of the steps that were demonstrated. This is the checklist that will be used to help them build and demonstrate their competency in this important skill. Ask if there are any questions regarding the steps for lifting heavy things.

Large-Group Discussion—10 minutes

21. Review additional safety tips. Note that, besides following the principles of good body mechanics, there are other things that direct-care workers can do to make lifting safer and easier. Distribute **Handout 4.4: Tips for Lifting and Moving.** Ask participants to take turns reading aloud.

Activity 4.3 Demonstrating Good Body Mechanics—Positioning a Person

50 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Describe how to raise the consumer's head and shoulders while in bed.

Describe how to help a consumer move to the side of the bed.

Describe how to help a consumer to move up in the bed and to turn in bed.

Key Content

• Many consumers are not able to move themselves in bed. This can lead to problems with circulation, pressure ulcers, and comfort. A direct-care worker needs to be able to use good body mechanics to assist consumers to change their positions in bed.

Activity Steps

Demonstration and Large-Group Discussion—30 minutes

- 1. **Discuss the Key Content.** Note that now participants will see how these principles of body mechanics are applied to assisting a consumer to move in bed.
- **2. Set up the first demonstration**. Ask for a volunteer to help with this demonstration. Note that, if anyone is tired, this would be an ideal time to volunteer, since, for the next 45 minutes, all the demonstrations involve positioning a consumer in bed!
- **3.** Conduct the demonstration. Make the volunteer comfortable in the bed and ask the rest of the participants to gather around so that they can see you clearly. Explain that



you are going to demonstrate how to assist the consumer to raise his or her head and shoulders. Demonstrate each step in **Handout 4.5: Show Your Skills: Raising a Consumer's Head and Shoulders** explaining its importance and answering questions as you go. Emphasize communicating with the consumer, and the importance of having the consumer do as much of the movement as he or she can. Note any observations, related to this task, which should be recorded and reported.

- **4. Set up the second demonstration.** Thank the volunteer for "head and shoulders" and ask for a new volunteer. While he or she is getting settled in the bed, explain that you will now demonstrate assisting a consumer to move to the side of the bed. This is important for preparing a consumer to get out of bed. Conduct the demonstration, following the steps in **Handout 4.6: Show Your Skills: Moving a Consumer to the Side of the Bed**.
- 5. Conduct demonstrations for the remaining tasks. Choose a new volunteer each time to model assisting the consumer to move up the bed (Handout 4.7) and assisting the consumer to turn in bed (Handout 4.8).

Small-Group Work—10 minutes

6. Set up small-group exercises. Quickly divide participants into groups of three. Assuming you have at least four groups, distribute Handout 4.5: Show Your Skills: Raising a Consumer's Head and Shoulders to the first group; distribute Handout 4.6: Show Your Skills: Moving a Consumer to the Side of the Bed to the second group; give Handout 4.7: Show Your Skills: Assisting a Consumer to Move Up the Bed to the third and Handout 4.8: Show Your Skills: Turning a Consumer in Bed to the fourth. Ask participants to review the checklists in their groups, noting any questions they want to ask.

Teaching Tips

Groups of three are used so that you do not have to "re-group" for the "practice triads" in the next activity. If you have more than four groups, you can give the same handout to more than one group. If you have fewer than four groups, you can give more than one handout to one or more of the groups.



In each group, every member gets a copy of their assigned handout. To avoid confusion, participants should have only the handout(s) that you are asking them to review for the group activity. They will get the rest after the discussion.

Large-Group Discussion—10 minutes

7. Review each skill. Ask the following questions for each checklist:

What steps are most important to ensure the consumer's safety?

How are proper body mechanics used to ensure that the direct-care worker doesn't get hurt?

Do you have any additional questions?

8. Distribute remaining handouts. Make sure every participant has all four checklists.



Activity 4.4 Practice Lab

1 hour & 20 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Demonstrate correct posture while sitting and standing.

Demonstrate lifting a ten-pound object using good body mechanics.

Demonstrate how to raise the consumer's head and shoulders while in bed.

Demonstrate how to assist a consumer to move to the side of the bed.

Demonstrate how to assist a consumer to move up the bed and to turn in bed.

Key Content

 Assisting consumers with movement and positioning in bed requires the use of good body mechanics, as well as infection control practices and communication skills. The body mechanics skills practiced in this module will be applied and reinforced throughout the training.

Activity Steps

Practice Triads—1 hour & 20 minutes

- 1. Introduce the activity. Explain to participants that most of the practice labs in this training will be conducted through "practice triads." For this activity, participants will work in the same groups of three that they formed for the previous activity.
- 2. Point out the workstations set up around the training space. Workstations for this practice lab include: beds for moving and positioning the consumer and various items



SECTION B. FOUNDATIONAL KNOWLEDGE, ATTITUDES AND SKILLS Module 4. Body Mechanics

for lifting. (Each workstation should have copies of the checklist for the skill being practiced.) Each triad will start at a different workstation but will move around the room until they have completed their skills practice at each workstation.

- 3. Give instructions for the practice triads. In their groups of three, participants will take turns playing different roles. One person will be the direct-care worker, one person will be the consumer, and the third person will be the observer. When performance checklists are available for a particular task or skill, the observer will use the checklist to provide guidance to the trainee who is practicing and to give feedback afterwards. After one participant has completed the task, he or she switches roles, so that the second participant can practice being the direct-care worker. After one more switch, all three participants will have performed in all three roles. Then the team moves on to the next available workstation.
- **4.** Explain the role of the instructor(s). Tell participants that the instructor(s) will be moving around the room to monitor how participants are doing, to answer questions, and to provide additional instruction as necessary.

Teaching Tip

If a participant feels that he or she is competent in any of the skills, he or she can ask an instructor to observe him or her doing the skill ("return demonstration"). At that time the instructor will fill out one of the skills checklists for the participant and give him or her feedback on how they did. If not enough instructors are available to monitor *and* observe return demonstrations, the return demonstrations will be done at another time.

5. Explain additional posture practice. If participants are waiting for a workstation, they can practice the following exercise for correct posture.



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In pairs, participants will:

- Stand facing each other a few feet apart.
- Raise their hands up and put them against their partner's hands.
- Bend their knees and sink slowly to the floor. Keep hands together, maintain eye contact, and keep their backs straight.
- Slowly come up again.
- Repeat once more.

Teaching Tips

With each new practice lab, participants may need to continue practicing skills introduced in earlier modules. Having the materials available from previous practice labs will allow continuous skills development, as well as effective use of lab time.

In this case, materials should also be available from the infection control practice lab

6. Wrap up the triad work. When all the triads have rotated through all the workstations, bring participants back to the large group for the closing activity. If there is not enough time for all participants to complete all the workstations, keep the equipment and materials available for the next practice lab.



Module 4. Body Mechanics¹

Handouts

Activity 4.2: Demonstrating Good Body Mechanics—Lifting an Object

Handout 4.1

Good Body Mechanics: What It Is and Why It's Important

Handout 4.2

Using Good Body Mechanics

Handout 4.3

Show Your Skills: Lifting a Thing

Handout 4.4

Tips for Lifting and Moving

Activity 4.3: Demonstrating Good Body Mechanics—Positioning a Person

Handout 4.5

Show Your Skills: Raising a Consumer's Head and Shoulders



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Module 4. Body Mechanics

Handout 4.6

Show Your Skills: Moving a Consumer to the Side of the Bed

Handout 4.7

Show Your Skills: Assisting a Consumer to Move Up the Bed

Handout 4.8

Show Your Skills: Turning a Consumer in Bed

Good Body Mechanics: What It Is and Why It's Important

Handout 4.1

What is good body mechanics?

Body mechanics is about how you move your body. "Good" body mechanics means using your strongest muscles so you don't get hurt.

How does good body mechanics help the direct-care worker?

Good body mechanics lets you:

- Avoid getting hurt
- Be as strong as possible
- Do your job faster

How does good body mechanics help the consumer?

Good body mechanics lets the consumer:

- Avoid getting hurt when moved
- Trust workers more
- Worry less about being moved



Using Good Body Mechanics

Handout 4.2

Page 1 of 2

There are four basic rules to good body mechanics. But they all begin with good posture.

What is good posture?

- Hold your head up.
- Keep your neck straight.
- Keep your chest high.
- Hold your shoulders back.
- Tighten your stomach muscles.
- Pull in your buttocks.

When should you use good posture?

Good posture helps you save energy and avoid muscle strain—even when you aren't lifting or moving something. Use good posture when you:

- Assist consumers to change position
- Lift or move things
- Sit
- Stand

What are the four rules?

Rule 1: Keep a wide base of support.

Move your feet apart to the width of your shoulders. Put one foot a little bit in front of the other. This helps you keep your balance.



Using Good Body Mechanics

Handout 4.2

Page 2 of 2

Rule 2: Lift with your legs and buttocks.

Bend your knees. Keep your back straight. Then push up with your legs. This puts less strain on your back. And it helps you lift heavier things. **Never** bend from the waist.

Rule 3: Turn your whole body.

Move your feet and legs to face the person or thing you're lifting. This puts less strain on your back. And it keeps you from twisting your spine. **Never** turn at the waist.

Rule 4: Get close to what you're lifting.

Work at the level of your waist, if possible. This puts less strain on your back and saves energy. **Never** reach for or move something above your head.

Review—Good Body Mechanics:

- Use good posture.
- Keep a wide base of support.
- Lift with your legs and buttocks.
- Turn your whole body.
- Get close to what you're lifting.



Handout 4.3

Show Your Skills: Lifting a Thing

Trainee's Name:	Date:

Trainer's Name:

West to De		nows	Tueinenie Nietee
What to Do Skill?		(III?	Trainer's Notes
Use good posture.			
Hold your head up. Keep your shoulders back		Yes	
and your chest high. Tighten your stomach		No	
muscles. Pull in your buttocks.			
Keep a wide base of support.			
Spread your feet apart to the width of your		Yes	
shoulders.		No	
		Yes	
Put one foot a little bit in front of the other.		No	
Lift from your legs and buttocks.			
Bend your knees to reach down. Do not bend at		Yes	
the waist.		No	
		Yes	
Keep your back straight.		No	
		Yes	
Push up with your legs.		No	
Turn your whole body.			
Move your feet and legs to face the thing you		Yes	
are lifting.		No	
		Yes	
Do not turn at the waist.		No	
Get close to what you're lifting.			
Hold the thing at waist level. Work at waist		Yes	
level, if possible.		No	
		Yes	
Do not reach out when lifting.		No	
Use a ladder or step stool to reach or lift things		Yes	
above your head.		No	

Signature of Trainer(s)	Date
-------------------------	------

Signature of Trainee Date



Tips for Lifting and Moving

Handout 4.4

Page 1 of 2

In addition to good posture and good body mechanics, here are some other ways to lift objects and assist people to move without getting hurt.

Syd's tip—Dress right.

"When I go to work, I wear loose clothes. I wear comfy shoes that don't slip. Sometimes I wear a back belt, too."

Joy's tip—Plan the move.

"Before I move something, I make sure there's nothing in the way. And I check that the place I'm going is ready."

Dave's tip—Push, pull, or roll.

"If I need to move something heavy, I try not to lift it. If I can push or pull it—or even better—use a cart to roll it, that's what I do."

Angel's tip—Don't lift over your head.

"If I need to lift something heavy over my head, or get it down, I get a sturdy chair or ladder to get up to that level. And then I ask someone to take it from me. If no one else is there, I might have to move it in stages."

Sara's tip—Get help.

"Some things are just too big or heavy for me. So I ask for help. I explain what I'm going to do and what I want the other person to do. I count 1-2-3, and then we move together."

Mike's tip—Talk to the consumer.

"When I move a person, I tell them what I'm going to do and when. And I tell them what they can do to help."



Tips for Lifting and Moving

Handout 4.4

Page 2 of 2

Roberta's tip—Don't lift consumers.

"I was surprised in my training when I learned that we can really hurt ourselves *and* consumers if we try to pick them up and move them. Instead of lifting people, I learned how to "transfer" a person—which means working with the consumer to move himself or herself, usually in stages. If transferring isn't an option, I always ask another person to help me lift the consumer or use special lift equipment. And we need special training to use that equipment, too."

Mira's tip—Stay fit.

"My muscles and joints work better when I'm in good shape. So I eat right and try to exercise a couple of times a week. Even a walk is good to help me stay fit."

Lynn's tip—Get enough sleep.

"When my muscles are tired, I get hurt more easily. And when my brain is tired, I might forget to use good body mechanics. So I make sure to get plenty of sleep."

Review—Tips for Lifting and Moving:

- Dress right.
- Plan the move.
- Push, pull, or roll.
- Don't lift over your head.
- Get help if you need it.
- Talk to the consumer.
- Don't lift consumers.
- Stay fit.
- Get enough sleep.



Show Your Skills:Raising a Consumer's Head and Shoulders

Handout 4.5

Page 1 of 2

Trainee's Name:	Date:

Trainer's Name:

		01		
14/1	hat to Do		nows kill?	Trainer's Notes
		Or.	AIII ?	Trainer 5 Notes
Ge	t ready to raise the consumer.			
			Yes	
1.	Wash your hands.		No	
			Yes	
2.	Greet the consumer by name.		No	
	•		Yes	
3.	Give the consumer privacy.		No	
4.	Explain the steps to the consumer. Be clear		Yes	
	about what you will do and what he or she	П	No	
	will do.			
5.	If the consumer is in a hospital bed:		Yes	
	 Lock the wheels. 		No	
	 Raise the bed to waist level. 			
	 Lower the top of the bed. 			
	• Lower the side rail that is closer to			
	you.			
Po	sition yourself and the consumer in the			
	ht place.			
6.			Yes	
	12 inches apart.		No	
7.	Bend your arm that is closer to the bottom		Yes	
	of the bed. Point your fingers toward the	П	No	
	top of the bed. Put your arm between the			
	consumer's arm and body. Reach under			
	with your hand and hold the consumer's			
	shoulder.			
8.	Ask the consumer to bend their arm and		Yes	
	reach up to hold your shoulder.		No	

Module 4. Body Mechanics

Show Your Skills: Raising a Consumer's Head and Shoulders

Handout 4.5

Page 2 of 2

9. Slip your other arm under the consumer's neck and shoulders. Put your hand on the shoulder that is farther from you.	□ Yes □ No	
Raise the consumer's head and shoulders.		
10. Count out loud 1-2-3. Then take your weight off the foot that is closer to the top of the bed. Put your weight on the foot that is closer to the bottom of the bed. At the same time, help the consumer sit up a little. Use a rocking motion.	☐ Yes ☐ No	
Use pillows to help the consumer sit up.		
11. Hold up the consumer with the arm that is under their shoulder. Use your other arm to add or take away pillows, as needed.	□ Yes □ No	
Lower the consumer's head and shoulders.		
12. Put your free arm back under the consumer's shoulders and neck.	 ☐ Yes ☐ No 	
13. Tell the consumer that you are ready to lower them.	 ☐ Yes ☐ No 	
14. Count out loud 1-2-3. Then lower the consumer's head and shoulders onto the pillows.	 ☐ Yes ☐ No 	
Make sure the consumer is safe and comfortable.		
15. Make sure the consumer is comfortable. Ask them if they want a sheet or blanket.	 ☐ Yes ☐ No 	
16. If the consumer is in a hospital bed, readjust as needed.	 ☐ Yes ☐ No 	
17. Wash your hands.	 ☐ Yes ☐ No 	
Signature of Trainer(s)	Date	
Signature of Trainee	Date	

Module 4. Body Mechanics

Show Your Skills: Moving a Consumer to the Side of the Bed

Handout 4.6

Page 1 of 2

Trainee's Name:	Date:

Trainer's Name:

		Sł	nows	
W	hat to Do	_	till?	Trainer's Notes
Ge	et ready to move the consumer.			
	·		Yes	
1.	Wash your hands.		No	
			Yes	
2.	Greet the consumer by name.		No	
			Yes	
3.	Give the consumer privacy.		No	
4.	Explain the steps to the consumer. Be clear		Yes	
	about what you will do and what he or she		No	
	will do.			
5.	If the consumer is in a hospital bed:		Yes	
	• Lock the wheels.		No	
	• Raise the bed to waist level.			
	• Lower the top of the bed.			
	• Lower the side rail that is closer to you.			
M	ove the consumer's upper body.			
6.	Slip your arm under the top of their back.		Yes	
	Hold the shoulder that is farther from you.		No	
	Put your other arm under the middle of			
	their back.			
7.	Count to three. Then move the consumer		Yes	
	toward you. Use a rocking motion.		No	
M	ove the consumer's buttocks.			
8.	Slip one arm under the consumer's waist.		Yes	
	Put your other arm under their upper thighs.		No	
	Hold the thigh that is farther from you.			
9.	Count out loud 1-2-3. Then move the		Yes	
	consumer toward you. Use a rocking		No	
	motion.			

Show Your Skills: Moving a Consumer to the Side of the Bed

Handout 4.6

Page 2 of 2

Move the consumer's legs.		
10. Slip one arm under the consumer's lower	□ Yes	
thighs. Hold the thigh that is farther from	\square No	
you. Slip your other arm under the heel that		
is farther from you.		
11. Count out loud 1-2-3. Then move the	□ Yes	
consumer toward you. Use a rocking		
motion.		
Make sure the consumer is safe and		
12. Make sure the consumer is comfortable.	□ Yes	
Ask them if they want a sheet or blanket.	\square No	
13. If the consumer is in a hospital bed,	□ Yes	
readjust as needed.	\square No	
	□ Yes	
14. Wash your hands.	\square No	
Signature of Trainer(s)	D	ate
.,		
Signature of Trainee	D	ate

Module 4. Body Mechanics

Show Your Skills: Assisting a Consumer to Move Up the Bed

Handout 4.7

Page 1 of 2

	0
Trainee's Name:	Date:

Trainer's Name:

		Sh	ows	
What to Do		Sk	ill?	Trainer's Notes
Ge	t ready to move the consumer.			
			Yes	
1.	Wash your hands.		No	
			Yes	
2.	Greet the consumer by name.		No	
			Yes	
3.	Give the consumer privacy.		No	
			Yes	
4.	Tell the consumer what you will do.		No	
5.	If the consumer is in a hospital bed:		Yes	
	• Lock the wheels.		No	
	• Raise the bed to waist level.			
	• Lower the top of the bed.			
	• Lower the side rail that is closer to			
	you.			
Po	sition yourself and the consumer in the			
	ht place.			
6.	Take the pillow out from under the		Yes	
	consumer's head. Put it against the		No	
	headboard.			
7.	Fold back the top sheet or blanket. Bend		Yes	
	the consumer's knees up.		No	
8.	Put one hand under the consumer's		Yes	
	shoulders. Put the other under the		No	
	consumer's upper thigh.			
9.	Tell the consumer how they can help you.		Yes	
	They will push down with their hands and		No	
	feet and help you move their body up			
	toward the top of the bed. Ask them to			
	wait until you count to three.			

Show Your Skills: Assisting a Consumer to Move Up the Bed

Handout 4.7

Page 2 of 2

Assist the consumer to move up the bed.		
10. Count to three. Then take your weight off	□ Yes	
the foot that is closer to the bottom of the	\square No	
bed. Put your weight on the foot that is		
closer to the top of the bed. At the same		
time, help move the consumer's shoulders		
and thighs up the bed.		
11. Do a short move, then stop. Repeat as	\square Yes	
needed.	\square No	
Make sure the consumer is safe and		
12. Make sure the consumer is comfortable.	□ Yes	
Ask them if they want a sheet or blanket.	\square No	
13. If the consumer is in a hospital bed,	□ Yes	
readjust as needed.	\square No	
	\square Yes	
14. Wash your hands.	\square No	
Signature of Trainer(s)		Date
Signature of Trainee		Date

Handout 4.8

Show Your Skills: Turning a Consumer in Bed

Page 1 of 2

Trainee's Name:	Date:

Trainer's Name:

		Shows		
	nat to Do	Do Skill?		Trainer's Notes
Ge	t ready to move the consumer.			
			Yes	
1.	Wash your hands.		No	
			Yes	
2.	Greet the consumer by name.		No	
			Yes	
3.	Give the consumer privacy.		No	
			Yes	
4.	Tell the consumer what you will do.		No	
5.	If the consumer is in a hospital bed:		Yes	
	• Lock the wheels.		No	
	• Raise the bed to waist level.			
	• Lower the top of the bed.			
	• Lower the side rail that is closer to you.			
Get the consumer into the right place.				
6.	Move the consumer's body toward your		Yes	
	side of the bed. This gives you room to		No	
	turn them toward the other side.			
7.	Fold the consumer's hands and arms on		Yes	
	their chest.		No	
8.	Cross the consumer's leg that is closer to		Yes	
	you over their other leg.		No	
Turn the consumer away from you.				
9.	Put one of your hands under the		Yes	
	consumer's shoulder. Put your other hand		No	
	on their hip. Then gently roll the consumer			
	away from you.			

Show Your Skills: Turning a Consumer in Bed

Handout 4.8

Page 2 of 2

Turn the consumer toward you.		
10. Follow these steps:	□ Yes	
 Make sure the consumer is in the right 	\square No	
place. Leave enough room to turn		
them.		
 Cross their leg that is farther from you 		
over their other leg.		
Hold the consumer behind their		
shoulder with one hand.		
Hold them behind their hip with the		
other hand.		
Roll the consumer gently and smoothly		
toward you. Use good body mechanics.		
Make sure the consumer is safe and		
comfortable.	□ V /	
11. Make sure the consumer's body parts are in the right place:	□ Yes	
Their head is held up by a pillow.		
 Then head is field up by a phrow. They are not lying on their arm. 		
 They are not typing on their arm. Their top arm is held up by their body. 		
 Their top aim is field up by their body. Their back is held up by a supportive 		
device.		
• Their top knee is bent.		
 Their top leg is held up by a pillow or 		
supportive device.		
 Their hip is in the right place. 		
12. Make sure the consumer is comfortable.	□ Yes	
Ask them if they want a sheet or blanket.		
13. If the consumer is in a hospital bed,	□ Yes	
readjust as needed.	\square No	
	□ Yes	
14. Wash your hands.		
Signature of Trainer(s)	Da	nte
Signature of Trainee	Da	ate

Providing Personal Care Services to Elders and People with Disabilities¹

Module 5. Body Systems & Common Diseases

Goal

The goal of this module is to enable participants to gain a basic understanding of how the body works, in order to better understand health, diseases, and the role of the direct-care worker in supporting the health and wellness of consumers.

Time

3 hours and 30 minutes (includes 30 minutes for opening, closing, and one break)

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Activities	Teaching Methods	Time		
Opening	10 minutes			
5.1 Body Systems	stems Interactive presentation, small-			
	group work, and group	30 minutes		
	presentations			
Break	10 minutes			
5.2 Common Diseases	common Diseases Interactive presentation, small-			
	group work, and group	30 minutes		
	presentations			
Closing		10 minutes		

Supplies

- Pencils or pens
- Flip chart, markers, and tape
- Rolls of newsprint, if available
- Construction paper in various colors
- Scissors
- Lamination equipment, if available
- Instructor Guides

Handouts

- Handout 5.1: Introduction to Body Systems
- Handout 5.2a: The Circulatory System
- Handout 5.2b: The Digestive System
- Handout 5.2c: The Endocrine System
- Handout 5.2d: The Nervous System
- Handout 5.2e: The Reproductive System
- Handout 5.2f: The Respiratory System
- Handout 5.2g: The Skeletomuscular System
- Handout 5.2h: The Skin
- Handout 5.2i: The Urinary System
- Handout 5.3: Helping Sick Consumers
- Handout 5.4a: Alzheimer's Disease
- Handout 5.4b: Arthritis



• Handout 5.4c: Cancer

• Handout 5.4d: Diabetes

• Handout 5.4e: Heart Disease

• Handout 5.4f: Lung Disease

• Handout 5.4g: Multiple Sclerosis

• Handout 5.4h: Parkinson's Disease

• Handout 5.4i: Stroke (CVA)

Advance Preparation

Review all training and presentation materials for this session.

Copy all handouts for participants.

Opening

Plan an appropriate opening activity for this module. If this is the start of a new day of training, some kind of warm-up activity might be good to help focus participants' attention on being back in the learning environment. If this is a continuation of a full-day session, resuming after lunch, a quick energizer might be useful to refocus participants mentally and physically after eating.

Activity 5.1 Body Systems

Prepare the following flip chart pages:

- "Learning Agenda" (Step 1)
- "Body Systems Exercise" (Step 5)

Make one copy of each full-page body system illustration in the *Instructor's Guide*.



For each body system, prepare half-page information cards (or full page, if they are very long, e.g., Observe, Record, Report) with the following information, copied from **Handouts 5.2a–i:**

- What it does
- Main parts
- Common problems and diseases
- How you can help
- Observe, Record, Report

The *Instructor's Guide* shows a sample of these cards prepared for the circulatory system. Note the font is large enough to fill the space and some of the detailed information has been deleted (e.g., main parts). Note the body system is NOT identified on any of the cards. The cards can be prepared on light-colored construction paper or mounted on darker-colored paper (with a different color for each category of information). These cards can be laminated and re-used in multiple trainings.

Prior to starting the session, write "What It Does" at the top of a flip chart page and post on a wall. Tape the "What It Does" cards for the nine body systems on this paper.

Do the same for "The Main Parts," "Common Problems and Diseases," and "Observe, Record, Report." Post these flip chart pages around the room.

Activity 5.2 Common Diseases

Prepare the following flip chart pages:

- "Disease" (Step 1)
- "Group Reports on Common Diseases" (Step 5)



Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)



Activity 5.1 Body Systems

1 hour & 30 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define body systems and describe the types of body parts that make up body systems.

Identify at least six body systems.

Describe the general functions, main parts, common problems, and diseases for each system.

Explain how the direct-care worker can assist consumers to stay healthy, including what to observe, record, and report for each body system.

Key Content

- A body system is a group of body parts that work together to perform a specific function or task.
- All body systems are composed of cells, tissues, membranes, glands, and organs.
- Body cavities are spaces within the body that are protected by the skeleton and are occupied by components of the body systems. The major cavities are: cranial, spinal, thoracic, abdominal, and pelvic.
- Nine body systems are discussed in this module: circulatory, digestive, endocrine, nervous, reproductive, respiratory, skeletomuscular, the skin (integumentary), and urinary. All the body systems are interrelated, and they all slow down as a normal part of aging.
- Each system has important functions. Each also has unique problems and diseases.



Knowing the basics about how these systems work will help the direct-care worker to learn, remember, and carry out his or her role in assisting consumers to keep these systems healthy and to manage the problems.

Activity Steps

Interactive Presentation—20 minutes

1. Introduce the module and the learning agenda. Explain that the goal is to help participants develop a basic understanding of the different body systems and how they work. This will enable them to better understand how to keep the body working well, how common diseases affect the body, and how to carry out their role as direct-care workers in maintaining health and coping with disease. Post and review the "Learning Agenda" flip chart page.

Flip Chart

<u>LEARNING AGENDA: MODULE 5</u> <u>Body Systems & Common Diseases</u>

- Body systems—what they do, main parts, common problems, diseases, and ORR
- How direct-care workers can assist consumers to keep their body systems healthy
- Common diseases—What they are and how the directcare worker can assist consumers
- **2. Define "body system**." Explain that a body "system" is a group of body parts that work together to perform a specific function or task. Note, since everyone has a body,



participants all probably have a lot of knowledge about the systems of the body, whether they realize it or not!

3. Generate a list of examples. Ask participants if they can think of examples of body systems. List nine systems on a flip chart page as they are shouted out.

Teaching Tip

To make this move quickly, feel free to give clues—e.g., "What is the system that allows us to stand up and walk across the room?" You may have to give the names for the less familiar body systems, e.g. endocrine.

4. Distribute and review Handout 5.1: Introduction to Body Systems. Ask if there are any questions before moving on to the next step.

Small-Group Work—20 minutes

Teaching Tips

This activity uses small-group work to focus on six major body systems—circulatory, digestive, nervous, respiratory, skeletomuscular, and the skin—with the endocrine, urinary, and reproductive systems being covered by an interactive presentation.

With a large class (i.e., 18 or more), you may want to include all nine systems in this activity, with nine small groups. However, you will need to plan more time for reporting back.

With a small class (i.e., less than 12), you may want to have fewer than six groups, assign more than one body system to each group, and/or cover more systems through interactive presentation.

5. Set up small-group work. Split participants into six groups. Give each group a full-page copy of one of the body system illustrations from the instructor's guide. Post and review the flip chart page with the group tasks—"Body Systems Exercise." Point out the flip chart pages with "What It Does," "Main Parts," "Common Problems and Diseases," and "Observe, Record, Report" around the room. Explain that they have



20 minutes to do the tasks. Note that you will be sitting at a "help desk," with books and other resources, and can answer questions for the groups.

Flip Chart

BODY SYSTEMS EXERCISE

· Which body system is it?

Tape the drawing on a blank flip chart page and, using the list of nine body systems, write the name of the body system across the top.

 Find the information cards about your body system.

Tape them to your body system flip chart.

- Brainstorm how you can assist the consumer. List on a new flip chart page.
- Prepare to present your body system to the large group (5minutes). Involve every member of your group.

Teaching Tips

In this exercise, the cards for "How You Can Assist" are not posted on a flip chart page, because you want the groups to do their own thinking about how they can assist consumers to keep this body system healthy.

If you feel that participants are not yet ready for brainstorming in small groups, you can post the "How You Can Assist" cards for them to find (like the others), and then lead a large-group discussion after each group presentation to generate more detailed ideas about the direct-care worker's role.



Group Presentations—35 minutes

- **6. Facilitate reports to the large group**. Ask each small group to take 5 minutes to present their body system (involving every member of the group). Ask them to name the parts, and explain what it does, common problems and diseases, and what to observe, record, and report. Ask them to share their ideas about how the direct-care worker can assist the consumer to keep this body system healthy and to manage common problems.
- **7. Wrap up after each presentation.** Post the body system flip chart pages on the wall after each report. Thank each group. Correct misinformation as necessary after their presentation. If needed, ask for additional ideas about how direct-care workers can assist consumers to keep this body system healthy and add to the flip chart page.

Interactive Presentation—15 minutes

8. Address the body systems left out of reports. After all the presentations are completed, briefly present the information about any body system not covered in the small-group presentations. Post a flip chart page for each body system, with a full-page drawing in the center, and place the information cards for each category on the page.

Teaching Tips

An interactive way to do this would be to ask participants to help you identify, from the remaining cards on each category page, which one applies to the body system you are presenting. For example, if you are presenting the urinary system first, there will be three cards left on the "What It Does" flip chart page. You can read each card and ask participants which one they think describes the urinary system. Continue with the other category pages.

The next system will be easier, because there will be only two cards on each page. And the last one will be obvious!

9. Distribute Handouts 5.2a–i. Instruct participants to add to these to their resource binders. Note that these handouts include all the information listed on the flip chart pages for each body system, including "tips" from other direct-care workers about assisting consumers to stay healthy.



Activity 5.2 Common Diseases

1 hour & 30 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

List at least five common diseases and describe the signs indicating that someone has the disease.

Describe the role of the direct-care worker when assisting consumers who have common diseases, including what to observe, record, and report.

Key Content

- Diseases are conditions that impair or damage the normal function of body systems.
- The diseases commonly encountered by direct-care workers include cardiovascular (heart) diseases, cancer, stroke, chronic obstructive pulmonary (lung) disease, diabetes, arthritis, Alzheimer's disease, multiple sclerosis, Parkinson's disease, and the human immunodeficiency virus (HIV). Knowing some of the basic features of each disease will help the direct-care worker to learn, remember, and carry out his or her role in assisting the consumer to cope with the disease.
- The role of the direct-care worker in regard to diseases, in general, is to:
 - Observe and report changes in physical, emotional, and behavioral status of the consumer
 - Maintain a safe environment for the consumer
 - Assist with activities of daily living, encouraging independence as much as possible
 - Provide good nutrition
 - Use universal precautions
 - Provide emotional support to consumer, as necessary



Activity Steps

Interactive Presentation—25 minutes

1. Lead a large-group discussion. Ask participants:

What does the word "disease" mean to you?

How does a disease hurt the body?

After a few responses, post the prepared flip chart page with the definition of "disease." Point out to participants that they will be better able to understand how diseases affect the body now that they know how body systems are supposed to work.

Flip Chart

DISEASE

When a body system cannot work the way it is supposed to

Common diseases:

- **2.** Facilitate brainstorming. Ask participants to name all the diseases they have heard of. List their responses on the same flip chart page, under the definition.
- **3. Continue the large-group discussion.** Ask the following questions:



Have you ever been around a family member or friend who had one of these diseases?

What kind of assistance did they need?

How do you think a direct-care worker can assist a consumer who has one of these diseases?

4. Distribute and review Handout 5.3: Helping Sick Consumers. After the brief discussion in Step 3, this handout will help participants reinforce what they already know or have just learned.

Small-Group Work—20 minutes

Teaching Tips

This activity is designed for six small groups, to focus on six diseases—arthritis, cancer, diabetes, heart disease, lung disease, and stroke. (Alzheimer's disease will be covered in detail in Module 13. Multiple sclerosis and Parkinson's disease can be covered in the interactive presentation that follows the group presentations. AIDS is addressed in the next level of training.)

With a larger class, you may want to include all nine diseases in this activity, forming more than six small groups and allowing more time for group reports. With a smaller class, you may want to have fewer than six groups, and assign more than one disease to each group and/or cover more systems through interactive presentation.

5. Set up small-group work. Split participants into six groups. Distribute flip chart paper and markers to each group. Assign one of the diseases to each group. Post and review the flip chart page with topics for them to cover. Explain that they have 20 minutes to prepare a flip chart page with the following information about their disease to present as a group. Distribute **Handouts 5.4a–i** and note that the information needed can be found in these handouts or in other resources provided. As before, you (or another instructor) will be sitting at the "help desk" to answer questions.



Flip Chart

GROUP REPORTS ON COMMON DISEASES

- What is it? Definition or description of the disease.
- Signs that a person has the disease.
- How the direct-care worker can assist someone who has this disease.

Group Presentations—30 minutes

6. Facilitate reporting back to the large group. Ask each small group to take 5 minutes to post their flip chart page and present their disease. Thank each group and correct misinformation as necessary.

Interactive Presentation—15 minutes

- **7. Address the remaining diseases**. After all the group presentations are completed, present the information about any diseases that were not covered.
- **8.** Wrap up the activity. Summarize by reviewing "How You Can Assist" from Handout 5.3: Helping Sick Consumers. Ask:

How can you use what you have learned today to help you to carry out this role?



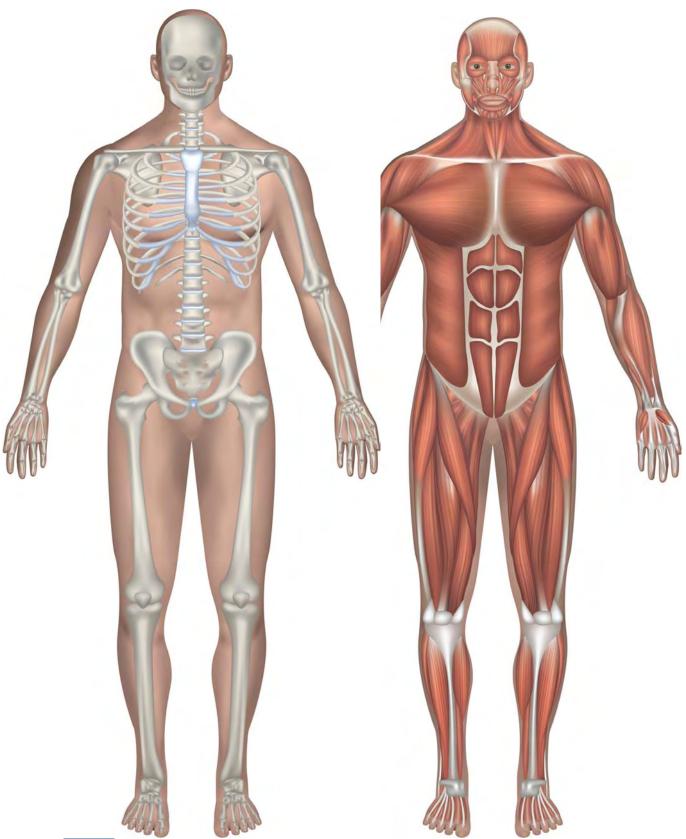
INSTRUCTOR'S GUIDE

Module 5

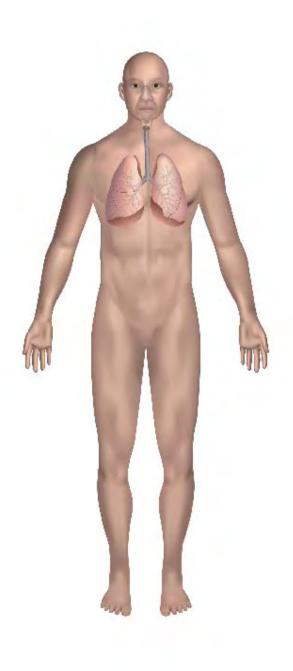
Body System Images (without labels)

- Skeletomuscular (p. 2)
- Respiratory (p. 3)
- Nervous (p. 4)
- Circulatory (p. 5)
- Digestive (p. 6)
- Integumentary [Skin] (p. 7)
- Female Reproductive System (p. 8)
- Male Reproductive System (p. 9)
- Female Urinary System (p. 10)
- Male Urinary System (p. 11)
- Female Endocrine System (p. 12)
- Male Endocrine System (p. 13)

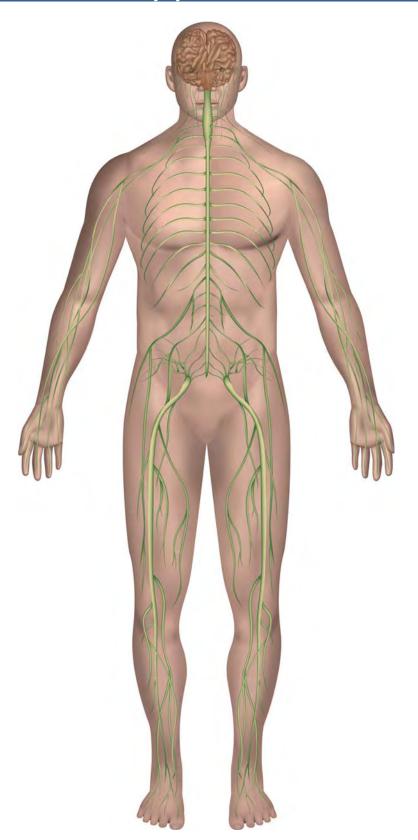




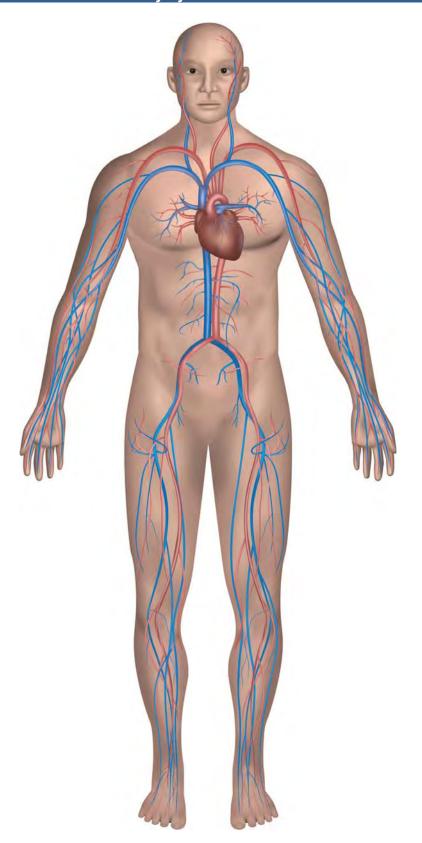
PROVIDING PERSONAL CARE SERVICES TO ELDERS AND PEOPLE WITH DISABILITIES



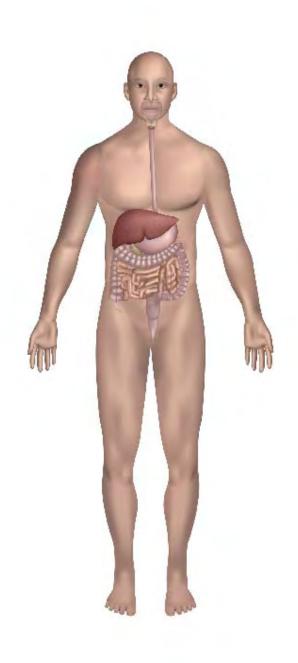


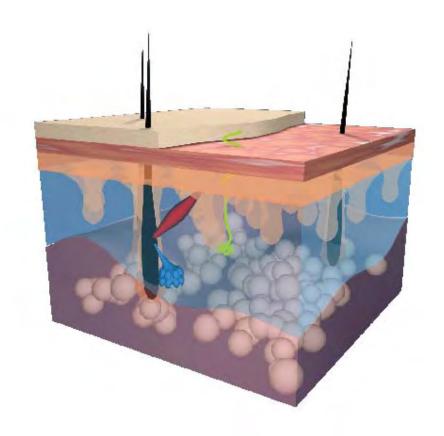


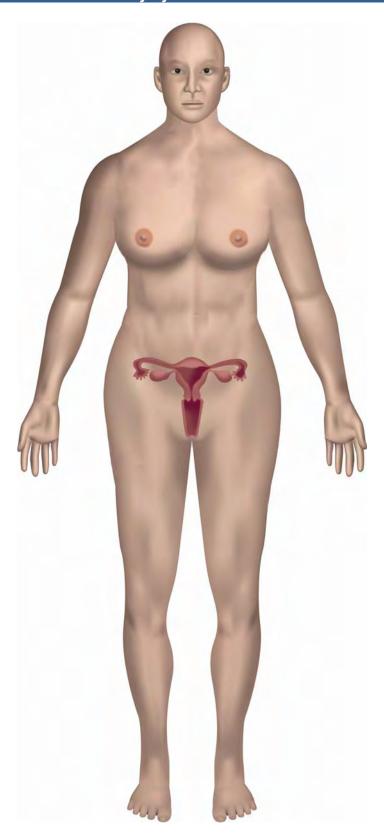




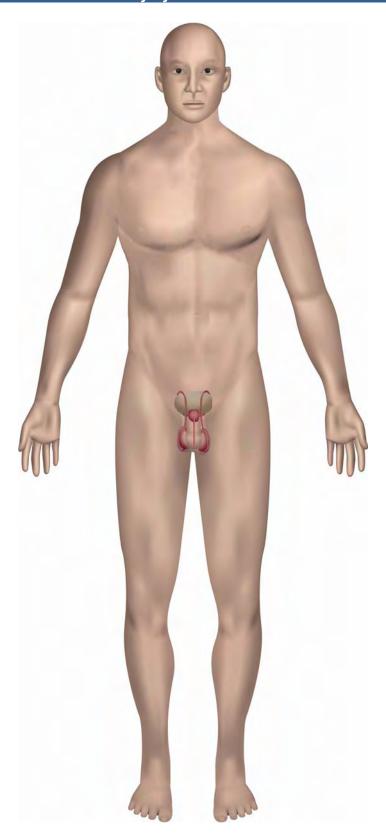




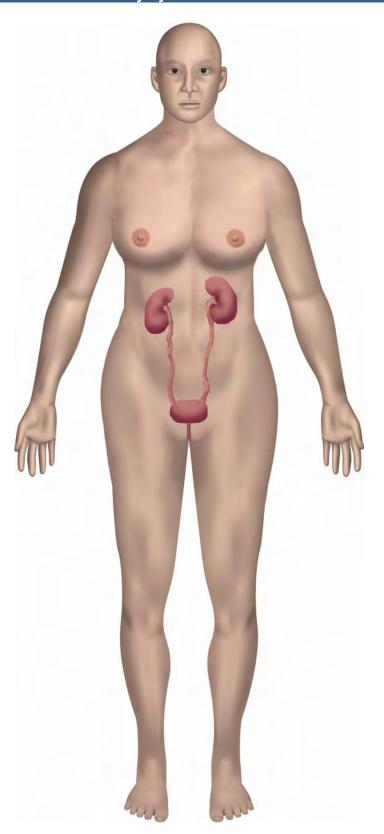




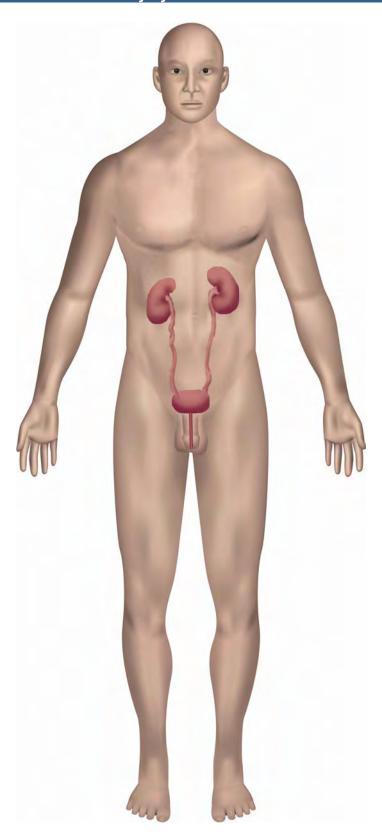




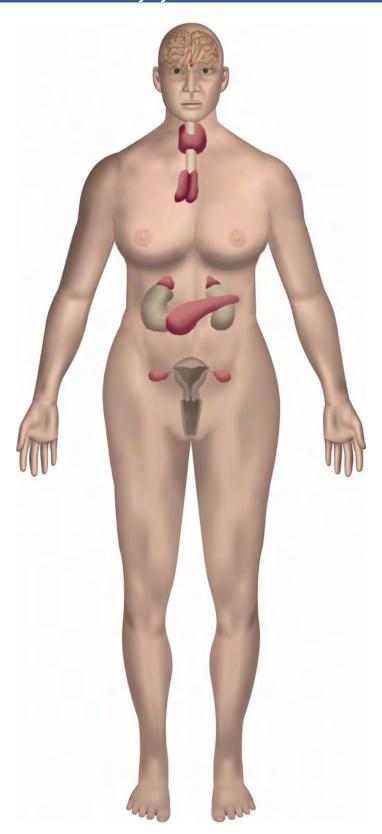




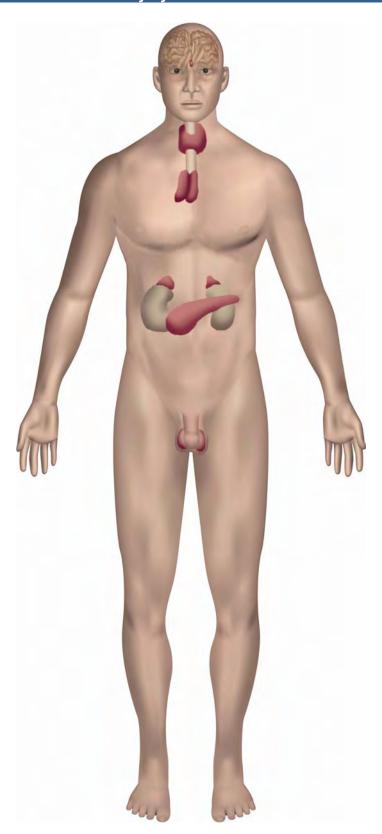














Sample cards for Activity 5.1

For each body system, prepare half-page cards (or full page, if they are very long--e.g. Observe, Record, Report) with the following information, copied from Handouts 5.2a-I:

- What it does
- Main parts
- Common problems
- How you can assist
- Observe, Record, Report

The following pages show an example of how these cards would be prepared, using the circulatory system. Some of the detailed information has been deleted (e.g., main parts). Note that the body system is NOT identified. These cards will be used by participants, working in groups, to identify the key information about their assigned body system.



WHAT IT DOES

- Pumps blood with food and oxygen around the body
- Takes wastes out of cells
- Brings wastes to the lungs and kidneys

MAIN PARTS

- Red and white blood cells
- Platelets
- Plasma
- Arteries
- Veins
- Capillaries
- The heart

COMMON PROBLEMS

A consumer may:

- Feel very weak
- Have a heartbeat that is too fast, too slow, or uneven
- Have clogged arteries
- Have high or low blood pressure

HOW YOU CAN ASSIST

- Help consumers eat and drink right
- Help consumers get moving
- Help consumers rest
- Help consumers wear support hose



OBSERVE, RECORD, REPORT

You may be asked to write down:

- Breaths per minute while the consumer is moving
- Heartbeats per minute while the consumer is moving
- How much fluid consumers drink
- How much fluid consumers urinate

Tell your supervisor if a consumer has:

- A change in skin color, especially around the lips and under the fingernails
- A heartbeat that is too fast, too slow, or uneven
- Hurt skin in the legs
- Swelling of the lower legs

Module 5. Body Systems and Common Diseases¹

Handouts

Activity 5.1: Body Systems

Handout 5.1 Introduction to Body Systems

Handout 5.2a The Circulatory System

Handout 5.2b The Digestive System

Handout 5.2c The Endocrine System

Handout 5.2d The Nervous System

Handout 5.2e The Reproductive System

Handout 5.2f The Respiratory System

Handout 5.2g The Skeletomuscular System

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Module **5.** Body System and Common Diseases

Handout 5.2h The Skin

Handout 5.2i The Urinary System

Activity 5.2: Common Diseases

Handout 5.3 Helping Sick Consumers

Handout 5.4a Alzheimer's Disease

Handout 5.4b Arthritis

Handout 5.4c Cancer

Handout 5.4d Diabetes

Handout 5.4e Heart Disease

Handout 5.4f Lung Disease

Handout 5.4g Multiple Sclerosis

Handout 5.4h Parkinson's Disease

Handout 5.4i Stroke (CVA)



Introduction to Body Systems

Handout 5.1

Page 1 of 2

It's important to understand body systems and how they work. This can help you to assist a consumer to live a healthier and more active life. It can also help deal with health problems when they do come up.

A **body system** is a group of body parts. The parts work together to do a job.

There are 10 body systems (all of the ones studied here, plus the Immune System). Each body system affects every other system. All the body systems slow down as people get older.

Body Parts

Each body system has a different function, but they all are made of the same types of body parts.

There are 5 types of body parts:

- **Cells** are the smallest part of the body. They make up all the other parts.
- **Tissues** are the same type of cells joined together.
- **Membranes** are large sheets of tissue. They often link body parts, cover organs, or line body openings.
- Glands are groups of cells that make something.
- **Organs** are different types of tissue that work together to do a job.



Introduction to Body Systems

Handout 5.1

Page 2 of 2

Body Cavities

Body cavities are spaces inside the body. They hold and protect the body systems.

There are 5 main body cavities:

- The **cranial cavity** is the space inside the skull. It holds the brain.
- The spinal cavity is the space inside the backbone. It holds the spinal cord.
- The **thoracic cavity** is the space inside the chest. It holds the heart, lungs, trachea, and esophagus.
- The **abdominal cavity** is the space below the thoracic cavity. It holds the stomach, liver, gallbladder, and upper part of the intestines.
- The pelvic cavity is the lower part of the abdominal cavity. It holds the bladder, lower part of the intestines, and organs for making babies.



Handout 5.2a

Page 1 of 4

What It Does—The circulatory system:

- Pumps blood with food and oxygen around the body.
- Takes wastes out of cells.
- Brings wastes to the lungs and kidneys.

Main Parts of the Circulatory System

Blood has 3 parts.

- **Red blood cells** bring oxygen to cells. They also bring carbon dioxide to the lungs.
- White blood cells fight germs.
- Platelets help cuts stop bleeding.
- **Plasma** is the liquid part of blood.

There are 3 types of blood vessels.

- **Arteries** take blood away from the heart.
- Veins bring blood back to the heart.
- Capillaries are the smallest blood vessels. They bring food and oxygen to cells. They take wastes out of cells. And they link arteries and veins.

The **heart** is the strongest muscle in the body. It pumps blood to the lungs to get oxygen. Then it pumps blood around the body.



Handout 5.2a

Page 2 of 4

Common Circulatory Problems

A consumer may:

- Feel very weak
- Have a heartbeat that is too fast, too slow, or uneven
- Have arteries clogged with fat (atherosclerosis) or with bits of mineral (arteriosclerosis)
- Have blood pressure that is too high or too low.
 Blood pressure is the force of blood against artery walls.

Diseases of the Circulatory System

A consumer may get one or more of these diseases:

- Congestive heart failure happens when the heart can no longer pump out all the blood that comes into it.
- A **heart attack** happens when not enough blood and oxygen reach the heart.
- **High blood pressure** makes the heart work too hard.
- A **stroke** happens when not enough blood and oxygen reach the brain.



Handout 5.2a

Page 3 of 4

How You Can Help:

You can help consumers keep their circulatory system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers eat and drink right.

"I help people eat a diet that's good for their heart. I make sure they get the right amount of fluid. I check their care plan first."

Jen's tip—Help consumers get moving.

"Exercise is good for the heart. So I try to get people moving as much as they safely can."

Joe's tip—Help consumers rest.

"It's important not to make the heart work too hard. So I build in time for breaks."

Barb's tip—Help consumers wear support hose right.

"Some people wear support hose. It keeps the blood flowing in their legs. I help them put on the stockings before they get out of bed. I make sure the stockings are smooth, and press evenly around their leg. And I check their blood flow often."



Handout 5.2a

Page 4 of 4

Review—How You Can Help:

- Help consumers eat and drink right.
- Help consumers get moving.
- Help consumers rest.
- Help consumers wear support hose right.

Observe, Record, Report

You may be asked to write down:

- Breaths per minute while the consumer is moving
- Heartbeats per minute while the consumer is moving
- How much fluid consumers drink
- How much fluid consumers urinate

Tell your supervisor if a consumer has:

- A change in skin color, especially around the lips and under the fingernails
- A heartbeat that is too fast, too slow, or uneven
- Hurt skin in the legs
- Swelling of the lower legs



Handout 5.2b

The Digestive System

Page 1 of 4

What It Does—The digestive system:

• Breaks down food into tiny bits that the body can use.

Main Parts of the Digestive System

The **upper body** contains several parts:

- Digestion starts in the **mouth.** Here, saliva and chewing break down food.
- Next, food goes through the **esophagus.** That's a tube that links the throat to the stomach.
- Food is broken down more in the **stomach.** Here, food is churned and mixed with juices.

The **lower body** contains several parts:

- The **small** and **large intestines** are tubes. They digest food as it goes through.
- The liver, the gallbladder, and pancreas are organs. They make chemicals that digest food.
- The **alimentary canal** is a long tube. It links all parts of the digestive system.



Handout 5.2b

The Digestive System

Page 2 of 4

Common Digestive Problems

- Colitis happens when part of the large intestine is swollen.
- **Constipation** is hard stools.
- **Diarrhea** is loose stools.
- Gallstones are little balls in the gallbladder.
- **Heartburn** happens when stomach acid goes into the throat.
- **Hemorrhoids** are swollen veins at the end of the large intestine.
- **Hernias** happen when part of the body sticks out through a muscle.
- **Polyps** are bumps.
- Stomach pain can happen for a number of reasons.
- **Ulcers** happen when the wall of the stomach gets hurt.

Diseases of the Digestive System

A consumer may get:

• Cancer of the stomach or large intestine.



The Digestive System

Handout 5.2b

Page 3 of 4

How You Can Help

You can help consumers keep their digestive system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers eat right.

"The right diet makes a big difference for people with digestive problems. I help them follow their care plan."

Jen's tip—Help consumers get plenty to drink.

"For most people, fluid aids digestion. So I offer drinks often. Of course, some folks have to limit fluids."

Joe's tip—Help consumers use the toilet.

"Some people need help using the toilet. I give them as much help as they need."

Review—How You Can Help:

- Help consumers eat right.
- Help consumers get plenty to drink.
- Help consumers use the toilet.



The Digestive System

Handout 5.2b

Page 4 of 4

Observe, Record, Report

You may be asked to write down:

- How much they eat
- How often they move their bowels
- What kind of stools they have

Tell your supervisor right away if a consumer:

- Can **not** swallow
- Drinks less
- Eats more or less food
- Feels sick to their stomach, or throws up
- Likes different foods than usual

Tell your supervisor right away if a consumer has:

- Blood or mucus in their stool
- Different bowel habits than usual
- Hard or loose stools
- More gas than usual
- Stomach pain or bloating



Handout 5.2c

Page 1 of 4

What It Does—The endocrine system:

- Helps control what the body does.
- Makes hormones and releases them into the blood.

Main Parts of the Endocrine System

These body parts make hormones:

- Adrenal glands
- Ovaries—in girls and women
- Pancreas
- Parathyroid
- Pituitary gland
- Testicles—in boys and men
- Thymus
- Thyroid gland



Handout 5.2c

Page 2 of 4

Common Endocrine Problems

A consumer may:

- Feel very tired
- Gain or lose weight
- Heal more slowly than usual

Diseases of the Endocrine System

A consumer may get one or more of these diseases:

- **Diabetes** happens when the pancreas doesn't make enough insulin. Insulin is a hormone that helps the body use sugar in the blood.
- **Hyperthyroidism** happens when the thyroid makes **too much** hormone.
- **Hypothyroidism** happens when the thyroid makes **too little** hormone.



Handout 5.2c

Page 3 of 4

How You Can Help

You can help consumers keep their endocrine system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers with diabetes eat right.

"People with diabetes need to follow a special diet. I help them stay on track—even at snack time!"

Jen's tip—Help consumers with diabetes dress right.

"People with diabetes have poor blood flow to the legs. I check that their socks and pants are loose enough. Plus, I make sure they wear comfortable shoes that fit well. They should never go barefoot."

Joe's tip—Help consumers with diabetes take care of their feet.

"Some diabetics have little feeling in their feet. I make sure their feet are clean and dry. I also check that their socks are clean. I never cut their toenails."

Review—How You Can Help:

- Help consumers with diabetes eat right.
- Help consumers with diabetes dress right.
- Help consumers with diabetes take care of their feet.



Handout 5.2c

Page 4 of 4

Observe, Record, Report

Write down, if needed:

- How much they eat
- What they eat
- When they eat

Tell your supervisor right away if a consumer has:

- More or less body hair than usual, or hair in a different place
- Sore areas on their skin, especially on the feet
- Trouble thinking

Tell your supervisor right away if a consumer suddenly:

- Gains weight
- Holds on to fluid, or looks puffy

Tell your supervisor right away if a consumer shows any signs of complications of diabetes (see Handout 5.3-d).



Handout 5.2d

Page 1 of 4

What It Does—The nervous system:

- Controls all the other body systems.
- Brings messages from the rest of the body to the brain.
- Controls things you choose to do with your body, such as running. These are called **voluntary functions**.
- Controls things your body does on its own, such as breathing. These are called **involuntary functions**.

Main Parts of the Nervous System

- The **brain** controls the whole system.
- **Nerves** are fibers. These carry messages around the body.
- The **sense organs** are the eyes, ears, skin, mouth, and nose. They get information about the world around you.
- The **spinal cord** runs from the bottom of the brain to the bottom of the spine. Bones called vertebrae protect it. The spinal cord is the main path for nerves going to and from the brain.



Handout 5.2d

Page 2 of 4

Common Problems of the Nervous System

A consumer may have:

- A prickly feeling
- Headaches or other pain
- Trouble controlling their bowel or bladder
- Trouble seeing, hearing, touching, tasting, or smelling.
- Trouble thinking

Diseases of the Nervous System

A consumer may get one or more of these diseases:

- **Alzheimer's disease** makes them have trouble thinking.
- Multiple sclerosis makes them weak and have trouble moving.
- Parkinson's disease makes them feel stiff, move slowly, and shake.
- **A stroke** may leave parts of the body paralyzed and the person unable to speak.



Handout 5.2d

Page 3 of 4

How You Can Help

You can help consumers keep their nervous system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers relax.

"I use a calm, quiet voice. This helps people relax."

Jen's tip—Help consumers understand you.

"I use easy words and short phrases. This helps people understand me."

Joe's tip—Avoid changes.

"I try not to change things. If I do make a change, I get people ready for it."

Review—How You Can Help:

- Help consumers relax.
- Help consumers understand you.
- Avoid changes.



Handout 5.2d

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer:

- Attacks or yells at people
- Does the same thing over and over
- Feels dizzy
- Has more trouble moving or talking
- Seems confused or upset
- Wanders



The Reproductive System

Handout 5.2e

Page 1 of 6

What It Does—The reproductive system:

- Produces the male and female cells that start a new human life, and brings these cells together.
- Protects and nourishes the new life growing inside the female.
- Provides a way for the new life to be born.
- Nourishes the new life after birth.



Handout 5.2e

The Reproductive System

Page 2 of 6

Main Parts of the Reproductive System

These are the main parts in a woman:

- The **breasts** make milk for a baby to drink.
- The **ovaries** make eggs and hormones. These make it possible for a woman to become a mother.
- The **uterus** is the place where a baby grows.
- The **fallopian tubes** bring eggs from the ovaries to the uterus.
- The **vagina** is a stretchy tunnel that links the uterus to the outside of the body. It's the place where sperm go in and babies come out.
- The **labia** are the lips of vagina. There are outer and inner labia.
- The **perineum** is the area between the labia and the anus.

These are the main parts in a man:

- The **testicles** make sperm and hormones. These make it possible for a man to become a father.
- The **scrotum** is a sack of skin that holds the testicles.
- The **prostate gland** makes a fluid that sperm swim in
- The **vas deferens** is a tube that sperm go through.
- The **urethra** is a tube that brings sperm out of the body.
- The **penis** is the usual way sperm get into a woman's vagina.



The Reproductive System

Handout 5.2e

Page 3 of 6

Common Reproductive Problems

A consumer may have:

- Enlarged prostate
- Fluid that comes out of the penis or vagina
- Menstrual problems
- Problems with sex
- Swollen prostate gland
- Red, swollen vagina or labia
- Swollen testicles



The Reproductive System

Handout 5.2e

Page 4 of 6

Diseases of the Reproductive System

A consumer may get a disease from having sex. These are called sexually transmitted diseases² or STDs for short:

- Acquired immune deficiency syndrome, or AIDS for short
- Chlamydia
- Genital herpes
- Genital warts
- Gonorrhea
- Human immunodeficiency virus, or HIV for short
- Syphilis
- Trichimoniasis

A consumer may also get one or more of these diseases:

- A **prolapsed uterus** happens when the uterus slips down from its usual place.
- A **prolapsed vagina** happens when the vagina slips down from its usual place.
- **Cancer** may affect the breasts, ovaries, uterus, cervix, prostate, or testicles.
- **Endometriosis** happens when tissue normally found in the uterus grows in places other than the uterus.
- **Pelvic inflammatory disease** happens when germs get into the fallopian tubes or uterus. It can be an STD.

² You may also hear these diseases referred to as "STIs" for "sexually transmitted infections."



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Handout 5.2e

The Reproductive System

Page 5 of 6

How You Can Help

You can help consumers keep their reproductive system as healthy as possible. Read what these workers do.

Lou's tip—Remember than sexual feelings are normal.

"Sometimes I have to remind myself—even old people can be interested in sex. So can people who can't think or move well."

Jen's tip—Give consumers privacy.

"Sex is a private thing. I give people space to enjoy it."

Joe's tip—Remember that touch is important.

"People need to touch and be touched. And not always in a sexual way."

Barb's tip—Respect different ideas about sex.

"People have different ideas about sex. I try to keep an open mind—as long as everyone is safe and happy."

Sue's tip—Know how to deal with arousal.

"Sometimes when you're cleaning a man, he gets an erection. I tell him it's normal and keep doing my work. Sometimes I ask if they would be more comfortable cleaning themselves down there.

Usually the man is more embarrassed than I am!"

Mark's tip—Know how HIV is spread.

"It's important to know how HIV is spread. Normal touching is fine."



Handout 5.2e

The Reproductive System

Page 6 of 6

Lori's tip—Keep germs from spreading.

"I don't want to get sick, or make someone else sick. So I follow all the rules—especially when I clean between someone's legs or help them use the toilet."

Review—How You Can Help:

- Remember than sexual feelings are normal.
- Give consumers privacy.
- Remember that touch is important.
- Respect different ideas about sex.
- Know how to deal with arousal.
- Know how HIV is spread.
- Keep germs from spreading.

Observe, Record, Report

Tell your supervisor right away if a consumer has:

- A hard area in their stomach
- A nipple that goes in
- Dimples or scales on their breast
- Lumps in their breast, or between their legs
- Pain in their stomach, or between their legs
- Part of their body sticking out of their vagina
- Sores or blisters between their legs

Tell your supervisor right away if a consumer:

- Bleeds from their vagina or penis
- Comes on to staff or other people
- Drips or feels burning when they urinate
- Is red or swollen between their legs
- Leaks a fluid from their vagina or penis



The Respiratory System

Handout 5.2f

Page 1 of 4

What It Does—The respiratory system:

- Brings oxygen into the body.
- Gets rid of carbon dioxide.

Main Parts of the Respiratory System

- The **nose** is the sense organ that lets you smell.
- The **sinus cavities** are holes in the skull near the nose.
- **Lungs** are like balloons. They fill up with air when you breathe in.
- The **throat** is in the neck.
- The **larynx** is a tube in the throat. Air passes through it. It is also called the voicebox.
- The **trachea** is a tube in the throat. Air passes through it. It is also called the windpipe.
- **Bronchi** and **bronchioles** are tubes. They link the trachea to the lungs.
- Alveoli are air sacs in the lungs.



The Respiratory System

Handout 5.2f

Page 2 of 4

Common Respiratory Problems

A consumer may:

- Cough
- Have a runny nose
- Have trouble breathing
- Make a whistling sound when they breathe

Diseases of the Respiratory System

These diseases make it hard to breathe:

- A **cold** is caused by germs.
- **Asthma** may be caused by allergies, exercise, or cold.
- **Bronchitis** happens when the bronchiole tubes are swollen.
- **Emphysema** happens when the alveoli are hurt.
- Pneumonia happens when the lungs are swollen. It is usually caused by germs.
- **Tuberculosis** is caused by germs making scars in the lungs, so the lung tissues can't work properly.



Handout 5.2f

The Respiratory System

Page 3 of 4

How You Can Help

You can help consumers keep their respiratory system as healthy as possible. Read what these workers do.

Lou's tip—Don't spread your germs to the consumer.

"We breathe in germs all the time and don't know it. It's really important for me to keep myself healthy, wash my hands a lot, and stay home when I'm sick. That way my consumers don't get my germs."

Jen's tip—Help consumers rest.

"People with lung problems need to rest often. So I build in time for breaks."

Joe's tip—Help consumers breathe deeply.

"People get more air when they learn how to breathe deeply. It takes practice, but it's worth it."

Barb's tip—Help consumers get comfortable in bed.

"It's harder to breathe when you're lying down. So I prop people up with pillows."

Review—How You Can Help:

- Don't spread your germs to the consumer.
- Help consumers rest.
- Help consumers breathe deeply.
- Help consumers get comfortable in bed.



The Respiratory System

Handout 5.2f

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer:

- Coughs or sneezes a lot
- Coughs up fluid
- Feels dizzy
- Has bluish skin, lips, or nail beds
- Has trouble breathing
- Is very hot or cold
- Makes a whistling sound when they breathe

Handout 5.2g

The Skeletomuscular System

Page 1 of 4

What It Does—The skeletomuscular system:

- Holds up the body.
- Protects parts inside the body.
- Lets people move.

Main Parts of the Skeletomuscular System

There are 3 types of bones.

- **Long bones** are in the arms and legs. They let people move in big ways.
- **Short bones** are in the hands and feet. They let people move in small ways.
- **Flat bones** include the ribs, skull, pelvis. They protect spaces inside the body.

Muscles are linked with bones. They let people move.

Tendons are tough bands of tissue. They link muscles and bones.

Joints are places where 2 or more bones meet.

Ligaments are bands of tissue. They connect bones with other bones.

Cartilage is tissue at the end of bones. It keeps bones from rubbing against other bones.



Handout 5.2g

The Skeletomuscular System

Page 2 of 4

Common Skeletomuscular Problems

A consumer may:

- Break a bone
- Have a **contracture.** That's when flexing muscles get short. This makes it hard to move. There is no cure.
- Sprain a joint or ligament
- Strain a muscle

Diseases of the Skeletomuscular System

A consumer may get:

- Arthritis
- Osteoporosis



The Skeletomuscular System

Handout 5.2g

Page 3 of 4

How You Can Help

You can help consumers keep their skeletomuscular system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers eat right.

"Healthy food is good for bones and muscles. I help people stay on the diet that's right for them."

Jen's tip—Help consumers get moving.

"Exercise keeps bones and muscles strong. Plus, it keeps joints able to bend. So I try to get people moving as much as they safely can."

Joe's tip—Keep consumers safe.

"I make sure people have a clear path. I don't want anyone to trip and fall!"

Barb's tip—Check devices for getting around.

"Some folks here use canes or walkers to help them get around. I make sure the devices are in good shape."

Review—How You Can Help:

- Help consumers eat right.
- Help consumers get moving.
- Keep consumers safe.
- Check devices for getting around.



The Skeletomuscular System

Handout 5.2g

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer:

- Falls
- Has more trouble moving or keeping their balance
- Has pain in their bones, muscles, or joints
- Has red or swollen joints
- Has trouble using devices for getting around

Handout 5.2h

The Skin

Page 1 of 4

The skin is also called "the integumentary system." It's the largest system of the body.

What It Does—The skin:

- Protects the inside of the body from germs.
- Keeps the body from getting too hot or too cold.
- Holds in body fluids.
- Sends the brain messages about pain, cold, heat, pressure, and touch.

Main Parts of the Skin

- The **epidermis** is the top layer. It contains skin pores and hair.
- The **dermis** is the second layer. It contains hair roots, nerves, glands, and blood vessels.
- The **subcutaneous layer** is the third layer. It contains fatty tissue.
- **Hair** and **nails** are also parts of the integumentary system.



Handout 5.2h

The Skin

Page 2 of 4

Common Skin Problems

A consumer may have:

- Dry skin
- Cuts and bruises
- Rashes
- **Bedsores** are sores on the skin. They happen when an area doesn't get enough blood. They are also called pressure sores, or decubitus ulcers.
- Eczema causes red, itchy skin.
- **Lice** are insects. The drink blood.
- **Psoriasis** causes red and white areas on the skin.
- **Ringworm** is a fungus. It causes a rash shaped like a ring.
- **Scabies** are red mites. They cause itchy, crusty skin.
- **Stasis ulcers** are sores on the skin. They happen when an area doesn't get enough blood.

Diseases of the Skin

A consumer may get:

• Skin cancer



Handout 5.2h

The Skin

Page 3 of 4

How You Can Help

You can help consumers keep their skin as healthy as possible. Read what these workers do.

Jen's tip—Help consumers take care of their skin.

"I help people bathe, making sure to rinse them well. I pat them dry with a towel. Then I help them put on lotion. This keeps their skin clean and soft."

Barb's tip—Prevent bedsores.

"Bedsores can happen when skin is pressed too long. So I help people change position often. I offer them pillows to sit on. I rub their skin to get blood flowing. And I check their skin for sore spots."

Kevin's tip—Help consumers let their skin heal.

"Scratching makes it hard for skin to heal. So I remind people not to scratch rashes or sores."

Sue's tip—Use a gentle touch.

"I don't want to hurt anyone's skin. That's why I always touch their skin gently."

Review—How You Can Help:

- Help consumers take care of their skin.
- Prevent bedsores.
- Help consumers let their skin heal.
- Use a gentle touch.



The Skin

Handout 5.2h

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer has:

- A rash
- Cuts or bruises
- Lice or lice eggs
- Scabies

Tell your supervisor right away if a consumer's skin is:

- Blue or yellow
- Itchy or sore
- Puffy
- Very dry
- Very hot or cold
- Very sweaty

The Urinary System

Handout 5.2i

Page 1 of 4

What It Does—The urinary system:

- Gets wastes out of the blood.
- Gets wastes out of the body.
- Helps keeps the right amount of fluids and chemicals in the body.

Main Parts of the Urinary System

- The **kidneys** make urine.
- The **bladder** holds urine.
- The **ureters** bring urine from the kidneys to the bladder.
- The **urethra** brings urine out of the body.



The Urinary System

Handout 5.2i

Page 2 of 4

Common Urinary Problems

A consumer may:

- Get a urinary tract infection, or UTI for short
- Have kidney stones
- Have trouble controlling their bladder
- Not have enough fluid in their body

Diseases of the Urinary System

A consumer may get one or more of these diseases:

- **Enlarged prostate** happens when a man's prostate gland gets too big. This can make it hard to urinate.
- **Kidney failure** happens when the kidneys stop working.



Handout 5.2i

The Urinary System

Page 3 of 4

How You Can Help

You can help consumers keep their urinary system as healthy as possible. Read what these workers do.

Lou's tip—Help consumers get enough fluid.

"I offer people drinks often. Some people have to limit fluid, so I always check the care plan."

Jen's tip—Help consumers empty their bladder.

"Sitting or standing the right way can help get out all the urine. I teach people how to do this."

Joe's tip—Be kind to consumers who have accidents.

"Most people hate to wet themselves. I tell them, it's no big deal. It happens all the time."

Kevin's tip—Help consumers keep on track.

"Some people follow a bladder training schedule. I help them keep on track."

Sue's tip—Help consumers get to a toilet in time.

"Some people have trouble holding their urine. So I help them get to a toilet right away."

Review—How You Can Help:

- Help consumers get enough fluid.
- Help consumers empty their bladder.
- Be kind to consumers who have accidents.
- Help consumers keep on track.
- Help consumers get to a toilet in time.



The Urinary System

Handout 5.2i

Page 4 of 4

Observe, Record, Report

You may be asked to write down:

- How much fluid they drink
- How much they urinate

Tell your supervisor right away if a consumer's urine has:

- Blood in it
- A strong smell
- A strange color or thickness

Tell your supervisor right away if a consumer has:

- A burning feeling or pain when they urinate
- A strong urge to urinate, or has to urinate often
- Trouble controlling their bladder
- Trouble starting to urinate



Helping Sick Consumers

Read how these workers help consumers who are sick.

Lou's tip—Watch for changes and report them.

"I keep an eye on people—the way they look, the way they act. I look for any changes, and I let my supervisor know."

Jen's tip—Encourage independence whenever possible.

"My consumers feel so good when they can do something like feed themselves or get dressed. I think it gives them hope."

Joe's tip—Help consumers eat right.

"Healthy food can make all the difference. I help people stay on the diet that's right for them."

Barb's tip—Keep germs from spreading.

"Germs are the last things sick people need. So I always follow the rules for keeping them under control."

John's tip—Be open to feelings.

"Part of the job is dealing with feelings—of both consumers and their families. Sometimes I just listen, and it shows I care."

Review—How You Can Help Consumers Who Are Sick:

- Watch for changes and report them.
- Encourage independence whenever possible.
- Help consumers eat right.
- Keep germs from spreading.
- Be open to the feelings of consumers and their families.



Handout 5.4a

Alzheimer's Disease

Page 1 of 4

What Is Alzheimer's Disease?

Alzheimer's disease happens when brain cells are slowly killed. Over time, people with Alzheimer's have more and more trouble thinking. For some people, their personality changes. There is no cure for Alzheimer's.

Signs of Alzheimer's Disease

Signs of Alzheimer's disease vary from person to person and from day to day. The changes start slowly and keep getting worse. The signs of disease are often worse at the end of the day than in the morning.

A consumer may:

- Act like a different person
- Be confused about time and place
- Forget how to do daily tasks
- Lose their memory
- Swing quickly from one mood to another
- Wander

A consumer may have trouble:

- Finding the right words
- Finishing a sentence
- Keeping their train of thought
- Making choices
- Thinking



Alzheimer's Disease

Handout 5.4a

Page 2 of 4

How You Can Help

You can help consumers with Alzheimer's disease. Different people need different kinds of help. Read what these workers do.

Lou's tip—Help consumers understand you.

"Many people with Alzheimer's have trouble following me when I talk. I've learned to use easy words and short phrases. I speak slowly. If needed, I say it again."

Jen's tip—Post signs.

"Signs can really help people with Alzheimer's. I made a sign for the bathroom. I always wear a name tag."

Joe's tip—Keep consumers safe.

"People with Alzheimer's may not remember what is safe and what is not. So I always lock the doors to dangerous areas and to the outside. And I get rid of small items so they don't get swallowed. Plus, I avoid moving furniture around, since it can be confusing."

Barb's tip—Help consumers with daily tasks.

"I help people do things like eat and take a shower. I ask them to do as much as they can. I give them plenty of time."

Kevin's tip—Help consumers get to a toilet in time.

"People with Alzheimer's may forget to use the toilet. So I look for signs that they have to go."



Alzheimer's Disease

Handout 5.4a

Page 3 of 4

Sue's tip—Give praise.

"If someone does something good, I tell them they did a good job."

Mark's tip—Help consumers who wander.

"If someone wanders, I go up to them calmly. I walk with them. Slowly and gently, I guide them back. Then I try to get them interested in a snack or activity they like."

Laura's tip—Pull back.

"Once in a while, a person does something that upsets me. I remind myself—they're sick, and they can't help it."

Ike's tip—Support the family.

"Taking care of a loved one with Alzheimer's is tough. I listen to the family. And I tell them I'm grateful for their hard work."

Review—How You Can Help a Consumer with Alzheimer's Disease:

- Help consumers understand you.
- Post signs.
- Keep consumers safe.
- Help consumers with daily tasks.
- Help consumers get to a toilet in time.
- Give praise.
- Help consumers who wander.
- Pull back.
- Support the family.



Alzheimer's Disease

Handout 5.4a

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer with Alzheimer's Disease:

- Acts more confused
- Has more trouble with daily tasks
- Wanders more
- Will **not** take their medicine



Arthritis

Handout 5.4b

Page 1 of 3

What Is Arthritis?

Arthritis is a group of about 100 different diseases. The diseases can hurt the joints, cartilage, and connective tissues. They can cause pain and trouble moving. Arthritis is the top cause of disability in the United States.

There are 2 types of arthritis:

- Osteoarthritis happens when joints that hold weight get worse.
- **Rheumatoid arthritis** happens when joints swell. It can affect muscles, too. It can also affect organs, such as the heart, lungs, and eyes.

Signs of Arthritis

A consumer may:

- Feel tired all the time
- Get stiff or have trouble moving after being still
- Have swollen, sore, or painful joints all the time

A consumer may have trouble:

- Doing daily tasks
- Moving their joints
- Sleeping



Arthritis

Handout 5.4b

Page 2 of 3

How You Can Help

You can help consumers with arthritis. Read what these workers do.

Lou's tip—Help consumers with daily tasks.

"People with arthritis often need extra time to do things like brush their teeth. Some have assistive devices. I ask them to do as much as they can. Then I give them as much help as they need."

Joe's tip—Help consumers move their joints.

"Arthritis makes it hard to move joints. Exercise helps keep them working."

Barb's tip—Keep consumers safe.

"It can be hard for people with arthritis to get around. I keep the floor picked up so they won't trip."

Kevin's tip—Move consumers gently.

"Moving can be painful for people with arthritis. So when I need to move them, I use a gentle touch."

Sue's tip—Use hot and cold pads.

"Heat and cold can make joints feel better. I try hot and cold pads if my supervisor says it's OK."

Mark's tip—Help consumers feel better.

"Living with arthritis is hard. I listen to people and show them I care."



Arthritis

Handout 5.4b

Page 3 of 3

Review—How You Can Help a Consumer with Arthritis:

- Help consumers with daily tasks.
- Help consumers take medicine.
- Help consumers move their joints.
- Keep consumers safe.
- Move consumers gently.
- Use hot and cold pads.
- Help consumers feel better.

Observe, Record, Report

Tell your supervisor right away if a consumer with arthritis:

- Has hurt skin
- Has more pain and trouble moving
- Has swollen or red joints
- Seems very worried or sad
- Shows signs of infection



Handout 5.4c

Page 1 of 4

What Is Cancer?

Cancer happens when cells grow and spread out of control. This stops parts of the body from doing their jobs. Cancer can start in almost any body part. Cancer cells may spread to other parts of the body and may cause death.

Signs of Cancer

Signs of cancer depend on what part of the body is affected, and what happens when that body part stops working. They also depend on how far along the cancer is.

Handout 5.4c

Page 2 of 4

Cancer Treatment

There are 2 main types of cancer treatment:

- Radiation uses X-rays to kill cancer cells.
- Chemotherapy uses strong chemicals to kill cancer cells.

These treatments can kill healthy cells too. This causes side effects.

Side Effects of Cancer Treatment

A consumer may:

- Be in pain
- Eat too little
- Feel sick to their stomach, or throw up
- Feel very tired
- Lose their hair

A consumer may have:

- Cuts in their mouth, or bleeding gums
- Hard stools
- Sore skin where they get radiation
- Trouble tasting and smelling



Handout 5.4c

Page 3 of 4

How You Can Help

You can help consumers with cancer. Different people need different kinds of help. Read what these workers do.

Lou's tip—Support consumers.

"Some people with cancer are too tired to talk. I just let them know I'm there for them. If it's okay with them, I hold their hand or put my arm around them."

Jen's tip—Listen to consumers.

"I ask people to tell me how I can help them or when they want to rest."

Joe's tip—Keep track of pain.

"I ask people how much pain they feel. I write it down."

Barb's tip—Keep germs from spreading.

"People who get cancer treatment can get sick easily. I urge them to wash their hands often. And I try to keep sick visitors away."

Kevin's tip—Be gentle with gums.

"Cancer treatment makes gums sore. So I use a light touch when I brush people's teeth."

Sue's tip—Leave colored lines.

"People who get radiation may have colored lines on their skin. I avoid washing these off."



Handout 5.4c

Page 4 of 4

Mark's tip—Help consumers eat and drink in small amounts.

"Cancer treatment can make a person queasy. So I make sure to follow the consumer's diet plan, and give small amounts."

Review—How You Can Help a Consumer with Cancer:

- Support consumers.
- Listen to consumers.
- Keep track of pain.
- Keep germs from spreading.
- Be gentle with gums.
- Leave colored lines after treatment.
- Help consumers eat and drink in small amounts.

Observe, Record, Report

Tell your supervisor right away if a consumer who has cancer:

- Has cuts or bruises
- Has hard or loose stools
- Has trouble swallowing, eating, or drinking
- Is in pain, and their medicine does not stop it
- Shows signs of infection in their mouth



Understanding Diabetes

Handout 5.4d

Page 1 of 5

What Is Diabetes?

Diabetes happens when the pancreas doesn't make enough insulin. Insulin is a hormone that helps the body use sugar in the blood. If blood sugar gets too low, a consumer can pass out and have seizures. This is very dangerous.

People with diabetes are more likely to:

- Get sick from germs
- Get sores on their legs and feet
- Go blind

People with diabetes are more likely to have:

- A heart attack or stroke
- Hurt nerves in their hands and feet
- Sick kidneys
- Trouble healing

People with Type 1 diabetes take insulin shots every day. People with Type 2 diabetes eat certain foods and take medicine by mouth.



Diabetes

Handout 5.4d

Page 2 of 5

Signs of Diabetes

A consumer may:

- Be very tired or thirsty
- Breathe fast
- Feel sick to their stomach, or throw up
- Not want to eat

A consumer may have:

- Breath that smells like fruit
- Diarrhea
- Sores on their skin

Signs of Low Blood Sugar

A consumer may:

- Act confused or grumpy
- Feel very hungry or weak
- Have a headache
- Have trouble talking, walking, or seeing
- Shake
- Skip heartbeats
- Sweat a lot



Handout 5.4d

Diabetes

How You Can Help

Page 3 of 5

ACT FAST!

If a consumer with diabetes has signs of low blood sugar, act right away! Here's what to do:

- If the consumer can swallow, give them 4 ounces of orange juice. Then tell your supervisor.
- If the consumer **cannot** swallow, call 9-1-1 right away. Do what they say. Then tell your supervisor.

There are many other ways you can help consumers with diabetes. Read what these workers do.

Lou's tip—Keep consumers safe.

"People with diabetes may have trouble feeling things with their hands and feet. That means it's easy for them to get burned, or hurt in other ways. I try to keep them safe."

Jen's tip—Help consumers protect their feet.

"Lots of diabetics have foot problems. So I make sure they wear slippers with hard soles to protect their feet. I also look for any changes in their feet or ankles."



Diabetes

Handout 5.4d

Page 4 of 5

Joe's tip—Watch out for germs.

"People with diabetes don't fight off germs well. So I keep an eye on their health and make sure cuts heal well. I report any problems."

Barb's tip—Help consumers eat right.

"Diabetics need to follow a special diet. I help them stay on track. If they don't, I tell my supervisor."

Kevin's tip—Help consumers check their blood sugar.

"I help people test their blood sugar. I also help them take any medicines they need."

Review—How You Can Help a Consumer with Diabetes:

- Keep consumers safe.
- Help consumers protect their feet.
- Watch out for germs.
- Help consumers eat right.
- Help consumers check their blood sugar.

Diabetes

Handout 5.4d

Page 5 of 5

Observe, Record, Report

Paying attention to a consumer with diabetes can save their life! If you see signs of low blood sugar (above), it's an EMERGENCY—act fast! Otherwise, watch for the following signs and report to your supervisor.

- Changes in blood sugar readings
- Nausea and throwing up
- Being very thirsty
- Breath smells like fruit
- Breathing fast
- Being confused
- Being extremely tired
- Diarrhea
- Not being hungry
- Sores on skin
- Foot problems—rashes, sores, open skin
- Signs of infection



Heart Disease

Handout 5.4e

Page 1 of 3

What Is Heart Disease?

Heart disease is when the heart muscle has trouble pumping blood to all parts of the body. Heart disease is also called **cardiovascular disease**. It is the leading cause of death in the U.S.

Types of heart disease include:

- Congestive heart failure is when the heart muscle gets weaker and weaker and can't pump blood to all parts of the body as well as it should.
- Coronary artery disease, or CAD for short. This happens when the blood vessels get harder and more narrow. The heart has to work harder to get the blood through the vessels.

Signs of Heart Disease

A consumer may:

- Cough because of fluid in their lungs
- Feel pain or pressure in their chest
- Feel very tired or worried
- Have puffy feet and ankles
- Have trouble breathing, even when they don't move



Heart Disease

Handout 5.4e

Page 2 of 3

How You Can Help

You can help consumers with heart disease. Read what these workers do.

Lou's tip—Help consumers eat right.

"I help people follow a diet plan that's healthy for their heart."

Jen's tip—Help consumers use assistive devices for ADL's.

"I help people do things like eat and take a shower. I ask them to do as much as they can. Using assistive devices makes it easier for them and they don't get as tired."

Joe's tip—Help consumers get moving.

"Exercise is good for the heart. So I ask people to do what they can. Of course, I check with their doctor first."

Barb's tip—Help consumers rest.

"People with heart disease should take it easy. So I ask them to go slow and take breaks."

Kevin's tip—Help consumers change position slowly.

"If someone is lying down, I help them sit up slowly. If someone is sitting down, I help them stand up slowly."

Sue's tip—Help consumers put up their feet.

"I help people put their legs and feet up when they sit. It makes it easier for the blood to flow back to the heart."

Mark's tip—Help consumers keep their head up.

"If someone is lying down, I prop up their head with pillows. This makes it easier to breathe."



Heart Disease

Handout 5.4e

Page 3 of 3

Review—How You Can Help a Consumer with Heart Disease:

- Help consumers eat right.
- Help consumers with daily tasks.
- Help consumers get moving.
- Help consumers rest.
- Help consumers change position slowly.
- Help consumers put up their feet.
- Help consumers keep their head up.

Observe, Record, Report

Tell your supervisor right away if a consumer who has heart disease:

- Coughs up blood
- Feels weak
- Gains weight
- Takes short, fast breaths
- Has a fast heartbeat
- Has little urine
- Sweats a lot
- Has blue lips, skin, or fingers (under the nails)



Lung Disease

Handout 5.4f

Page 1 of 3

What Is Lung Disease?

Lung disease makes it hard to get air into or out of the lungs. Lung disease is also called **Chronic Obstructive Pulmonary Disease**, or **COPD** for short. Chronic means it does not go away.

Types of lung disease include:

- Asthma
- Chronic bronchitis
- Emphysema

Signs of Lung Disease

A consumer may:

- Breathe through their mouth
- Have trouble breathing
- Make a whistling sound when they breathe



Lung Disease

Handout 5.4f

Page 2 of 3

How You Can Help

You can help consumers with lung disease. Read what these workers do.

Lou's tip—Follow safety rules for germs.

"If someone coughs up fluid or mucus, I follow infection control safety rules. That way, germs won't spread."

Jen's tip—Help consumers with daily tasks.

"I help people do things like wash their hands. I ask them to do as much as they can."

Joe's tip—Be calm and positive.

"I use a calm voice. And I tell people they're doing great. This helps them feel better and more confident."

Barb's tip—Help consumers rest.

"People who have trouble breathing need to rest. So I ask them to go slow and take breaks."

Kevin's tip—Help consumers breathe and cough right.

"The respiratory therapist taught my consumer how to breathe and cough better. I learned, too, and I remind her how to do it."



Lung Disease

Handout 5.4f

Page 3 of 3

Review—How You Can Help a Consumer with Lung Disease:

- Follow safety rules for germs.
- Help consumers with daily tasks.
- Be calm and positive.
- Help consumers rest.
- Help consumers breathe and cough right.

Observe, Record, Report

Tell your supervisor right away if a consumer who has lung disease has:

- Bluish skin color
- Changes in how they breathe or cough
- Severe difficulty with ADL's
- Extreme sadness



Handout 5.4g

Page 1 of 4

What Is Multiple Sclerosis (MS)?

MS causes changes in the brain and spinal cord. These changes make people weak and have trouble moving. MS affects young adults.

Signs of MS

Signs of MS vary from person to person. They also vary from day to day. Sometimes the consumer seems much better. This is called remission. Sometimes the consumer gets worse. This is called exacerbation.

A consumer may:

- Be weak
- Feel very sad
- Have stiff or weak arms or legs

A consumer may have trouble:

- Controlling their bowel or bladder
- Moving, or moving the way they want to
- Walking or seeing



Handout 5.4g

Page 2 of 4

How You Can Help

You can help consumers with MS. Different people need different kinds of help. Read what these workers do.

Lou's tip—Help consumers take medicine.

"I help people take their medicine. I follow their care plan."

Jen's tip—Help consumers with daily tasks.

"I help people do things like eat. I ask them to do as much as they can and remind them to use their assistive device."

Joe's tip—Help consumers rest.

"Getting too tired is bad for people with MS. I build in time for breaks."

Barb's tip—Keep consumers safe.

"People with MS have trouble getting around. I make sure they have a clear path."

Kevin's tip—Prevent bedsores.

"Bedsores can happen when skin is pressed too long. So I help people change position often. I offer them pillows to sit on. I rub their skin to get blood flowing. And I check their skin for sore spots."

Sue's tip—Help consumers exercise.

"People with MS can get stiff muscles. I help them move as much as they can."



Handout 5.4g

Page 3 of 4

Mark's tip—Protect consumers' skin.

"I help people bathe and pat their skin dry. And I make sure they are wearing a clean, dry brief or underwear."

Laura's tip—Help consumers eat and drink right.

"A good diet and plenty of fluids helps people with MS be as healthy as they can be."

Ike's tip—Help consumers feel better.

"Having MS is tough. I talk with people about their feelings and tell them I care. I urge them to see a counselor or join a support group."

Review—How You Can Help a Consumer with MS:

- Help consumers take medicine.
- Help consumers with daily tasks.
- Help consumers rest.
- Keep consumers safe.
- Prevent bedsores.
- Help consumers exercise.
- Protect consumers' skin.
- Help consumers eat and drink right.
- Help consumers feel better.



Handout 5.4g

Page 4 of 4

Observe, Record, Report

Tell your supervisor right away if a consumer with MS:

- Has more problems than usual with their condition
- Shows big changes in feelings or behavior
- Has hard stools
- Shows signs of a urinary tract infection
- Shows other signs of infection
- Has skin breakdown



Parkinson's Disease

Handout 5.4h

Page 1 of 3

What Is Parkinson's Disease?

Parkinson's disease causes changes in the brain, spinal cord, and nerves. These changes make people feel stiff, move slowly, and shake. It usually starts after age 50 and slowly gets worse. Most people need to live in a nursing home after a while.

Signs of Parkinson's Disease

A consumer may:

- Drool
- Have shaking hands
- Have stiff muscles
- Move, walk, and speak slowly
- Show no feelings with their face



Parkinson's Disease

Handout 5.4h

Page 2 of 3

How You Can Help

You can help consumers with Parkinson's disease. Read what these workers do.

Lou's tip—Be patient with consumers.

"People with Parkinson's tend to talk really slow. I give them plenty of time. I remind myself—they're not stupid, just sick."

Jen's tip—Help consumers feel better.

"Having Parkinson's is hard. I listen to people and show them I care."

Joe's tip—Help consumers with daily tasks.

"I help people do things like eat and take a shower. I help them use their assistive devices to do as much as they can."

Barb's tip—Offer plenty of fluids.

"Fluids are good for people with Parkinson's. So I ask them often if they want a drink."

Kevin's tip—Offer foods that are easy to eat.

"Eating can be hard for people with Parkinson's. So I offer them foods that are easy to get into their mouth without spills."

Sue's tip—Keep consumers safe.

"People with Parkinson's have trouble getting around. I make sure they have a clear path."



Parkinson's Disease

Handout 5.4h

Page 3 of 3

Review—How You Can Help a Consumer with Parkinson's Disease:

- Be patient with consumers.
- Help consumers feel better.
- Help consumers with daily tasks.
- Offer plenty of fluids.
- Offer foods that are easy to eat.
- Keep consumers safe.

Observe, Record, Report

Tell your supervisor right away if a consumer with Parkinson's disease:

- Has trouble getting around or eating
- Has problems going to the bathroom
- Loses weight
- Seems very sad, worried, or cut off from other people
- Shows signs of infection



Handout 5.4i

Page 1 of 4

What Is a Stroke?

A stroke happens when not enough blood gets to the brain. It is also called a **cerebral-vascular accident,** or **CVA** for short.

Signs of Stroke

You may be with someone when a stroke happens. If you know the signs, you can get help quickly and maybe the damage to the brain will be less.

A consumer may have:

- Severe headache
- A tingly feeling in some parts of the body
- Drooping eyelid, mouth, or face muscles
- Trouble seeing

A consumer may have trouble:

- Seeing out of one or both eyes
- Gripping things with one or both hands
- Moving one side of the body
- Moving their arms, fingers, legs, or toes
- Talking, or understanding other people when they talk
- Understanding what's going on

ACT FAST!

If a consumer shows signs of a stroke, call 9-1-1 right away. The faster you act, the less their brain will be hurt.



Handout 5.4i

Page 2 of 4

How You Can Help

You can help consumers who have already had a stroke. Read what these workers do.

Lou's tip—Keep consumers safe.

"After a stroke, folks trip easily. So I make sure they have a clear path to wherever they're walking."

Jen's tip—Help consumers relax.

"Having a stroke upsets people. I use a calm voice to help them relax. If they have trouble talking, I ask only 'yes' or 'no' questions."

Joe's tip—Help consumers with daily tasks.

"After a stroke, people need help doing things like cooking and dressing. Some have assistive devices. I give them as much help as they need, but I ask them to do as much as they can."

Barb's tip—Don't grab consumers.

"Strokes can damage an arm or leg. When I move people, I make sure not to pull on that part."

Kevin's tip—Be aware of sight problems.

"Some people have trouble seeing after a stroke. So I make sure they can see me when I'm talking with them."

Sue's tip—Help consumers eat.

"After a stroke, people can have trouble chewing and swallowing. I feed them from the side that works the best. And I make sure they swallow all their food."



Handout 5.4i

Page 3 of 4

Mark's tip—Prevent bedsores.

"Bedsores can happen when skin is pressed too long. So I help people change position often. I offer them pillows to sit on. I rub their skin to get blood flowing. And I check their skin for sore spots."

Laura's tip—Help consumers rest.

"After a stroke, people need to rest often. So I build in time for breaks."

Review—How You Can Help a Consumer Who Has Had a Stroke:

- Keep consumers safe.
- Help consumers relax.
- Help consumers with daily tasks.
- Don't grab consumers.
- Be aware of sight problems.
- Help consumers eat.
- Prevent bedsores.
- Help consumers rest.



Handout 5.4i

Page 4 of 4

Observe, Record, Report

Someone who has had a stroke may not be able to tell you how they are feeling. So watch carefully and report these changes.

Tell your supervisor right away if a consumer who is recovering from stroke:

- Cannot control their bowel or bladder
- Coughs or chokes when they chew or swallow
- Has hard stools
- Has skin changes
- Is sad or in pain
- Shows signs of germs in their body (infection)



Providing Personal Care Services to Elders and People with Disabilities¹

Module 6. Working with Elders

Goal

The goal of this module is to prepare participants to help elders cope with the changes associated with aging.

Time

3 hours and 30 minutes (includes 30 minutes for opening, closing, and break)

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Activities	Teaching Methods	Time
Opening		10 minutes
6.1 Building Empathy	Individual exercises, large-group exercise, and large-group discussion	40 minutes
6.2 Physical Changes As We Age	Large-group exercise	40 minutes
Break		10 minutes
6.3 Experiencing Sensory Changes	Pairs work and large-group discussion	30-45 minutes (depending on size of group)
6.4 Helping Consumers to Manage Physical Changes of Aging	Small-group work and group presentations	40 minutes
6.5 Summary	Interactive presentation and large-group exercise	15 minutes
Closing		10 minutes

Supplies

- Pencils or pens
- Flip chart, markers, tape
- All the "Body Systems" flip chart pages from Module 5
- Construction paper, blank paper, tape
- 5" x 8" index cards
- "Prizes" for Activity 6.2—enough small items, e.g., fruit or snack packs, to distribute one to each participant
- Items for demonstration stations: rubber gloves (at least two pairs); cotton balls; change purse with coins (at least one dime); small packets of mints in a basket; bandanas or headbands; goggles (at least two pairs); Vaseline; newspaper; shoebox with various small objects; needles (at least two) and thread
- Instructor's Guide, Activity 6.3—Experiential Station Instructions
- Instructor's Guide, Activity 6.5—Answers: Myths and Truths about Aging



Handouts

- Handout 6.1 Myths and Truths about Aging
- Handout 6.2 Changes in the Body as We Age
- Handout 6.3 Changes in Body Systems as We Age, and How You Can Assist Elders to Manage the Changes
- Handout 6.3a Circulatory System
- Handout 6.3b Digestive System
- Handout 6.3c Nervous System
- Handout 6.3d Respiratory System
- Handout 6.3e Skeletomuscular System
- Handout 6.3f The Skin
- Handout 6.3g Urinary and Reproductive Systems
- Handout 6.4 Summary: Caring for Older Consumers

Advance Preparation

Review all training and presentation materials for this session.

Copy all handouts for participants.

Opening

Plan an appropriate opening activity for this module. If this is the start of a new day of training, some kind of warm-up activity might be good to help focus participants' attention on being back in the learning environment. If this is a continuation of a full-day session, resuming after lunch, a quick energizer might be useful to refocus participants mentally and physically after eating.

Activity 6.1: Building Empathy

Prepare the following flip chart pages:

- "Learning Agenda" (Step 1)
- "When I am 80" (Step 4)



Activity 6.3: Experiencing Sensory Changes

Set up demonstration stations as follows. Prepare 5" x 8" cards with instructions found in *Instructor's Guide, Activity 6.3—Experiential Station Instructions*.

- Station 1: One pair of rubber gloves with cotton balls in the fingertips; a change purse with at least one dime; a basket or bowl with packages of mints (one package for each participant)
- Station 2 (may be combined with Station 1 for smaller groups): Rubber gloves with cotton balls in the fingertips, needle, thread
- Station 3: Bandana or headband
- Station 4: Cotton balls
- Station 5: Goggles smeared with Vaseline; a shoebox containing numerous small objects
- Station 6 (may be combined with Station 5 for smaller groups): Goggles smeared with Vaseline; newspaper

To make best use of the time, set up as many demonstration stations as the number of pairs in your training group.

Activity 6.4: Helping Consumers to Manage Physical Changes of Aging

Working from Handouts 6.3a-g: Changes in the Body Systems as We Age, and How You Can Assist Elders to Manage the Changes, copy the "Common Changes," "Common Situations," and "How You Can Assist..." on separate 5" x 8" index cards, or on half-sheets of 8 ½ x 11-inch paper. Do not label the systems!

If possible, laminate the cards for durability and re-use.

Prepare a flip chart page with the instructions for group work (Step 2).

Post the flip chart pages for all the Body Systems (from Module 5) around the room. Post the Urinary System and the Reproductive System pages together.



Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)

Activity 6.1 Building Empathy

40 minutes

Learning Outcome

By the end of this activity, participants will be able to:

Identify their own attitudes toward aging.

Key Content

- Many common thoughts about aging are not based on fact. This module examines myths and truths.
- Everyone has ideas and feelings about what it will be like to get older, and these can influence the attitudes participants may have when working with elders. It is important for participants to be aware of their own thoughts and feelings about aging as they identify the needs of elders and ways of assisting them.

Activity Steps

Individual Exercise: Pre-Test—10 minutes

1. Introduce the module. Explain that the goal is to prepare participants to help elder consumers deal with changes related to aging. Note that everyone has ideas and feelings about what it will be like to get older, and these can influence their work with consumers. In this module, participants will be considering their own thoughts about aging as they identify the needs of elders and how to assist them. Post and review the prepared flip chart page with the "Learning Agenda" for this module.



Flip Chart

LEARNING AGENDA: MODULE 6 Working with Elders

- · Myths and truths about aging
- Building empathy for elder consumers
- Changes in body systems
- Assisting elders to manage changes
- 2. Give instructions for the pre-test. Distribute Handout 6.1: Myths and Truths about Aging. Ask participants to label each question "True" or "False," and then turn the paper face down on the table in front of them. Explain that, at the end of the module, they will have a chance to correct their own papers to see how their ideas about aging may have changed during the class. The papers will not be collected, so this is just for insight into their own thinking.

Individual Exercise: "When I am 80"2-5 minutes

- **3. Introduce the next exercise.** Explain that it helps people, when working with elders, to identify their own thoughts and feelings about aging. Distribute one 5" x 8" index card to each participant. Ask them not to write their names on the cards.
- **4. Give instructions for filling out cards.** Post the prepared flip chart sheet for "When I am 80." Ask participants to imagine what life will be like when they are 80 years old, and briefly write their answers to these questions on their cards, numbering each one. Note that the cards will be collected, mixed up, and handed out again. Their

² "When I Am 80" is adapted from an exercise of the same name in *Strengths-Based Care Management for Older Adults* by Becky Fast and Rosemary Chapin (Health Professions Press, 2000; http://www.healthpropress.com).



answers will be shared in the large group, but without anyone knowing whose answers they are—until the end, when they will try to guess. Remind them not to write their names on their cards.

Flip Chart

WHEN I AM 80:

- Where will I be living?
- What will I look like?
- What will I be doing?
- In what ways will I be the same as I am now?

Large-Group Exercise—15 minutes

- **5. Prepare for the large-group exercise**. Collect the cards, mix them up, and redistribute them at random. Note that, if someone gets their own card back, they should keep it and not say anything about it. It will actually make the game more interesting!
- **6. Conduct the large-group exercise**. Starting with the first question—"Where will I be living?"—ask participants to share the answers on their cards. Remind participants to be respectful of each answer, knowing that these answers reflect each person's individual thoughts.
- **7. Repeat the process for each question**. Ask participants to read the answers for the rest of the questions. After they have shared their responses to the last question, participants can guess whose card they are holding.



Teaching Tips

The objective of this activity is to provide a safe way to share participants' thoughts and feelings about their own aging and to start to build empathy for the elder consumers they may be working with. Guessing whose card each person is holding is not the objective of this activity, but it is a fun aspect of the activity and nearly impossible to stop.

Make sure that participants show respect for each other's answers to the questions. If a response is surprising, ask them to consider what that response tells them about a person and how they would respond if one of their consumers had the same thought.

Large-Group Discussion—10 minutes

8. Facilitate a large-group discussion. Ask participants:

What do these responses tell you about yourselves as a group and how you think about aging?

Note that people have different expectations of aging. Some people have very positive ideas about what life will be like when they get older and do not think about needing the assistance of a direct-care worker. Other people expect the worst and can't imagine enjoying life once their bodies starts showing signs of aging. Explain that, in their jobs as direct-care workers, one of their roles will be to try to make their consumers' lives as close as possible to what they would have wished when they were younger.

9. Invite participant sharing about positive role models for aging. Ask participants to describe people whom they know who are handling the challenges of aging in a positive way. These people can be considered as positive role models for aging.



Activity 6.2 Physical Changes As We Age 40 minutes

Learning Outcome

By the end of this activity, participants will be able to:

Describe at least six common physical changes experienced by older adults.

Key Content

- The population in the U.S. aged 65 and older, in 2007, is estimated at 38 million, or 12.6 percent of the total population. About 16 million are men and 22 million are women.³
- Most elders desire independence. As of 2006, only 4.3 percent of older adults were living in institutions.⁴
- Aging is a normal, gradual process. Each person ages in his or her own way. Aging is physical and mental rather than a matter of years, and is influenced by inherited factors, life experiences, stress, and disease.

⁴ 2006 American Community Survey. <a href="http://factfinder.census.gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-S2601B&-ds-name=ACS-2006-EST-G00-&-state=st&-lang=en-state=st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-state=st&-lang=en-state=st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-state=st&-lang=en-state=st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-2006-EST-G00-&-st-gov/servlet/STTable?_bm=y&-gr-name=ACS-20



³ http://en.wikipedia.org/wiki/Demography_of_the_United_States#Current_U.S._Population

Activity Steps

Large-Group Exercise—40 minutes

- 1. Share the population statistics from "Key Content." Note the fact that this segment of the population will get much larger over the next ten years as the "baby boomers" reach retirement age.
- 2. Share additional information from "Key Content." Note that, overall, elders today are healthy and active. In 2006, only 4.3 percent were living in institutions. However, people do experience many changes as a part of normal aging, some of which affect their quality of life and may require assistance. Many of these changes are familiar to participants, so they will play a game to quickly identify the most common changes.
- **3. Give instructions for the activity**. Divide participants into three groups. Explain that you are going to ask three questions about aging. For each question, they are to write down as many answers as they can think of within their group. The group with the most correct answers wins a prize! Make sure that each group has paper and pens or pencils, and that someone has been designated as the "recorder," before you ask the first question.

4. Conduct the game. Ask:

What are some of the changes that occur with our senses?

Give the groups 5 minutes to list all the answers they can think of.

5. Generate a list of correct answers. Call "Time's Up" and then ask each group to give two answers from their list. Write correct responses on flip chart paper. Keep going around until all the groups' answers have been given. Ask each group to count the number of correct answers they listed. The group with the highest number is the "winner" for that round. Give each group member a "prize" (see Advance Preparation).



Teaching Tip

Refer to **Handout 6.3: Changes in the Body as We Age** for the possible answers, but do not distribute the handout until after the activity is finished.

6. Repeat the process for the second question. Ask participants:

What are some of the changes in our physical appearance?

If the same group gets the highest number of correct items, award the prize to the group with the next highest number.

7. Repeat the process for the last question. Ask participants:

What are some of the changes in our body's function?

This time, regardless of which group had the highest number of answers, announce that the "prize" for that question will go to the group that did not yet get a prize—because they all made a good effort!

8. Distribute handout and make the transition to the next activity. Distribute Handout 6.3: Changes in the Body as We Age, which summarizes answers to all three questions. Note that the next activity will allow them to experience some of the changes in their senses first-hand.



Activity 6.3 Experiencing Sensory Changes 30–45 minutes (depending on size of group)

Learning Outcomes

By the end of this activity, participants will be able to:

Describe their own experience of sensory deprivation—sight, hearing, and touch.

Demonstrate helping a consumer to cope with sensory deprivation.

Key Content

- Changes in the senses—sight, hearing, touch, and taste—may not seem like major health issues, but they can have a huge impact on quality of life. Experiencing how these changes can affect common everyday tasks helps participants understand the challenges that elders may experience.
- In addition, practicing how to assist someone who is experiencing these changes can provide important insights and develop skills.

Activity Steps

Pairs Work: Demonstration Stations—20–35 minutes

1. Give instructions for pairs work. Put participants in pairs, and point out the demonstration stations set up around the training space (see Advance Preparation). Explain that participants, in their pairs, will go to each station and follow the instructions on the index card found there. In each pair, they will take turns acting as the consumer and as the direct-care worker. They will move through the different stations until every participant has experienced every demonstration station as a consumer and as a direct-care worker.



2. **Begin pairs work**. Assign one pair to each station to get them started. Monitor the time and suggest when they should switch roles within their pair and when they should move on to the next station.

Large-Group Discussion—10 minutes

3. Facilitate a large-group discussion. After the pairs have completed the stations, have them take their seats and ask the following questions:

How did it feel to do these stations?

Which activity was hardest for you as the consumer? The easiest?

How did it feel to be the direct-care worker? What was hardest for you? Easiest?



Activity 6.4 Helping Consumers to Manage Physical Changes of Aging

40 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Describe physical changes to body systems that are caused by aging.

List ways the direct-care worker can assist the consumer to manage those changes.

Key Content

- Each body system changes in particular ways as we age. Learning how the changes are linked to the body systems can help participants to learn general strategies for assisting consumers to manage these changes.
- Although physical changes of aging are unavoidable, they are not necessarily signs of illness. It is important to know the difference in order to assist elders to manage normal changes, and to seek medical attention when it may be a sign of disease.

Activity Steps

Small-Group Work—20 minutes

1. Review the body systems from Module 5. Explain that, to learn and remember strategies for assisting consumers with the common conditions of aging, participants can draw on their knowledge of body systems. Point out the flip chart pages from Module 5, which are posted around the room. Note that the Urinary System and the Reproductive System will be combined for this activity.



2. Set up small-group work. Split participants into seven groups. Post and review the prepared flip chart page with instructions for group work, noting that they will have 15 minutes for this assignment. Remind participants that they can refer to their text or handouts about body systems to help with this task. As before, you will also be available at the "help desk."

Flip Chart

GROUP INSTRUCTIONS:

Common Changes of Aging, Common Situations, and How You Can Assist...

- Read your "Common Changes" card together and decide which body system it describes.
- Tape the card to the flip chart page for the body system.
- Do the same with "Common Situations" and with "How You Can Assist..."
- Prepare to present the body system for "How You Can Assist..." to the large group.
- **3. Give additional instructions**. Mix up the cards for each category. Distribute one "Common Changes" card, one "Common Situations" card, and one "How You Can Assist…" card to each group. Once every group has all three cards, tell them to begin.

Teaching Tip

When preparing their presentations, groups may find that the "Common Changes" or "Common Situations" card is on the wrong body system. Instruct them to consult the "help desk." Guide the group to figure out where the



wrong card belongs, and then search for the card that goes with their body system.

Group Presentations—20 minutes

- **4. Facilitate presentations**. One group at a time, ask each group to stand next to their body system flip chart page and report on the common changes, common situations, and how the direct-care worker can assist the consumer to manage these changes and situations. Ask if others have any questions, comments, or additional suggestions.
- 5. Wrap up the activity. After all the presentations are completed, thank all the teams. Distribute Handout 6.4: Changes in the Body Systems as We Age, and How You Can Assist Elders to Manage the Changes, including Handouts 6.4a to 6.4g.

Activity 6.5 Summary

15 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Identify what assumptions they had about aging that were incorrect.

State at least one new fact about aging learned in this module.

Key Content

- Correcting the pre-test may show participants things they have learned about aging through this module and opinions that they previously held about working with elders that may have started to change.
- The basic principles of working with elders are to:
 - Assist them to stay healthy
 - Assist them to stay active
 - Be patient
 - Be alert to changes that should be recorded and reported
 - Keep a safe environment
 - Keep oneself healthy



Activity Steps

Interactive Presentation—10 minutes

1. Facilitate a large-group discussion. Ask participants to find the pre-test they completed at the beginning of the module. Briefly discuss each item and state whether it is true or false. Encourage questions, since many of these answers are based on opinions.

Teaching Tip

See *Instructor's Guide*, *Activity 6.5*—Answers: Myths and Truths about Aging.

2. Take note of changes in attitude. Ask if anyone's opinions have changed since the beginning of the module. Note that it is important to be aware of our own opinions and the ways they may affect our relationships with people. It is also important to be open to changing our opinions based on new information or experiences that we may have.

Large-Group Exercise: Go-Round—5 minutes

- **3. Facilitate a go-round**. Ask participants to briefly share the most important thing they learned from this module.
- **4.** Wrap up the module. Distribute and review Handout 6.5: Summary—Caring for Older Consumers, as a summary to this module.

Instructor's Guide, Activity 6.3 Experiential Station Instructions

Prepare the following instruction cards for each experiential station.

Station 1:

Put on both of the rubber gloves with cotton balls in the fingertips.

Try to 1) take a dime out of the change purse (return the dime!!); and

2) open a package of breath mints.

Station 2:

Put on both of the rubber gloves with cotton balls in the fingertips. Try to thread a needle.

Station 3:

Cover your eyes with a bandana or headband.

Take a walk with your partner around the room.

Your partner should hold onto your elbow for guidance.

Station 4:

Person 1: Put cotton balls in your ears. Ask your partner for directions to her house or how to make her favorite recipe.

Person 2: Give your partner directions.

Speak softly and mumble. Do not let her see your mouth (put your hand over your mouth or turn your head).

Station 5:

Person 1: Put on the goggles.

Person 2: Tell your partner to look for a small object in the shoebox. You should tell her or him which object.

Station 6:

Person 1: Put on the goggles. Try to read the newspaper to your partner.

Person 2: Listen to your partner as she or he reads. Ask her or him to hurry (say: "Don't read so slowly!).

Instructor's Guide, Activity 6.5

Answers: Myths and Truths about Aging

1. Older adults can't learn new things or deal with changes.

False:

Older adults can learn new skills, though it may take longer than when they were

younger. With help and support from others, they can adjust to new situations or changes.

2. It is normal for elders to be confused about what's going on.

False:

Being confused may be a sign of illness and should be reported.

3. Sex and intimacy are not important for elders.

False

The need for a warm and caring relationship, with physical affection that may include sex, stays with us all our lives, and may even get stronger for some of us as we age. Elders are capable of having sex and experiencing sexual pleasure, though the frequency of sex may decrease.

4. Even healthy elders should avoid getting exercise in order to save energy.

False

Light or moderate exercise is important to maintaining health throughout our lives. Resting during activities may be helpful to keep up energy, or going at a slower pace, but activity itself is good.

5. Older adults don't care anymore about looking good.

False

Concern about how we look does not change as we get older.



SECTION A. INTRODUCTION AND ORIENTATION TO DIRECT-CARE WORK Module 6. Working with Elders

6. Most elders are sick and in nursing homes.

False

In 2006, only 4.3 percent of elders were living in nursing homes or other institutions.

7. People usually get shorter as they get older.

True

Many people do get shorter as they age, because the spine very gradually gets shorter.

8. Older people have trouble hearing, seeing, and keeping their balance.

True and False

Problems with hearing and vision are common for elders. However, losing one's balance is a sign of illness and should be recorded and reported.

9. Losing control over the bowel or bladder is a normal part of aging.

False

Problems with bowel or bladder control may happen but are not considered normal and should be recorded and reported.

10. Most older people act very much alike.

False

Like people of all ages, elders are unique individuals, who experience the changes of aging in very different ways and who act very differently.



Module 6. Working with Elders¹

Handouts

Activity 6.1: Building Empathy

Handout 6.1 Myths and Truths about Aging

Activity 6.2: Physical Changes as We Age

Handout 6.2 Changes in the Body as We Age

Activity 6.4: Helping Consumers to Manage Physical Changes of Aging

Handout 6.3

Changes in Body Systems as We Age, and How You Can Assist Elders to Manage the Changes

Handout 6.3a Circulatory System

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Module **6.** Working with Elders

Handout 6.3b Digestive System

Handout 6.3c Nervous System

Handout 6.3d Respiratory System

Handout 6.3e Skeletomuscular System

Handout 6.3f The Skin

Handout 6.3g Urinary and Reproductive Systems

Activity 6.5: Summary

Handout 6.4

Summary: Caring for Older Consumers

Myths and Truths about Aging

Decide whether each statement is true or false. Then write \underline{T} for \underline{true} or \underline{F} for \underline{false} .

1.	 Older adults can t learn new things or deal with
	changes.
2.	 It is normal for elders to be confused
	about what's going on.
3.	 Sex and intimacy are not important for elders.
4.	 Even healthy elders should avoid getting
	exercise in order to save energy.
5.	 Older adults don't care anymore about looking good.
6.	 Most elders are sick and in nursing homes.
7.	 People usually get shorter as they get older.
8.	 Older people have trouble hearing, seeing, and keeping their
	balance.
9.	 Losing control over the bowel or bladder is a normal part of
	aging.
10.	Most older people act very much alike.

Changes in the Body as We Age

Handout 6.2

Page 1 of 2

As we get older, our bodies change. Here's how.

1. How do our senses change?

We cannot smell as well.

We cannot taste as well—lots of foods taste the same.

We cannot feel as much with our skin.

We cannot see as well.

- It takes our eyes longer to adjust to changes in lighting.
- It's harder to see at night.

We cannot hear as well.

• We may have trouble hearing high sounds.

2. How does the way we look change?

Our nails get thicker and tougher.

Our body gets shorter.

Our eyes sink in more.

Our skin:

- Bruises easily
- Gets age spots and wrinkles
- Looks clear, pale, and thin



Changes in the Body as We Age

Handout 6.2

Page 2 of 2

Our hair:

- Falls out
- Turns gray

Our weight changes.

- Men often gain weight until age 50, and then lose it.
- Women often gain weight until age 70, and then lose it.

3. How does the way our body works change?

The heart does not work as well. We get tired faster.

It takes us longer to:

- Heal, or get better after being sick
- React
- Think

We have more trouble:

- Digesting food
- Keeping our balance
- Sleeping

Our bones get weaker. They break more easily.

Our muscles get weaker.



Module **6.** Working with Elders

Changes in Body Systems as We Age, and How You Can Assist Elders to Manage the Changes

Handout 6.3

In order to help elder consumers to manage the normal changes of aging, it is good to know what's happening in each body system.

This section describes the "Common Changes" for each body system and some "Common Situations" that happen due to those changes. "How You Can Assist Elders to Manage Changes of Aging" talks about your role in assisting elders to continue living their normal lives.

Handout 6.3a

Circulatory System

COMMON CHANGES

As people age, the flow of blood changes.

- The heart gets weaker and doesn't work as well.
- Tubes that carry blood get harder and narrower. This slows the flow of blood.

COMMON SITUATIONS

Because of these changes, older people often:

- Feel cold, especially in their hands and feet
- Have a fast heartbeat when they get upset
- Are short of breath after doing things

HOW YOU CAN ASSIST ELDERS TO MANAGE CHANGES OF AGING

To help with blood flow, ask the consumer to:

- Avoid crossing their legs and wearing tight clothes
- Avoid things that upset them
- Move around
- Put their legs up
- Soak their feet in warm water, or take a warm bath

If the consumer is cold, ask them to:

- Dress in layers
- Eat and drink warm things
- Turn up the heat, or use an extra blanket. But do **not** offer hot water bottles or heating pads.

To help with shortness of breath:

- Take their time doing activities
- Rest every so often



Digestive System

Handout 6.3b

Page 1 of 2

COMMON CHANGES

As people age, their eating and digestion change.

- They have fewer taste buds.
- They feel less thirsty.
- They may lose teeth or have dentures that don't fit well. This makes it hard to eat some foods.
- They have less saliva.
- Food stays in the stomach longer.
- The muscles of the large bowel do not work as well.
- They feel less of an urge to empty their bowel.

COMMON SITUATIONS

Because of these changes, older people often:

- Have a dry mouth
- Have gas, bloating, or stomach pain
- Have hard bowel movements
- Lose teeth

Digestive System

Handout 6.3b

Page 2 of 2

HOW YOU CAN ASSIST ELDERS TO MANAGE CHANGES OF AGING

If the consumer does not want to eat:

- Offer them snacks.
- Make food look better and have more flavor.

If the consumer does not want to drink, or has hard bowel movements:

• Offer them small amounts of fluids often.

To help with dry mouth:

• Ask the consumer to drink before taking pills.

To keep teeth healthy:

• Offer mouth care often.

If the consumer has trouble digesting, ask them to:

- Eat 6 to 8 small meals each day, if their care plan says to
- Eat foods that are high in fiber, if their care plan says to
- Avoid foods that are spicy or could cause gas
- Eat slowly and chew well
- Sit up for 30 minutes after eating
- Take plenty of time to empty their bowels



Nervous System

Handout 6.3c

Page 1 of 2

COMMON CHANGES

As people age, their brain and nerves change.

- Nerve cells die.
- The senses don't work as well.

COMMON SITUATIONS

Because of these changes, older people often have trouble:

- Coping with change
- Falling asleep
- Getting used to changes in light
- Going up and down stairs
- Keeping their balance
- Learning and recalling new things
- Seeing, hearing, smelling, tasting, and feeling things



Nervous System

Handout 6.3c

Page 2 of 2

HOW YOU CAN ASSIST ELDERS TO MANAGE CHANGES OF AGING

If the consumer forgets things easily:

- Ask them to write things down.
- Give them clues to help them remember.
- Give them puzzles and mental challenges for practice.

If the consumer loses their balance easily:

- Ask them to use handrails, if possible.
- Ask them to change position slowly. Count to 10 after they get up, then assist them to walk.
- Give them plenty of time to get around.

If the consumer has trouble getting to sleep:

- Ask them to move around during the day.
- Offer them a back rub and warm milk before bed, if possible.
- Ask them to avoid coffee, tea, chocolate, and alcohol before bed.

If a consumer has trouble seeing:

- Ask them to wait for their eyes to get used to changes in light.
- Make sure they have plenty of light and a clear path.
- Do **not** move things around in their room.
- Ask them to get their eyes checked and wear their glasses.
- Assist them to find their way, if needed.

If a consumer has trouble hearing:

- Speak clearly.
- Get close to them when you talk.
- Ask them to get their ears checked.
- Remind them to wear their hearing aid (if they have one).



Handout 6.3d

Respiratory System

COMMON CHANGES

As people age, their breathing changes.

- They don't breathe out carbon dioxide and take in oxygen as well as before.
- Their breathing tubes can get clogged with mucous.

COMMON SITUATIONS

Because of these changes, elders often:

- Have trouble breathing when they move around.
- Cough more and may cough up mucous.

HOW YOU CAN ASSIST ELDERS TO MANAGE CHANGES OF AGING

To help with shortness of breath:

- Take their time doing activities.
- Rest every so often.
- Ask a respiratory therapist to teach the consumer how to breathe and cough better.



Handout 6.3e

Skeletomuscular System

COMMON CHANGES

As people age, their muscles, bones, and joints change.

- The spine gets shorter. The upper spine may become curved. The head may bend forward.
- Bones lose calcium and get weaker.
- Muscles get weaker and less stretchy.
- Joints get stiff, especially after sleep or rest.

COMMON SITUATIONS

Because of these changes, elders often:

- Break bones easily.
- Feel joint and muscle pain.
- Get tired easily.
- Have trouble taking off and putting on lids and lifting heavy cups.
- Need more time to do things.

HOW YOU CAN ASSIST CONSUMERS TO MANAGE CHANGES OF AGING

Ask the consumer to:

- Move their joints and muscles, if their care plan says to.
- Eat foods and drinks with calcium, such as milk products, if their care plan says to.
- Rest and take their time doing activities.
- Try using plastic cups with handles. Fill the cups only half full to make them lighter and prevent spills.

Make sure the consumer:

- Can reach the things they use often.
- Has a clear path.
- Has plenty of light.
- Has strong furniture.



Handout 6.3f

The Skin

COMMON CHANGES

As people age, their skin changes.

- Fat under the skin moves to different places. Elbows, hipbones, and shoulder blades stick out more.
- Glands do not make as much oil.
- The skin sags and doesn't stretch back.
- Tubes that carry blood can be seen more easily.
- Fingernails get ridged and break easily. Toenails get hard and thick.

COMMON SITUATIONS

Because of these changes, elders often:

- Break fingernails easily.
- Get wrinkles and dry skin.
- Get cuts and sores easily.
- Take longer to heal.

HOW YOU CAN ASSIST CONSUMERS TO MANAGE CHANGES OF AGING

When the consumer bathes:

- Use only a little soap.
- Touch the consumer's skin gently. Pat dry with a towel.
- Put lotion on their skin after bathing. Avoid lotions that have alcohol, since they tend to dry skin.
- Do not use bath oils, since these could cause a fall.
- Do not bathe them every day, unless their care plan says to.

To care for nails:

- Assist the consumer to file their fingernails. Put on lotion to soften nails.
- Do not cut fingernails (unless you are a certified aide or work for the consumer). Report that they need to be cut.
- Do not cut or file toenails (unless you are a certified aide or work for the consumer). Report that they need to be cut.



Urinary & Reproductive Systems



Page 1 of 2

COMMON CHANGES

As people age, their bladder and male and female parts change.

- The bladder muscles get weaker and more stretched.
- A man's prostate gland usually gets bigger.
- There is less fat in a woman's breasts and in the lips of her vagina.
- The woman's vagina makes less mucous.
- Women stop producing eggs during menopause, but men produce sperm for most of their lives.
- Men may need more time to get an erection.
- There is no change in sexual desire and pleasure.

COMMON SITUATIONS

Because of these changes, elders may:

- Have trouble holding their urine
- Get up several times each night to empty their bladder
- May have a dry vagina during sex (women)
- Still want to have sexual relations, but have to deal with social attitudes against elders having sex
- May have trouble getting privacy to have sex



Urinary & Reproductive Systems



Page 2 of 2

HOW YOU CAN ASSIST ELDERS TO MANAGE CHANGES OF AGING

If the consumer has bladder or bowel accidents, ask them to avoid:

- Drinking coffee, tea, colas, and alcohol after dinner.
- Eating salty or spicy foods for dinner, since these can make them thirsty.
- Taking hot tub baths.
- Wearing pants with buttons and zippers.

If the consumer has accidents:

- Assist them to get to the toilet at least every 2 hours.
- Assist them to use a commode or bedpan.
- Make sure they have a clear path to the bathroom.
- Put a commode in their bedroom.
- Put on a night-light.

Support the consumer's right to continue their sexual relationships.

- Respect the consumer's needs for intimacy with chosen partners.
- Respect the consumer's needs for privacy.
- Respectfully educate the consumer about possible need for lubrication for the woman and longer time for the man to get erect.



Summary: Caring for Older Consumers

Handout 6.4

Page 1 of 2

There is a lot to know about assisting consumers to manage the normal changes of aging. But there are some basic principles to guide you. Read these tips from other workers.

Syd's tip—Assist elders to stay healthy.

"Eating right and drinking plenty of fluids is good for every body system! Plus, I encourage people to get plenty of rest and take vitamins, if it's in their care plan."

Alicia's tips—Assist elders to stay active.

"I urge people to do as much for themselves as they can. Plus, I ask them to move their bodies as much as their care plan says to."

Gina's tip—Be patient.

"I give people plenty of time to do things. It helps to pace them—a little work, a little rest."

Nan's tip—Be alert.

"I keep a close eye on people. I tell my supervisor if I see any problems with their bodies or minds."

Garth's tip—Be safe.

"I pick up the floor and give people plenty of light so they won't trip. And I follow the rules to keep germs from spreading."

Ben's tip—Keep yourself healthy, too!

"Elders are more likely to get sick as they get older. The last thing they need is for me to get sick and bring my germs to work with me! So I try to stay healthy, too, and I report out when I'm sick."



Summary: Caring for Older Consumers

Handout 6.4

Page 2 of 2

Review—Caring for Older Consumers:

- Assist elders to stay healthy.
- Assist elders to stay active.
- Be patient.
- Be alert.
- Be safe.
- Keep yourself healthy, too.

Providing Personal Care Services to Elders and People with Disabilities¹

Module 7. Respecting Differences

Goal

The goal of this module is to improve the ability of participants to work with people who are different from themselves.

Time

3 hours and 30 minutes (including 30 minutes for opening, closing, and break)

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Activities	Teaching Methods	Time
pening		10 minutes
7.1 People Bingo	Interactive presentation, large- group exercise, and large-group discussion	30 minutes
7.2 Exploring Assumptions	Large-group exercise and discussion, small-group work, and large-group discussion	1 hour
Break		10 minutes
7.3 Telling Your Story	Interactive presentation, pairs work, and large-group discussion	45 minutes
7.4 Affirmations	Interactive presentation and individual, pairs, and large-group exercises	45 minutes
Closing		10 minutes

Supplies

- Flip chart, markers, tape
- Paper and pencils
- Instructor's Guide, Activity 7.1: People Bingo Icebreaker

Handouts

- Handout 7.1: People Bingo: Sample Card
- Handout 7.2: Who Would You Choose?
- Handout 7.3: Exploring Assumptions: Part 1
- Handout 7.4: Exploring Assumptions: Part 2
- Handout 7.5: Tell Your Story
- Handout 7.6: Showing Respect
- Handout 7.7: Create an Affirmation



Advance Preparation

The activities in this module ask the trainees to think about and discuss a variety of personal and potentially difficult issues. Because of possible negative experiences in the past, these activities and discussions can evoke strong emotions among the trainees. Thus, this module is best taught with two instructors. Ideally, if it can be arranged, one of the instructors should be a counselor or social worker.

If the instructor is working alone, it is best to "practice" by doing the exercises ahead of time, to get some idea of what emotions might be experienced by others.

Copy all handouts for participants.

Opening

Plan an appropriate opening activity for this module. If this is the start of a new day of training, some kind of warm-up activity might be good to help focus participants' attention on being back in the learning environment. If this is a continuation of a full-day session, resuming after lunch, a quick energizer might be useful to refocus participants mentally and physically after eating.

Activity 7.1 People Bingo

Prepare a flip chart page with the Module 7 Learning Agenda (Step 3).

Adapt the People Bingo: Sample Card (if necessary) for the number of participants and their backgrounds. Make enough copies for each participant.

Decide if you want to give prizes for the "winners"—e.g., refrigerator magnets, positive affirmation notes/stickers, or candy. If you do this, plan a way to make every participant a winner by the end of the module (or day). Make sure you have enough prizes for every participant.



Activity 7.2 Exploring Assumptions

Prepare a flip chart page for "Reasons for Choosing a Consumer" (Step 3).

Activity 7.3 Telling Your Story

Prepare a flip chart page with the definition of "Culture" (Step 2).

Activity 7.4 Affirmations

Prepare a flip chart page explaining "Affirmations" (Step 2).

Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)



Activity 7.1 People Bingo

30 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Explain why it is important to talk about differences among people as part of this training.

Identify some of the ways that individual participants are different from each other.

Identify some assumptions they made about fellow participants based on appearance and limited information.

Key Content

- Within every group there are similarities and differences among individuals. Some of the differences are race, class, language, age, sexuality, religion, culture, abilities, etc.
 Some of these similarities and differences are obvious; others are not.
- The differences are often referred to as "diversity." It is important to talk about differences and diversity in this training because, as direct-care workers, participants will come in contact with many people, some of whom will have significant differences and some of whom will only appear to be different.
- We all make assumptions about similarities and differences based on the initial information we get about a person. Trainees need to learn to move beyond assumptions, to listen, and to respect differences in order to work well with people, both in this training and on the job.
- This exercise will help participants begin to learn how to identify their assumptions and how to respect differences.



Activity Steps

Interactive Presentation—10 minutes

- 1. Assess the participants' knowledge. Ask for a show of hands from people who have heard the term "diversity." Ask those who raise their hands to explain what they think it means.
- **2. Define "diversity."** Summarize by noting that "diversity" refers to the differences that you find in any group of people—even in a group as small as two people! Review the bullets under "Key Content" and explain the importance of addressing diversity in this training.
- **3. Introduce the module.** Note that, by exploring some of the similarities and differences within the trainee group, and working with profiles of consumers, this module is designed to help participants build the awareness, skills, and self-confidence necessary to work with people who are different from themselves. Post and review the prepared flip chart page with the learning agenda for this module.

Flip Chart

<u>LEARNING AGENDA: Module 7</u> <u>Respecting Differences</u>

- Exploring differences and similarities among the group of trainees
- Challenging assumptions that we make about others
- Exploring, sharing, and valuing our own unique "stories"
- Affirming our own strengths and capabilities



4. Address the potential for strong emotions to arise. Acknowledge that talking about diversity can be difficult and that some of the activities may bring up strong emotions. Emphasize that emotions are okay, and that it will be particularly important to follow the ground rules to show respect during discussions and to be sensitive to each other's feelings.

Large-Group Exercise—10 minutes

- **5. Introduce "People Bingo."** Ask if anyone has ever played the game "Bingo." Review the basic instructions for Bingo. State that this exercise will involve a modified version of Bingo, which will require participants to mingle with others and learn something about each other.
- **6. Give instructions.** Hand out one Bingo card (**Handout 7.1**) to each participant. Explain that they are to mingle and ask other participants questions about themselves based on the statements on the cards. For example, if a statement says, "I drive a car," you would ask the other participant, "Do you drive a car?" When you find a statement that is true about that participant, have that person sign or write their initials in the box for that statement. Then move on to the next person. (Demonstrate how this would work using one of the squares that applies to you.) Each person may sign only one square of another person's Bingo card.
- **7. Give additional instructions.** Explain that, in this version of the game, someone gets BINGO by getting signatures for all the squares in one row, one column, and/or diagonally across the square (using the "Free" space). When a participant does this, they should call out "Bingo!" They will have 5 minutes to do this. If no one gets "Bingo" within 5 minutes, then the winner will be the person with the most signed squares.

Teaching Tips

Depending on the size of the group, you may want to adjust the rules for getting Bingo—e.g., if a participant must fill in an entire column or row, or two columns, or the entire sheet. The Instructor's Guide describes some options for both large and small groups.



One way to make everyone feel like a "winner"—and to learn more about each other— is to continue playing after the first person calls out "Bingo!" and see how long it takes for everyone to get a Bingo.

- **8.** Take questions and start the game. Ask if there are any questions about the game. After answering questions, ask participants to begin, reminding them to ask each other questions (e.g., "Do you play a musical instrument?") rather than just asking people to sign their card.
- **9. Wrap up the game.** Stop the game after the first person gets Bingo or after 5 minutes (or longer, depending on how you decided to use the exercise).

Large-Group Discussion—10 minutes

10. Facilitate a large-group discussion. Debrief using the questions below. Clarify that the participants should not talk in specifics about a classmate. Information should be kept anonymous and general.

How many got Bingo? How many got one less than Bingo? How many got two less than Bingo?

Which spaces did you have a hard time filling?

What surprised you as you were going around the room?

11. Draw out participants' assumptions. Note that the information on these cards relates to individual background, preferences, and personal qualities. The purpose of the game was to learn some things about each other that might not be obvious, and also to explore the assumptions that people make about each other. Ask:

Did you have ideas about certain people who you thought could fill certain categories (e.g., that someone Latina would speak a language other than English)?



12. Define "assumptions" and transition to next activity. Summarize the discussion by noting that these ideas about people are examples of *assumptions*. Remind participants that making assumptions is very common and normal—it's when a person makes an assumption without checking whether it is true that may cause problems. The next activity will allow participants to further explore what assumptions they make and how these assumptions can impact their work.

Activity 7.2 Exploring Assumptions

1 hour

Learning Outcomes

By the end of this activity, participants will be able to:

Identify some assumptions they make, or stereotypes they have, about other people.

Describe how assumptions are often made based on negative stereotypes and can be misleading.

Describe the possible impact of making assumptions in their work with consumers.

Explain how to use their awareness of their own assumptions to begin building a relationship with their consumer.

Key Content

- All people make assumptions. This is a natural part of getting to know someone. Key factors in our assumptions are stereotypes about age, sex, race, culture, socio-economic status, sexual orientation, or appearance. Many times such assumptions are wrong! Even if correct, assumptions can lead us to make decisions or choices based on incomplete information, which can have a negative impact on any relationship.
- On the negative side, assumptions and stereotypes can prevent people from really getting to know others. On the positive side, if people are aware of their assumptions, they can ask questions to check their accuracy, which helps to build the relationship.
- Direct-care workers cannot afford to act on any assumptions that they may have about consumers. There is usually a deeper story than what is revealed in the care plan or even in the first visit. The first step is to become aware of their assumptions. The



second step is to explore the assumptions by asking the consumer to tell his or her story.

Everyone has had experiences with people making assumptions about them based on how they look or how they talk or where they come from. However, each participant has a unique life story, as do the consumers. Valuing the uniqueness of each individual will provide a foundation for a caring relationship between the direct-care worker and the consumer.

Activity Steps

Large-Group Exercise and Discussion—25 minutes

1. Introduce the activity. Note that it is normal to make assumptions about people—to take small pieces of information and fill in other details based on our past experiences. However, those assumptions—which are often based on beliefs about people of a certain age, sex, race, culture, or appearance—are often wrong. Negative assumptions can create a barrier to learning what a person is really like. Briefly share an example from your own life where you made an assumption about a person that was incorrect—and that you had to overcome in order to work together.

Teaching Tips

This is an introduction to a big topic and is less about teaching content and more about starting a process of self-awareness.

The instructor sets the tone for this process. By sharing your own experiences with assumptions, participants will feel safer to open up. How much you share will determine how much participants share.

2. Give instructions. Explain that this exercise will help participants learn about making assumptions. Distribute **Handout 7.2: Who Would You Choose?** Ask for three volunteers to read aloud the statements about three potential consumers. Note that when working with consumers in a nursing facility, they won't be able to choose



their consumers, but in this exercise you are asking them to pretend that they could. Based on the information given, they should number the statements one through three, choosing the person with whom they would most want to work as number one and with whom they would least want to work as number three.

3. Ask for responses. After a couple of minutes, ask participants to raise their hands if Consumer A was their first choice. Ask for volunteers to share what led them to place this consumer first. On the flip chart page entitled "Reasons for Choosing a Consumer," note their reasons for choosing Consumer A.

Flip Chart

REASONS FOR CHOOSING A CONSUMER A. B.

C.

- **4. Repeat the process.** Do the same for Consumers B and C.
- **5.** Reveal the surprise answer and facilitate discussion. Tell participants that the statements were written about the same consumer. Ask participants:

How can all the statements be about the same person?

6. Answer the question posed in Step 5. Explain that these statements are examples of information that might be gained at different points in a relationship or from different sources. Emphasize that when people first meet, they don't know each other's whole



story. Each may have pieces of the other's story, but until a person confirms it, what's really true isn't known.

7. Have participants discuss their assumptions about the fictional consumer. Refer back to the flip chart page with the list of reasons for choosing a consumer. Ask participants to identify assumptions that were made and that are reflected in their reasons. Ask participants:

Which assumptions were true? Which were not?

How can you check or clarify your assumptions?

8. Restate purpose of the activity and transition to the next one. Emphasize that making assumptions is not bad in and of itself—it is normal and natural, regardless of whether the assumptions turn out to be right or wrong. The purpose of this activity is to help participants become more aware of their assumptions so that they can check to see if those assumptions are right or wrong. The next exercise will help participants to understand more about how assumptions work.

Small-Group Work and Large-Group Discussion—20 minutes

9. Give instructions. Distribute **Handout 7.3: Exploring Assumptions: Part 1** to each participant. Once again, ask them to choose which consumer they would prefer for an assignment. Have them circle the number in front of the consumer that they would choose and be prepared to explain why.

Teaching Tip

Remind participants that in most instances the consumers in this exercise would get their care through an agency. As direct-care workers employed by the agency, they would NOT in reality be able to choose their consumers. Note that they may have to work with all of these consumers at some point, but the question is to consider which one they would most prefer to work with, and why, in order to explore how assumptions work.



- **10. Set up small-group work.** After a few minutes, divide participants into small groups, with no more than four participants in each group. Ask participants to share with each other what case they chose and why they chose it. Ask them to select one person to report to the large group the reasons they chose the cases they did. Allow five minutes for group work.
- **11. Facilitate reporting back to the large group.** Ask the reporter from each group to share which cases were chosen in their groups and the reasons why.
- **12. Have the groups reflect on their choices and assumptions.** Now distribute **Handout 7.4: Exploring Assumptions: Part 2.** Give participants a few minutes without discussion to read the additional information about their consumer. Ask them to think about whether they would choose the same case after learning this new information, and why or why not. Then, ask them to share their thinking with their group. Again, someone should be prepared to report out for each group.

Teaching Tip

It might take some time to get the trainees to be able to articulate the reasons behind their choices. The small group setting should make it easier for participants to share their choices and their assumptions with each other. However, participants still may be uncomfortable talking about their negative stereotypes with each other, especially if a member of the group shares characteristics with the people in the case scenarios.

For that reason, participants may say that the new information does not change their decision. In that case, do not force the small groups to delve further, but gently address the issue during the large-group discussion.

13. Facilitate reporting back to the large group. Ask each group's reporter to summarize the discussion in their group, respecting confidentiality.

Large-Group Discussion—15 minutes

14. Facilitate a large-group discussion. Consider each consumer and ask participants to volunteer their responses to the following questions.



Ask:

For those who chose this consumer as their "most preferred" in "Part 1," what were your reasons? What assumptions did you make?

How does the new information in "Part 2" compare to your initial assumptions?

Would you still choose this case now? Why or why not?

For those who did not choose this consumer in "Part I," what were your reasons? What assumptions did you make?

Teaching Tips

Regularly reinforce that assumptions are not necessarily wrong and that making assumptions is normal. The goal is to be mindful of our assumptions and not act on them.

You need to make it safe for people to be honest about the reasons behind their choices. One effective way to do this is to model openness and curiosity about people's reasons and assumptions.

Issues of prejudice need to be addressed gently but directly. For example, a trainee may express discomfort about the gay couple, AIDS, or working with others who are different from them (e.g., who come from a different country). You need to be clear that employers such as home care agencies and nursing facilities have nondiscrimination policies (including discriminating against consumers because of their diagnosis). The point is not to get into a long discussion about stereotypes and prejudice, but to identify assumptions and their negative impact, and to be clear that, when working, participants must comply with nondiscrimination policies.

If no participants volunteer their responses to these questions, you may need to respond yourself, based on the group reports, or pose more general questions. For example, you might say, "People often choose the consumer whom they assume needs the most care, or has the least help, and later discover the consumer has many helpers, or is fairly independent. What



information in this case scenario would lead to assumptions about the consumer's level of need?"

- 15. Share how direct-care workers should manage their assumptions. Explain that assumptions are guesses based on limited information and may be right or wrong. However, whether right or wrong, as direct-care workers, they cannot afford to make decisions or take actions based on assumptions. In order to check if assumptions are true or false, the first step is to become aware of them. The second step is to explore the assumptions by asking the consumer to tell his or her story.
- 16. Wrap up the activity and transition to the next one. Note that everyone has had experiences with people making assumptions about them—based on how they look or how they talk or where they come from. However, each person has a unique life story, including each consumer. Valuing the uniqueness of each individual will provide a foundation for a caring relationship between the direct-care worker and the consumer. The next activity will give participants an opportunity to practice sharing their own stories.

Activity 7.3 Telling Your Story

45 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define culture and describe how it results in similarities and differences between people.

Explain how listening to a person's story can be an effective way to show respect and get beyond assumptions.

Experience the power of being listened to and explain the importance of effective listening skills.

Key Content

- Culture describes the traditions and beliefs passed on through families, communities, and heritage. Most people don't really think of their background as *culture* because it is what they grew up with and what they are familiar with. Whether participants embrace their cultures or feel separate from them, the traditions and beliefs of their family have probably influenced how they think of themselves in the world—and possibly how others see them.
- When a direct-care worker meets a consumer for the first time, they may know pieces of that person's story, but until that person reveals his or her whole story, it is hard to know the whole person. To find out what's true, it is important to be curious, to ask questions, and to listen to the answers. Learning more about a consumer, especially talking with the consumer directly, allows the direct-care worker to check his or her assumptions and to hear more of "the whole story" from that person's perspective. Then the direct-care worker can start building a relationship based on who the consumer really is, rather than on assumptions and stereotypes.



Listening to the consumer's life story may be useful in understanding and being able to work with personal differences. Some of these differences may be due to culture—for example, the role of the family, how elders are treated, how children are reared, foods, beliefs about health care and religion. Other differences may be due to the different times in which the consumer and the direct-care worker grew up.

Activity Steps

Interactive Presentation—15 minutes

- 1. Introduce the activity. Note that the "People Bingo" game showed the diversity and similarities among class participants. Some of the group's diversity is due to differences in cultural backgrounds. Sharing the stories of participants' backgrounds is one way to see each other's similarities and differences and to get beyond assumptions. Practicing this with each other will help participants to get beyond assumptions with consumers.
- **2. Define "culture."** Ask the group:

What comes to mind when you hear the word "culture"?

After a few responses, post the prepared flip chart page with the definition of culture. Ask someone to read the definition, and note how the group's responses relate to this definition. Review the first point in "Key Content" about culture.

Flip Chart

CULTURE

The traditions and beliefs passed on through your family, your community, and your heritage



- **3. Give instructions.** Explain that in this activity, participants are going to share their own stories from the perspective of their cultures and its influence on their lives. Distribute **Handout 7.5: Tell Your Story**. Explain that this is meant as a guide. Participants can choose what to share and how much to share about themselves. Each participant will have 5 minutes to tell their story to one other participant, who will practice listening.
- **4. Demonstrate the activity.** Show how to use the handout by telling your own story. Ask a participant to watch the time for you and stop you after 5 minutes.

Teaching Tips

This is very important in setting the tone for personal disclosure and risk-taking. How much one shares, and what one shares, will determine the level of emotional intensity for this activity.

It is important to share in a non-judgmental and open way about your own culture—to model what you are hoping for participants to identify within themselves.

It is important to use "I" statements to emphasize that what you are sharing is from your own perspective on your culture.

5. Ask participants to complete the handout. Give participants a few minutes to fill in their worksheets and to think about what they want to share. Note that some people may identify with more than one culture; they may choose to talk about either one, or both.

Pairs Work—15 minutes

6. Set up and conduct pairs work. Ask participants to form pairs with someone they have just met in this training. Repeat the instructions:

Each person will have 5 minutes to share his or her story based on the worksheet while the other person listens without interrupting. If the speaker is finished before 5 minutes, the listener can ask questions based on what was shared.



Note the time and start the activity. Let participants know when it is time for the second person to start sharing.

Teaching Tips

Emphasize the importance of good listening. Sharing something personal about yourself or your life sometimes feels hard or risky because you feel exposed. It is much easier when you know people are really interested and when they listen fully and respectfully.

Monitor the pairs to see that the listeners are listening. Five minutes can seem like a long time for one person to talk without interruption. If everyone has finished talking before 5 minutes, you can start the second person sharing.

If people share difficult experiences that are recent or current, a natural "caregiving" response is to try to solve their problems for them. However, the listeners' role is to listen—not to give advice. Remind participants about the importance of their listening role if this seems to be happening.

7. Encourage pairs to discuss what was shared. After everyone has shared, give the pairs several more minutes to ask questions, respond, or talk with each other.

Large-Group Discussion—15 minutes

8. Facilitate a large-group discussion. Begin by reminding the class of the importance of confidentiality—specifically, they are to talk about *their own* experience of sharing, and not share the other person's story. Ask the following questions:

How did it feel to share your story?

How did it feel to be listened to?

How did it feel to be the listener?



Teaching Tip

Participants will likely mention that they feel like they know each other better and will directly, or indirectly, acknowledge the assumptions they had made. You want to encourage this open discussion without putting the spotlight on anyone. Focus the discussion on the surprises and similarities people discovered. Participants may also talk about how separate they felt until sharing their stories.

9. Lead a discussion on listening to consumers' stories. Ask:

How do you think this activity might apply to working with a consumer?

Teaching Tip

In this discussion, you want to cover the last bullet in "Key Content."

- **10. Summarize the lessons of this activity.** Note that working in such a diverse world requires being respectful of each other's culture, values, and beliefs. Emphasize that each person is unique and people don't always need to have a lot in common in order to form and maintain a relationship. One way to learn about both our similarities and differences is to listen to each others' stories. This applies to getting along with coworkers as well as consumers.
- 11. Distribute and review Handout 7.6: Showing Respect.



Activity 7.4 Affirmations

45 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define "affirmation" and explain how affirmations can help people move past negative feelings of low self-esteem and focus on a situation clearly, rather than reacting impulsively or defensively.

Identify strengths that will help them on the job.

Create an affirmation based on their strengths.

Key Content

- Everyone's life story is full of things that went well and things that did not go well. Events that did not go well may have left participants feeling unworthy or unsure of themselves in particular situations. Some of the challenges of being a direct-care worker may remind participants of difficult situations in the past and may bring up feelings of low self-esteem.
- No one is perfect but everyone has some good qualities and strengths that have helped them get through some of life's challenges. Remembering these qualities and strengths may help participants deal with the challenges of their new work.
- "Affirmations" are statements that recognize and reinforce the good qualities and strengths that a person has. Affirmations can be used to help a person feel more selfconfident in a new or challenging situation.



Activity Steps

Interactive Presentation—10 minutes

- 1. Explain the first point from Key Content. Note that everyone's life story is full of things that went well and things that did not go well. Some of the events that did not go well may have left participants with negative feelings that make them feel unworthy or unsure of themselves. Some of the challenges of their work may bring up these negative feelings associated with difficult situations in the past.
- **2. Introduce "affirmations."** Explain that, while no one is perfect, everyone has good qualities and strengths that have helped them get through life's challenges and can help them deal with the challenges of their new work. It can be very helpful to replace those negative feelings from past experiences with positive statements, or "affirmations." Post and review the prepared flip chart page.

Flip Chart

<u>AFFIRMATIONS</u>

Something you say to yourself to give you confidence in a new or challenging situation.

An affirmation has two parts:

- A strength or quality you like about yourself—"I am..."
- An action statement—"I can" or "I will."

I can handle this

I can do this

I will succeed

I will make this work



3. Give and ask for examples. Give an example of an affirmation about yourself, related to the training. Ask participants for examples of qualities they like about themselves that will help them on the job.

Teaching Tip

Sometimes participants may have a hard time expressing a positive quality about themselves in general and/or specifically related to training. For example, they may want to say "I'm a good mother," which may be true but may not help in a work situation. You can follow that up by asking them to name the qualities that they use in being a good mother that could help them on the job. Possible responses include patience, kindness, caring, being helpful, etc.

Individual Exercise—15 minutes

- **4.** Have participants identify personal strengths. Distribute Handout 7.7: Create an Affirmation. Ask participants to do just the first part, writing five qualities they like about themselves. Give them a few minutes.
- 5. Practice using affirmations. After participants have stopped writing, give an example of a challenging work situation. For example, a consumer throws a washcloth at the direct-care worker and says, "You don't know how to bathe me! Didn't they teach you anything in training?" Now, ask them to pick two qualities from their list that could help them get through that situation, and write those qualities on the worksheet (number 2) in a statement starting with "I am."

Teaching Tips

While participants are writing, quickly go around to each person to check that what they are writing is positive, will work for them, and will be useful in a work context.

This example may help participants to understand the exercise better; they may find that their original list does not apply well to this situation. If so, encourage them to add to their list of qualities to include ones that will help them in this situation.



6. Instruct participants to develop action statements. Once everyone has an "I am" affirmation statement, ask participants to think of an action statement that would help in the above situation. Explain that an action statement might start with "I can" or "I will." Refer to the examples on the flip chart page. Ask participants to write their action statements on the worksheet as number 3.

Teaching Tip

As before, quickly check while participants are writing. It is important for participants to have clear statements that will work for them, both for the end of the activity and for the remainder of the training.

7. Have participants complete the handout. Once everyone has an action statement, ask them to combine it with an "I am" statement to form a complete affirmation, which they write at the bottom of the worksheet (Number 4).

Pairs Exercise—5 minutes

8. Set up and conduct pairs work. When they are finished writing, ask participants to team up with the person sitting next to them, and say their affirmation statement to their partner—and say it like they mean it!

Teaching Tip

If you have a small group, you may want to skip having participants practice saying their affirmations in pairs, and go to Step 9. Otherwise, this may seem repetitive. Also, it may be easy to overhear participants saying their affirmations in pairs, and that can be distracting.

Large-Group Exercise—15 minutes

9. Facilitate a go-round. Once the pairs are finished sharing their affirmations, ask all participants to stand. Ask each participant to say his/her affirmation, with confidence. After each one, all participants will applaud.

Teaching Tip

It is important for each participant to say his or her affirmation and hear the applause.



10. Encourage participants to integrate this practice into their lives. Explain that participants can change their "I am" and action statements at any time, but they should always have an affirmation ready for any situation. Note that the training itself may present challenging situations for participants, and that they may want to have an affirmation specifically for the training. One example could be—"I am committed to becoming a good direct-care worker, and I can learn this!"

Teaching Tip

If there is enough time, involve participants in developing an affirmation for the training experience. In a large-group discussion, ask them to brainstorm "I am" and "I can" statements. Write their ideas on a flip chart page to keep posted throughout the training, as a constant reminder.

Instructor's Guide, Activity 7.1 People Bingo Icebreaker

Objective:

To enable participants to meet as many people as possible in a short time, and to learn characteristics that would not be obvious from looking at each other.

Advance Preparation:

Use Handout 7.1: People Bingo: Sample Card or develop your own bingo card on which each space is filled with a short phrase that describes at least one of your participants.

How to Play:

Give one card to each participant. The objective is for participants to mingle with others and get signatures from other participants on spaces that describe those participants. Even if someone fits more than one category, each person can only sign a card one time.

"Bingo" is achieved when all the spaces in one row, one column, or one diagonal have been signed. The "Free" space can be used for Bingo. The first person who achieves this calls out "Bingo!" and is the winner. If no one achieves "Bingo" in the time allotted, the person who has the most signatures is the winner.

Smaller Groups (i.e., 12 or fewer participants):

With small groups, it is less likely that anyone would get "Bingo." In this case, you could allow each person to sign a card twice. However, in order to encourage participants to get to know each other, you could require that they would have to get every participant's signature, before going back to anyone for a second time.

Larger Groups (i.e., 25 or more participants):

With a large group and plenty of time, you could define "Bingo" as filling in ALL the spaces on the card. Remember, if you want participants to complete the entire card, the number of spaces must be fewer than the number of participants and each space must apply to one of the participants.



Module 7. Respecting Differences¹

Handouts

Activity 7.1: People Bingo

Handout 7.1

People Bingo: Sample Card

Activity 7.2: Exploring Assumptions

Handout 7.2 Who Would You Choose?

Handout 7.3

Exploring Assumptions: Part 1

Handout 7.4

Exploring Assumptions: Part 2

Activity 7.3: Telling Your Story

Handout 7.5 Tell Your Story

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Module **7.** Respecting Differences

Handout 7.6 Showing Respect

Activity 7.4: Affirmations

Handout 7.7 Create an Affirmation

People Bingo: Sample Card

I have cared for a sick family member	I ride a bike	I sing	I enjoy swimming	I walk to work
I have 2 children	I have a cat	I take the bus to work	I speak another language	I have a dog
I have grandkids	I have worked in health care	FREE	I like to dance	I love vegetables
I hate vegetables	I hate sports	I love movies	I drive a car	I love basketball
I have a library card	I have teenage children	I have a baby less than a year old	I play a musical instrument	I love football

Who Would You Choose?

Read about these consumers.

Write "1" by the person you would like to care for <u>most</u>. Write "3" by the person you would like to care for <u>least</u>. Write "2" by the other person.

___ Consumer A

This consumer is staying in a nursing home just until she gets better after knee surgery. She is eager to get back to her life outside. She wants to do as much as she can by herself.

Consumer B

This consumer rings the call bell every 5 to 10 minutes. She always tells you clearly what she needs. She worries a lot.

Consumer C

This consumer is 96 years old. She and her husband were married for 65 years. They were very close. Her husband died recently, and she is grieving. She cries often, especially at night.



Exploring Assumptions: Part 1

Read about these consumers. Circle the <u>one</u> person you would most like to care for.

- 1. Billy is 53 years old and white. Since his stroke, he can't leave his bed. You will help his wife take care of him. The case notes say there was verbal and physical abuse between them before the stroke.
- 2. Song-Li is 78 years old and Asian. She lives with her sister and niece in a suburb. Her hip was replaced recently. She needs help with personal care, light housekeeping, and cooking.
- 3. Alma is 18 years old and Hispanic. She has a lung problem that doesn't go away. She needs care all the time. She also needs help getting around her house. She speaks very little English.
- 4. Will is 49 years old and black. He can't move his lower body, so he needs to use a wheelchair. He needs a little care. The person he lives with works full time and takes care of 2 small children.
- 5. Sybil is 82 years old and black. She has Parkinson's disease. She lives with 10 people who are not family members in an inner-city row house. She needs help getting around, using the toilet, and eating.

Why did you choose that person?



Exploring Assumptions: Part 2

Read more about the same consumers.

- 1. Billy's wife yells at him and hits him. She has been verbally abusive to previous personal care workers.
- 2. Song-Li's house is filthy. There is very little food there. Song-Li's sister and niece don't seem to help her at all.
- 3. Alma weighs 300 pounds. She needs help to use the toilet. She has no family nearby.
- 4. Will's housemate is a man named Paul. Paul is 28 years old. Will and Paul have been a couple for 10 years. They adopted the children 4 years ago.
- 5. Sybil was a teacher and active in her town before she got sick. She has no children. But she has taken care of 35 foster children over the years. She lives with 2 of her foster daughters and their children. The foster daughters take care of her.

Would you choose the same person to care for that you picked in Part 1? Why or why not?



Tell Your Story

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What is your culture?

What beliefs and traditions affected you most as you grew up?

How does your culture affect the way you live your life now?

Differences

How is your culture different from other cultures that you come in contact with?

How do you think these differences might affect your work?

Strengths

In what ways has your culture made you a better person?

How can these strengths help you do your job better?



Showing Respect

Handout 7.6

Page 1 of 2

People like to be treated with respect. Read how these workers show respect for the people they care for.

Rashan's tip—Learn about a person's culture.

"I try to find out everyone's culture. Mrs. Levy is Jewish and keeps kosher. Pork isn't allowed on a kosher diet. So I make sure there isn't any ham or bacon on her plate when I bring her breakfast tray."

Kiki's tip—Remember the individual.

"It's great to think about culture. But it's also important to think about the person. People assume things about me because I'm Latina. Yes, I am Latina—but I'm also me."

Malek's tip—If you're confused, ask.

"I got this job soon after coming to the United States. Everything seemed so strange—the language, the customs. I was very confused, but I didn't want to offend anyone or sound dumb. So I would pretend I knew what was going on. But I made a lot of silly mistakes from doing that! Now I know it's OK to ask."

Vincent's tip—Watch what you say.

"When I was growing up, my family used to make fun of some groups of people. Even now my friends often tell jokes that make fun of another race or culture. Once I started working here, I found out that's not OK to do. It's also not fair. People are much more than the color of their skin or what language they speak."

Mirena's tip—Keep an open mind.

"I used to think people who looked or acted differently from me were just wrong. But my attitude changed after I started working here. I've gotten to know so many cool people from many different backgrounds. And you know what? Those differences are what make life interesting."



Showing Respect

Handout 7.6

Page 2 of 2

Review—Showing Respect:

- 1. Learn about a person's culture.
- 2. Remember the individual.
- 3. If you're confused, ask.
- 4. Watch what you say.
- 5. Keep an open mind.

Create an Affirmation

For this activity, you will write a short statement that you repeat to yourself to help you when you are in a tough situation at work. This statement is called an "affirmation."

Answer these questions as honestly as you can.

•	 	
•	 	

2.	Which $\underline{2}$ qualities would be most helpful in a tough situation at	work?
	For example, "I am kind and patient."	

3. Now write 1 thing you can do in a tough situation at work.	For example,
"I can try my best."	

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4. Now put these 2 sentences together. This is your affirmation.

I am _____ and

I can _____.

Providing Personal Care Services to Elders and People with Disabilities¹

Module 8. Communication: Listening and Talking Skills

Goal

The purpose of this module is to improve participants' ability to communicate with consumers by developing three key skills: listening, paraphrasing, and asking open-ended questions.

Time

3 hours and 30 minutes (includes 30 minutes for opening, closing, and break)

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Activities	Teaching Methods	Time
Opening		10 minutes
8.1 Listening Well	Interactive presentation, demonstration role plays, large- group discussion, and pairs work	40 minutes
8.2 Paraphrasing—Saying It in Your Own Words	Demonstration role play, large- group discussion, and pairs work	40 minutes
Break		10 minutes
8.3 Asking Open-Ended Questions	Demonstration role plays, large- group discussion, brainstorming, and pairs work	40 minutes
8.4 Communication Skills Practice	Demonstration role plays, large- group discussion, pairs work, and practice role plays	1 hour
Closing		10 minutes

Supplies

- Flip chart, markers, tape
- Paper and pencils
- Index cards

Handouts

- Handout 8.1 Listening Well: How It Helps
- Handout 8.2 Talking with Your Body
- Handout 8.3 Saying It in Your Own Words: Getting Started
- Handout 8.4 Saying It in Your Own Words: Practice
- Handout 8.5 Saying It in Your Own Words: How It Helps
- Handout 8.6 Asking Closed and Open-Ended Questions
- Handout 8.7 How Communication Skills Help
- Handout 8.8 Listening and Talking Skills: Practice



Advance Preparation

Review all training and presentation materials for this module.

Copy all handouts for participants.

Opening

Plan an appropriate opening activity for this module. If this is the start of a new day of training, some kind of warm-up activity might be good to help focus participants' attention on being back in the learning environment. If this is a continuation of a full-day session, resuming after lunch, a quick energizer might be useful to refocus participants mentally and physically after eating.

Activity 8.1 Listening Well

This activity begins with demonstration role plays. If you are the only instructor, identify a participant or another staff member to help with the role plays. Prepare the person in advance by describing the purpose of the activity and his or her role. Ask the person to think about something important that happened recently to him or her that can safely be shared with the group. This activity works best if the speaker shares something that is current and important, but the person should also be comfortable sharing this story with the whole group.

Prepare the following flip chart pages:

- "What Is Communication?" (Step 1)
- "Learning Agenda" for Module 8 (Step 2)



Activity 8.2: Paraphrasing—Saying It in Your Own Words

Prepare a flip chart page for "Paraphrasing" (Step 4).

Like "Listening Well," this activity begins with a demonstration. If you are the only instructor, identify a participant or another staff member to help you. Prepare the person in advance by describing the purpose of the activity and his or her role. Ask the person to think about a problem that he or she recently resolved that can safely be shared with the group. Be clear that you will keep interrupting to paraphrase, and that he or she should let you know if you have correctly caught the meaning of what has been said.

Activity 8.3: Asking Open-Ended Questions

Prepare the following flip chart pages:

- "Closed Questions...Open-Ended Questions" (Step 6)
- "Getting to Know Someone: Questions to Ask" (Step 7)

Activity 8.4: Communication Skills Practice

This activity includes a demonstration role play. If you are the only instructor, identify a participant or another staff member to help you. Prepare him or her ahead of time by describing the purpose of the activity and his or her role. Select one of the case scenarios from **Handout 8.8: Listening and Talking Skills: Practice** to use for your demonstration.

Closing

Plan an appropriate closing activity for this module. Ask participants to reflect on what they have learned and how they can use it in their work or in their lives. If this was the second module of the day's training, include both the morning and afternoon modules in participants' reflections. Ask for remaining questions. If time allows, address them in this session; if not, post them in a "Parking Lot" list. Set the stage for the next module by noting the general topic and any logistical notes, such as date and time, as needed. (See the "Closing" for Module 1 as a guide.)



Activity 8.1 Listening Well

40 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define communication.

Describe the nonverbal cues (body language) used in effective listening.

Describe how it feels when someone is really listening to us vs. when they are not.

Explain the importance of effective listening in direct-care work.

Key Content

- Two definitions for communication are: 1) the exchange of information between individuals and 2) the establishment of rapport. The accurate exchange of information is important for providing quality care. Establishing rapport is important for developing and maintaining relationships with consumers, family members, coworkers, and supervisors.
- Listening is one of the skills necessary for clear communication. When people listen effectively, they give the speaker their full attention and they really *hear* the speaker. Equally important, the speaker feels that she or he has been heard.
- Everyone has the capacity to listen effectively and can improve through practice. Unfortunately, the skills for effective listening are rarely taught. Therefore, most people are generally not very good listeners and we are not used to being listened to well.



- Body language—or nonverbal communication—can communicate messages just as words can. For example, people indicate with their body language whether they are really listening or not—whether they intend to or not.
- It is important to be aware of and manage one's body language because people often respond more to nonverbal communication than to what was said.
- Listening well is a vital skill in direct-care work because, when people listen with their full attention, they understand better and remember more of what is being communicated, whether from a supervisor, co-worker, or a consumer.
- Being listened to attentively feels caring and helpful to a consumer. Not being listened to feels hurtful and disrespectful.

Activity Steps

Interactive Presentation—5 minutes

1. **Define "communication**." Ask participants:

What does "communication" mean to you and why do we communicate?

After a few responses, post the prepared flip chart page with the definition of communication. State that the "information" exchanged can be facts, feelings, ideas, or opinions. Note that people communicate both verbally—with words— and nonverbally—with body language.



Flip Chart

WHAT IS COMMUNICATION?

- Exchanging information between individuals—e.g., by speaking, writing, or using a common system of signs or behaviors
- Establishing "rapport, " or a sense of mutual understanding and sympathy
- **2. Lead a large-group discussion**. Ask participants:

How is communication important for direct-care work?

Guide the discussion to cover the first bullet in "Key Content."

3. Share the learning agenda for this module. Post the prepared flip chart page with the learning agenda for Module 8. Note that the goal of this module is to improve participants' ability to communicate with consumers by developing three key skills: listening, paraphrasing, and asking open-ended questions.



Flip Chart

LEARNING AGENDA: MODULE 8 Communication: Listening and Talking Skills

- Develop listening skills and an awareness of body language
- Explore and practice paraphrasing
- Develop skills of asking openended questions to clarify and learn more from consumers

Demonstration Role Plays and Large-Group Discussion—10 minutes

4. Assess participants' knowledge. Ask:

Why is listening important for communication?

- 5. Set up the first role play. After a few responses, explain that this session will help participants to explore the role of nonverbal listening cues in communication, beginning with a demonstration role play. Ask the volunteer staff person or participant (see Advance Preparation) to come forward. Explain that you are going to demonstrate listening while this person tells you about something important that recently happened to him or her. Ask participants to observe what "the listener" is communicating to the speaker and how that is being communicated.
- **6.** Conduct the role play for 2 minutes. As the speaker tells his or her story, the "listener" (the instructor) should act increasingly distracted, demonstrating poor non-verbal listening skills.



Teaching Tips

In this first role play, exaggerate poor listening skills by avoiding eye contact, fidgeting, playing with your papers, or checking your cell phone. In this case, one of your non-listening cues can be watching the time so that you can stop the role play after two minutes.

One of the challenges of being the only instructor is making it clear to the participants (and to yourself!) when you are acting as a role player and when you are being the instructor. You may need a few cues or moments of transition between those roles. Some suggestions for transitioning include:

- Stand in different places when you're facilitating a discussion from when you're in a role play.
- Use a prop—e.g., a hat or scarf or sweater—to indicate when you're in the role play.
- Make a comment to the group about the transition—e.g., "Okay, the role play is over—let's discuss what you observed."
- 7. **Debrief the role play.** After the role play, ask the following questions:

How well do you think the listener was listening?

What was the listener communicating to the speaker?

How did the listener communicate that?

Ask the speaker:

How did you feel during this communication?

8. Conduct the second role play. Ask the "speaker" to continue his or her story. This time, demonstrate attentive nonverbal listening skills. Ask a participant to watch the time and to say when 2 minutes has passed.



Teaching Tips

Demonstrate nonverbal listening skills by keeping eye contact, leaning toward the speaker, nodding, using appropriate facial expressions, and saying things like "uh-huh," "really," and "okay."

It may be tempting to ask questions of the person telling the story, but to fully demonstrate the effectiveness and impact of nonverbal communication do not do this.

9. Debrief the role play. Ask participants:

How well was the "listener" listening this time?

What was the listener communicating to the speaker?

How was that communicated?

Ask the speaker:

How did you feel this time?

List the nonverbal cues on a flip chart page labeled "Listening Well."

Flip Chart	
	LISTENING WELL



10. Help participants make the connection between body language and active listening. Ask:

What does "body language" mean to you?

What examples of body language did you see in these two role plays?

What have you learned from this activity about the role of body language in letting people know you are listening?

11. Summarize the two role plays. Explain that these two demonstrations show the impact of "nonverbal communication"—or body language—on listening. The first role play showed poor listening, while the second one showed effective listening.

Pairs Work and Large-Group Discussion—20 minutes

12. Introduce pairs work. Explain that participants will now have an opportunity to become more aware of their own body language and to experience for themselves the impact of poor vs. effective listening.

13. Give instructions and then ask participants to role play:

- Quickly form pairs.
- Agree on one partner to be the speaker, the other the listener. (They will switch roles later.)
- Speakers should think of something personally important and safe to share. They will speak for 2 minutes.
- Listeners should use their body language to exaggerate distracted or *poor* listening, remembering what was demonstrated in the first role play.
- **14.** Conduct debriefing in pairs. After 2 minutes, ask the speakers to stop. Both members of the pair should briefly share with each other how they felt.



15. Lead a large-group debriefing. In the large group, ask the following questions:

Ask the speakers:

How did it make you feel to not be listened to?

What happened to your story while you were telling it?

Ask the listeners:

How did you feel in your role as "poor listener?"

How much do you remember of what you were told?

Teaching Tip

Some participants may become angry when they are blatantly not being listened to. Be prepared to acknowledge anger or other emotions, and remind participants that this is an exercise—the poor listeners in this activity are simply playing a role.

16. Conduct a second role play in pairs. Repeat the role play and discussion, but, this time, ask the listener to use *effective* nonverbal listening skills (referring to the flip chart page, Step 9) and to pay careful attention. Debrief in the large group as before, asking both "speakers" and "listeners":

How did this role play feel different from the "poor listening" role play?

17. Instruct participants to switch roles and repeat the process. In order to give everyone the experience, switch roles in each pair and repeat the two role plays. Allow time for brief feedback within the pairs after each role play. At the end, in the large group, ask how it felt to be in the opposite role (i.e., speaker vs. listener), and if anyone has any additional insights they would like to share.



Interactive Presentation—5 minutes

18. Summarize participants' feedback. Repeat the primary points participants have made (i.e., the negative feelings that came up when not being listened to and the satisfaction of being well listened to). Ask participants:

Based on your experience here, why do you think effective listening is important in direct-care work?

19. Review key points. After a few responses, distribute and review Handout 8.1:

Listening Well—How It Helps. Also distribute Handout 8.2: Talking with Your
Body and note that body language is important with all communication skills—not just listening.

Activity 8.2 Paraphrasing—Saying It in Your Own Words

40 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Define and demonstrate paraphrasing.

Describe how paraphrasing improves communication.

Key Content

- Paraphrasing is a communication skill that focuses on reflecting and clarifying information and/or feelings. Paraphrasing means stating in one's own words what someone else has just said or expressed. The purposes are to confirm or clarify the message the speaker is trying to communicate and to acknowledge that the listener has heard him or her accurately.
- Paraphrasing improves communication in five important ways:
 - 1. People deeply appreciate feeling heard (recall "effective listening").
 - 2. Paraphrasing prevents miscommunication. False assumptions, errors, and misinterpretations can be corrected on the spot.
 - 3. Paraphrasing helps the listener to stay focused on clearly understanding what the speaker is saying.
 - 4. Paraphrasing helps the listener remember better what was said.
 - 5. Paraphrasing can stop anger and cool down a crisis because the focus is on clarifying information rather than on reacting to the situation.



Activity Steps

Demonstration Role Play and Large-Group Discussion—15 minutes

- 1. Introduce the activity. Explain that in this activity, participants will further strengthen their communication skills. Ask the participant volunteer for this session to come forward (see Advance Preparation). Explain that you and the volunteer are going to have a conversation about a problem the volunteer recently resolved. Ask participants to observe what happens in the conversation.
- **2. Conduct the conversation.** Ask the volunteer to begin talking. After 30 seconds or so, stop the volunteer (the speaker) and repeat back in your own words what you heard the speaker say. The speaker should say if you understood correctly, and then either clarify or continue the story. Repeat this sequence two or three times. End the demonstration after about 3 minutes.

Teaching Tips

Don't use the word "paraphrasing" in these initial steps. The idea is to show participants that paraphrasing is something they may already routinely do in a conversation. If the word is new to participants, they may feel intimidated by it and not realize this is something they already do.

You should intentionally paraphrase incorrectly one time, to demonstrate how paraphrasing can help to clear up confusion.

Invite participants to share their observations. Ask:

What did I do after listening to parts of the speaker's story?

What did the speaker do when I did not get the story exactly right?

What effect do you think this repeating and clarifying had on the conversation?

3. Define "paraphrasing." Explain that "paraphrasing" is repeating in one's own words what a person has said. Post the flip chart page with the definition and purposes of paraphrasing.



Flip Chart

PARAPHRASING

Definition:

Saying in your own words what you heard someone say or express

Purposes:

To confirm or clarify what the other person means

To show that you have heard the other person.

4. Facilitate a discussion. Ask participants to name some of the words and phrases they heard you use during the role play that initiated paraphrasing. Ask for ideas about other phrases that could be used. Distribute **Handout 8.3: Saying It in Your Own Words: Getting Started** and note any phrases that are not on the list.

Large-Group Discussion and Pairs Work—10 minutes

5. Have participants practice paraphrasing. Explain that participants will now try paraphrasing in a work situation. Distribute **Handout 8.4: Saying It in Your Own Words: Practice** and read the instructions aloud. Read the first consumer's statement, and ask for volunteers to try paraphrasing.

Teaching Tip

If a participant does not accurately paraphrase what you said, give feedback and encourage him or her to try again. If he or she seems really stuck, ask if another participant can help out.



6. Set up pairs work. After demonstrating with two quotes, ask participants to form pairs. Ask them to work together to write a paraphrase statement for each of the remaining quotes.

Teaching Tip

If participants are struggling with the concept, continue this activity in the large group. If you need more quotes for demonstration purposes, use some from **Handout 8.8: Listening and Talking Skills: Practice**.

Large-Group Discussion—15 minutes

- **7. Facilitate reporting back to large group.** When the pairs have finished working, ask them to share their work. Read one statement aloud and ask one pair to read their paraphrase statement. Give feedback and ask for other ideas for how to paraphrase. Encourage their efforts, while making sure that the paraphrasing is effective (i.e., not simply repeating). If necessary, help modify the paraphrases.
- **8. Debrief.** Ask participants:

How did it feel to paraphrase?

What specific aspects of the task felt hard (if any)?

How do you think paraphrasing could improve communication between directcare workers and consumers?

- **9. Summarize the activity.** Emphasize that, as with any skill, paraphrasing may seem awkward at first, but participants can gain confidence in paraphrasing through practice, both on the job and elsewhere. Note that there will be more chances to practice later on.
- 10. Distribute handout. Pass out and review Handout 8.5: Saying It in Your Own Words: How It Helps.



Activity 8.3 Asking Open-Ended Questions 40 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

Explain the difference between closed and open-ended questions.

Explain the importance of using open-ended questions to communicate with consumers.

Create open-ended questions that will be useful in direct-care work.

Key Content

- Closed questions usually generate short facts or yes/no answers. Open-ended questions encourage responses that include feelings, opinions, descriptions, or explanations. Open-ended questions usually begin with "how," "what," or "why?"
- In direct-care work, sometimes workers need to ask closed questions to get specific information from consumers. However, open-ended questions are much more effective when the worker needs to know about the consumer's thoughts, feelings, or experiences. Such information may be difficult to obtain using closed questions, especially if the consumer is having problems and is hesitant to talk about the situation.



Activity Steps

Demonstration Role Plays and Large-Group Discussion—15 minutes

- 1. Set up the demonstration. Ask for a volunteer to help with this activity. Begin by explaining that you are going to ask the volunteer some questions. The content of the answers doesn't matter, but participants should observe the style of the questions and the types of answers such questions generate.
- **2.** Conduct the demonstration. For about 30 seconds, ask your volunteer a series of closed questions—e.g.:

Are you feeling okay?

Are you enjoying the workshop?

Are you nervous right now?

Is it too hot in the room?

- **3.** Lead a large-group discussion. After the questions and answers, ask the other participants what they observed about the kinds of questions you were asking and the kind of answers you got. After a few responses, move on to the next step, explaining that you will repeat the exercise but with a difference. Ask participants to observe how it is different.
- **4. Conduct the next demonstration.** Ask the volunteer similar questions, but make them all open-ended, e.g.:

How do you think the workshop is going so far?

How do you feel about the temperature in the room right now?

What are your feelings about doing this role play with me?



- **5.** Lead a large-group debriefing. Thank the volunteer for helping you with this exercise. Then ask the other participants: "What do you think is different about the questions I asked this time and the ones I asked before?" Follow up by asking, "How were the answers different?"
- **6. Define the two types of questions.** Display the prepared flip chart page. Discuss the points, referring to the demonstration for examples.

Flip Chart

CLOSED QUESTIONS:

- Begin with did, do, are, is, when
- Answered by "yes" or "no" or simple facts
- Stop the conversation
- Require many questions to get the full story

OPEN-ENDED QUESTIONS:

- Begin with how, what, or why
- Clarify information
- Keep the conversation open
- Allow people to tell their story

Brainstorming and Large-Group Discussion—15 minutes

7. Set up and conduct a brainstorm. Explain that asking questions—showing curiosity and concern about someone—is important in building any new relationship. In later



modules, participants will learn more about the importance of building a relationship with the consumer. For now, ask them to think about meeting someone—anyone—for the first time. Ask them to brainstorm the kinds of questions they would ask to get to know more about that person. Write the questions on several flip chart pages, *with the exact wording* that participants use.



GETTING TO KNOW SOMEONE: QUESTIONS TO ASK

Teaching Tips

It is important to write the exact wording that participants use because the questions will be rewritten to make them more open.

Leave several lines blank under each question to have enough room for rewriting.

If participants have trouble thinking of questions, suggest topics like —family, hobbies, favorite foods, and routines.

8. Practice categorizing questions. Looking at the first question you recorded on the flip chart, ask participants if it is open-ended or closed. Refer back to the flip chart with guidelines for open-ended and closed questions.

Teaching Tip

If participants are still confused, ask the question of one of the participants and see what kind of an answer they give (either long or short). If it is a closed question, show how to turn it into an open-ended question, and write the new, open-ended question underneath the closed question.



9. Practice evaluating and rephrasing questions. Continue with the next few questions, asking participants if they are open-ended or closed. For each closed question, ask participants to reword it as an open-ended question, guiding the discussion to help them if necessary. Once they get it, write the new open-ended question beneath the closed one.

Teaching Tip

Some closed questions—e.g., "Where do you live?"—do not make sense as an open-ended question. In that case, encourage participants to follow up with an open-ended question—e.g., "How do you like living there?"

Pairs Work and Large-Group Discussion—10 minutes

10. Set up and conduct pairs work. Have participants form new pairs. Assign one or two of the remaining closed questions on the flip chart page to each pair, asking them to make each one open-ended.

Teaching Tip

If most of the participants are struggling to understand the concept of openended questions, you can continue doing this in the large group.

- 11. Facilitate reporting back to the large group. After a few minutes, ask them to share their open-ended questions. Correct or revise as necessary, and write the open-ended version under the closed question.
- 12. Wrap up the activity. Distribute and review Handout 8.6: Asking Closed and Open-Ended Questions and Handout 8.7: How Communication Skills Help.



Activity 8.4 Communication Skills Practice 1 hour

Learning Outcomes

By the end of this activity, participants will be able to:

Demonstrate active listening, paraphrasing, and asking open-ended questions in order to more effectively manage challenging situations.

Key Content

- The communication skills that have been discussed in this module are keys to setting the stage for effectively handling challenging situations:
 - Listening well helps workers to hear better what consumers are trying to say and reassures consumers that they are getting their workers' full attention.
 - Paraphrasing shows that the worker understands and allows the worker to clarify the consumer's meaning.
 - Asking open-ended questions helps the worker to get sufficient information to accurately describe a challenging situation and to explore possible ways of addressing it.
- While these skills may seem awkward now, after practice they will become second nature. Practice helps participants to learn. Using these skills in the classroom, with co-workers, and at home will help participants to apply the skills better when working with consumers.

Activity Steps

Demonstration Role Play and Large-Group Discussion—15 minutes

- 1. Review the skills taught in this module. List the communication skills that have been discussed so far and ask participants how each one would help in understanding a challenging situation or solving a problem with a consumer. (See Key Content)
- 2. Introduce the activity. Explain that the purpose of this activity is to allow participants to practice using these communication skills in a challenging situation with a consumer. Note that managing our emotional reactions is also part of listening well, and they will learn more about that skill later on in the training. For now, if one of the practice remarks triggers a strong emotion, they should do their best to move past their first emotional reaction and try to focus on using their listening and talking skills.
- 3. Set up a role play. Note that you will first demonstrate how participants can use the skills they have learned in this module. (Use one of the case scenarios from **Handout 8.8: Listening and Talking Skills: Practice**.) Set the stage by explaining that you are playing the role of a direct-care worker who is asking your consumer what you can do for him or her today. Ask your "assistant" (see Advance Preparation) to come forward, and introduce him or her ("This is my consumer, Mrs. or Mr. ...").
- **4. Conduct the role play and debrief.** Demonstrate listening, paraphrasing, and asking open-ended questions. Then, thank your volunteer. Ask participants:

How did you know I was listening?

How did I paraphrase?

What open-ended question did I ask?

How do you think the consumer was feeling about this interaction?



5. Emphasize the purpose of role play. Note that in these role plays, the focus is only on the communication skills and that the role play stops after you use them. This may feel awkward and incomplete, but the purpose here is to practice the skills—problem-solving will come later.

Pairs Work—10 minutes

6. Set up pairs work. Divide participants into pairs. Distribute **Handout 8.8: Listening and Talking Skills: Practice** and assign one scenario to each pair. Explain that they will have less than 10 minutes to prepare for a role play. They should decide which one of them will play the role of the consumer and which one will play the role of direct-care worker.

Practice Role Plays—35 minutes

- 7. Conduct the first role play. Ask for one pair to volunteer to go first. Designate an area of the classroom for the role plays, and ask the role players to come forward. Ask those who are watching to be supportive of their classmates by paying attention and not interrupting the role play. Read the pair's case scenario aloud, and then ask them to start the role play. Remind them to concentrate on the communication skills and not try to solve the problem.
- **8. Debrief the role play.** Stop the role play after the "direct-care worker" has demonstrated the three communication skills—or become stuck. Give feedback on what the "direct-care worker" did well and what he or she could improve upon. Spend about 5 minutes for each role play, including discussion.

Teaching Tips

Do not overwhelm participants with negative feedback. Emphasize what they have done well. Note that there's no one "right" way to use these skills, and that everyone will improve with practice.

It is natural to try to solve the problem during this role play. However, the focus here is on practicing the communication skills. Stop a participant if he or she starts to solve the problem.



If the class is very large and there are two instructors, you could divide the class in half and do the role plays in two groups, simultaneously. It is hard to keep the attention of a large class during role plays.

- **9. Repeat the process with each pair.** Ask for another pair to conduct their role play. Follow the same procedure. Continue until all the groups have finished.
- **10. Debrief with large group.** Ask participants:

How did it feel to do these role plays?

What did people struggle with?

Were any of the situations a surprise?

11. Wrap up the module. End with a review of the importance of these communication skills as the building blocks for building relationships and solving problems.

Module 8. Communication: Listening and Talking Skills¹

Handouts

Activity 8.1: Listening Well

Handout 8.1

Listening Well: How It Helps

Handout 8.2

Talking With Your Body

Activity 8.2: Paraphrasing—Saying It in Your Own Words

Handout 8.3

Saying It in Your Own Words: Getting Started

Handout 8.4

Saying It in Your Own Words: Practice

Handout 8.5

Saying It in Your Own Words: How It Helps

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Activity 8.3: Asking Open-Ended Questions

Handout 8.6 Asking Closed and Open-Ended Questions

Handout 8.7 How Communication Skills Help

Activity 8.4: Communication Skills Practice

Handout 8.8

Listening and Talking Skills: Practice

Handout 8.1

Listening Well: How It Helps

Listening well is a key skill in direct care. Read how it helps these workers.

Gabe's Story

"When I listen well, I understand more of what supervisors and consumers tell me. That makes it easier to recall what they said later on."

Katy's Story

"I'm a good listener. So consumers know that I care about and respect them."

Talking With Your Body

Handout 8.2

Page 1 of 2

Body language is the way you move and speak. It can tell consumers that you care about and respect them. It can also let them know that you are paying attention.

Read how these workers manage their body language.

Lonnie's tip—Put on a happy face.

"People can often tell how I feel by the look on my face. So I try to smile."

Ed's tip—Look consumers in the eye.

"I look people in the eye as much as possible. This is extra important when I help someone bathe or use the toilet. Eye contact lets them know I respect them."

Donna's tip—Position yourself at eye level with consumer.

"So many of my consumers are sitting or in bed when I'm working with them. When we're talking, I try to sit or otherwise get down to their eye level, so they don't have to look up at me all the time."

Drew's tip—Touch people gently.

"I try to touch consumers as gently as possible. But before I touch someone, I always ask if it's OK. Some people don't mind being touched. Some people really like it. And then others don't like it at all. So it's important to ask."

Mandy's tip—Use a friendly voice.

"People really pay attention to the tone of my voice. So I try to make my voice sound warm and caring."



Talking With Your Body

Handout 8.2

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Review—Talking with Your Body:

- Put on a happy face.
- Look consumers in the eye.
- Position yourself at eye level with the consumer.
- Touch people gently. Ask first.
- Use a friendly voice.

Saying It in Your Own Words: Getting Started

Handout 8.3

Part of being a good listener is paraphrasing. That means reflecting back, in your own words, what someone else said.

Here are some ways to get started:

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"Did I hear you say ..."

"So what you're saying is ..."

"Am I hearing you right that ..."

"Are you saying that ..."

"I believe that you are saying ..."
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Saying It in Your Own Words: Practice

Handout 8.4

Instructions: Read one of the quotes below. Imagine that a consumer is speaking to his or her direct-care worker. Think about how you could reflect back what the consumer said, in your own words, if you were the direct-care worker. Then write your paraphrase in the space below the quote.

4	44 T 9		. 1	a	1	. 1	•	. 1	
Ι.	"I'm so	tired	today.	Can't v	we do	these	exercises	another	time?"

2. "I didn't get along well with the worker before you. I hope you'll be better."

- 3. "I'm so bored. Isn't there something else you could do with me today?"
- 4. "The last person who took care of me was so sweet. I don't think you'll be as nice as she was."



Saying It in Your Own Words: How It Helps

Paraphrasing—saying in your own words what someone else said—may seem difficult at first. With time and practice, it gets easier. Read how paraphrasing helps these workers to communicate better at work.

Lily's tip—It shows you are listening.

"I like to say in my own words what someone else said. It lets them know I am listening."

Mandy's tip—It helps avoid confusion.

"Sometimes, when I say things back in my own words, I find out that I didn't understand what the person was trying to say. With paraphrasing, if I don't understand, they can tell me right away and we don't get all confused."

Jon's tip—It helps keep you focused on the consumer.

"Sometimes people say things that make me feel really emotional. Paraphrasing helps me focus and brings me back to what the other person is really saying. That makes it easier for me to stay calm."

Review—Paraphrasing:

- Shows you are listening.
- Helps avoid confusion.
- Helps keep you focused on the consumer.



Handout 8.6

Asking Closed and Open-Ended Questions

It's important to know the difference between closed and open-ended questions. Both kinds of questions are useful for different situations.

Closed questions:

- Can be answered in a few words
- Help you get information
- Stop the conversation

Examples:

- "Do you want me to get your sweater now?"
- "How many cookies do you want?"
- "When did you see the doctor?"

Open-ended questions:

- Encourage a longer answer
- Help you find out thoughts and feelings
- Keep the conversation going

Examples:

- "Why are you sitting by yourself?"
- "How did you make that blanket?"
- "What jobs have you had?"



Handout 8.7

How Communication Skills Help

Good communication means using the talking and listening skills you have just learned. Here's how listening, paraphrasing, and asking open-ended questions can help you do your job well.

Review—Good Communications Skills:

- Help you understand what the consumer is thinking and feeling.
- Help build good feelings between you and the consumer.
- Make it easier for you and the consumer to solve problems together.

Listening and Talking Skills: Practice

Instructions: Work with a partner. Role-play a talk between a consumer and a direct care worker. Then switch roles.

Consumer:

Read one of the quotes below.

Worker:

Respond with listening, paraphrasing, and open-ended questions. Don't try to solve any problems—yet.

- 1. "I'm not hungry. Let me just sleep now and eat later."
- 2. "I don't want your kind here! I keep telling them not to send you people!"
- 3. "The last person who took care of me didn't like me. She kept poking and hitting me, and sometimes she swore at me!"
- 4. "My daughter just left. She is so mean. She only visits to ask for money."
- 5. "I'm bored. Isn't there something else we could do today?"
- 6. "You're always late! I'm going to ask for another worker who can be on time."
- 7. "Ouch—you're too rough with me! I've never had so many bruises."

