2nd edition

RESIDENTIAL, HOME AND COMMUNITY AGED CARE

Workbook

Carla Unicomb • Wendy Bell

ELSEVIER
Disclaimer:

These materials have been written to the latest version of the qualifications and units of competence. However, it is up to each individual registered training organisation to ensure that it is meeting the requirements of the latest version of the training package/units of competence.

ELSEVIER
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Preface

This workbook has been written to address the most current aged care training package requirements and is a resource to support the fourth edition of Scott, Webb and Kostelnick’s *Long-Term Caring: Residential, Home and Community Aged Care* textbook.

The workbook has been prepared after extensive consultation with aged care providers and feedback from past training participants, and is aimed at learners undertaking aged care qualifications. We especially acknowledge the contribution of Penny Kraemer, a registered pharmacist, who was the author of the chapter entitled ‘Assist Clients with Medication’.

We would like to express our sincere thanks to Melinda McEvoy, Martina Vascotto and Karthikeyan Murthy for their valuable support and suggestions in preparing the workbook.

Carla Unicomb
Wendy Bell
How to use this workbook

This workbook is to be used in conjunction with fourth edition of Scott, Webb and Kostelnick's *Long-Term Caring: Residential, Home and Community Aged Care* textbook, published by Elsevier.

The workbook is closely aligned to the textbook and has activities throughout which are to be completed by the participant.

The activities and final assessment have been designed to support the training and assessment strategies of the registered training organisation.

The workbook should be used in conjunction with a registered training organisation’s training and assessment plans, and can be customised and contextualised to satisfy the industry and the training organisation’s requirements.
About the Authors

Carla Unicomb and Wendy Bell are registered nurses, both with over 40 years of nursing and vocational education and training experience.

**Carla Unicomb** is the managing director of Training Beyond 2000 Pty Limited, a registered training organisation that is recognised as a leader in the delivery of training and assessment services to the community services and health sector.

**Wendy Bell** is the principal trainer with Training Beyond 2000 Pty Limited, responsible for the delivery of Certificate III and Certificate IV nationally recognised qualifications in the aged care sector.

In preparing these learning materials, Carla and Wendy have drawn upon the resources they have developed in consultation with aged care providers over the past 18 years. The learning and assessment activities reflect real work-based contexts and provide the learner with the opportunity to demonstrate that they have the requisite knowledge and skills to competently perform their role in the community services and health industry.

Carla and Wendy are passionate about delivering high-quality training and assessment that allows learners to transfer knowledge and skills to their work environment. Their newly acquired knowledge and skills will assist the learner to deliver person-centred care that enhances the quality of life of the care recipient.
Penny Kraemer, B.Pharm, MPS, AACPA
Consultant, Accredited Pharmacist
UNIT HLTWHS002: Follow safe work practices for direct client care

Figure 3.1: Workplace health and safety (iStockphoto/YinYang)
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INTRODUCTION

This workbook relates to the unit HLTWHS002: Follow safe work practices for direct client care.

The workbook activities and final assessment tasks will enable you to:
- follow safe work practices for direct client care
- follow safe work practices for manual handling
- follow safe work practices for infection control
- contribute to safe work practices in the workplace
- reflect on your own safe work practices.

To prepare for this unit and the assessment activities, we recommend that you first read Scott, Webb and Kostelnick, 4th edition, Chapter 2 (Protecting the person and the carer).
Chapter 3 - UNIT HLTWHS002: Follow safe work practices for direct client care

1. SAFETY

(page 27 of Scott, Webb and Kostelnick, 4th edition)

How would you describe a safe work environment?

________________________________________________________________________

________________________________________________________________________

What factors increase the client’s risk of accident or injury?

________________________________________________________________________

________________________________________________________________________

2. LEGISLATION

(page 27 of Scott, Webb and Kostelnick, 4th edition)

What is the name of the legislation that covers all workplaces in Australia?

________________________________________________________________________

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________________________________________________________________________

What are some key changes in terminology for the WHS Act?

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<tbody>
<tr>
<td>Occupational health and safety</td>
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<tr>
<td>Employer</td>
<td></td>
</tr>
<tr>
<td>Employee</td>
<td></td>
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<tr>
<td>OHS representative</td>
<td></td>
</tr>
<tr>
<td>OHS committee</td>
<td></td>
</tr>
<tr>
<td>Managers and directors</td>
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</tbody>
</table>
3. DUE DILIGENCE
Officers have a duty to exercise ‘due diligence’ to ensure the person conducting a business or undertaking (PCBU) complies with its duties under the WHS Act. They are to take reasonable steps to:

4. ‘REASONABLY PRACTICABLE’
‘Reasonably practicable’, as defined under section 18 of the WHS Act, states that there is a requirement to weigh up all matters, including:

5. HOME HAZARD ASSESSMENT
(page 28 of Scott, Webb and Kostelnick, 4th edition)

Activity 1
Read Box 2.1. Think of a client’s home or your own home, and spend 15 minutes or so discussing with your trainer where your client’s home or your own home doesn’t comply with safety in the home.

What about pets? What risk can they present to the client or carer?

After having read the box, write down at least five things you could improve in your own home or a client’s home you have visited recently.

6. PREVENTING FALLS
(page 29–33 of Scott, Webb and Kostelnick, 4th edition)

What factors increase the risk of a fall?
What safety measures could you put into place to prevent falls?

7. PREVENTING POISONING

(page 34 of Scott, Webb and Kostelnick, 4th edition)

Figure 3.2: Warning labels on hazardous substances
(Sorrentino A & Gorek B 2003 Mosby’s Textbook for Long-Term Care Assistants (4th edn), Mosby, St Louis.)

Accidental poisoning in an aged care facility and in the home is a health hazard. How could you prevent accidental poisoning?
8. PREVENTING BURNS

Burns are a leading cause of death, especially among children and older people. What safety measures could be put into place to prevent burns?

9. PREVENTING SUFFOCATION

Suffocation is when breathing stops from lack of oxygen. The following safety measures can help prevent suffocation:

10. PREVENTING EQUIPMENT-RELATED ACCIDENTS

Equipment must be kept in safe working order. How do you do this?
Figure 3.3: Preventing equipment-related accidents. A. An overloaded electrical outlet. B. Wheelchair safety
(A. Redrawn based on Sorrentino A & Gorek, 2003, Mosby’s Textbook for Long-Term Care Assistants (4th edn), Mosby, St Louis. B. Sorrentino A & Gorek, 2010, Mosby’s Textbook for Long-Term Care Assistants (6th edn), Mosby, St Louis.)
Activity 2

Break into small groups. Look at one piece of equipment you use at work, and write down how you would inspect the equipment and ensure it is working in a safe manner.

Figure 3.4: Preventing equipment-related accidents

Take some time to read this box on page 35, and discuss it with your trainer and the rest of the group.

11. HANDLING HAZARDOUS SUBSTANCES


A hazardous substance is any chemical that presents a physical hazard or a health hazard in the workplace. List below some hazardous substances used at your workplace, the results of exposure to these substances, and safety measures taken to ensure that these substances do not cause harm to anyone.

Check your answers against Box 2.6 on page 33.
12. MATERIAL SAFETY DATA SHEETS
(page 37 of Scott, Webb and Kostelnick, 4th edition)
What is a Material Safety Data Sheet (MSDS), and what does it tell you about the hazardous substance?

<table>
<thead>
<tr>
<th>Hazardous substance</th>
<th>Damage to person if exposed</th>
<th>Control measures</th>
</tr>
</thead>
<tbody>
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</table>

13. FIRE SAFETY
(pages 38–40 of Scott, Webb and Kostelnick, 4th edition)
What fire prevention methods are in place in an aged care environment? Write your answers below and then check them against Box 2.7 on page 34.

Activity 3
What to do if there is a fire
It is important to know your aged care facility’s policies and procedures for fire emergencies. Know where to find fire alarms, fire extinguishers and emergency exits. Fire drills are held to practise emergency fire procedures. Remember the acronym RACE. What does it stand for?

R ____________________________
A ____________________________
C ____________________________
E ____________________________
What is the procedure for using a fire extinguisher?

1. 
2. 
3. 
4. 
5. 
6. 
7. 

Your trainer will now simulate the procedure for using a fire extinguisher using an actual fire extinguisher from the workplace.

14. EVACUATION
(pages 40–1 of Scott, Webb and Kostelnick, 4th edition)

Activity 4
What is the procedure for evacuating clients at your workplace?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
15. WORKPLACE VIOLENCE
(pages 41–3 of Scott, Webb and Kostelnick, 4th edition)

Violence can happen in the workplace, and the aged care facility is no exception. Although most health workplace-related violence happens in acute healthcare settings, it can still occur in the aged care facility.

List some factors associated with work-related assaults in aged care facilities, and suggest control measures that could be put into place to prevent these incidents.

<table>
<thead>
<tr>
<th>Work-related violence incident</th>
<th>Control measures</th>
</tr>
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<tbody>
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See Boxes 2.8 and 2.9 on pages 38–39. Your trainer will discuss with you these practices for preventing violence and ensuring personal safety.

16. RISK MANAGEMENT
(page 44 of Scott, Webb and Kostelnick, 4th edition)

Risk management involves identifying and controlling risk and safety hazards that affect the aged care facility.

What is a hazard?

What is a risk?

What is the difference between an accident and an incident?

How do you report hazards, accidents and incidents at your workplace?
Identifying hazards

Workplace hazards can be identified by workplace inspection, checking injury records, consulting workers and looking at worker’s compensation statistics.

How are hazards identified at your workplace?

Once you have identified a hazard, you need to assess the level of risk. This means the likelihood of injury or illness, and the severity of the injury or illness that results from exposure to the hazard.

An example of a risk matrix is given in Figure 3.6.

**Figure 3.6:** Risk assessment matrix

Once the risk has been assessed, we need to implement control measures.

**Figure 3.7:** Hierarchy of controls
Activity 5

Break up into groups of two or three people. Write down one hazard you can think of in your workplace. Assess the level of risk using the risk assessment matrix and then work out what control measures would be suitable to eliminate or minimise the risk. Refer to the hierarchy of controls in Figure 3.7 when working out your control measures.

One person from each group will present their risk assessment and control measures to the class. The trainer will write answers on the whiteboard and then brainstorm the rest of the class for any additional control measures they would like to add.

17. MANUAL HANDLING AND BODY MECHANICS


‘A hazardous manual task means a task that requires a person to lift, lower, push, pull, carry or otherwise move, hold or restrain any person, animal or thing involving one or more of the following:

- repetitive or sustained force
- high or sudden force
- repetitive movement
- sustained or awkward posture
- exposure to vibration.’

(WorkCover Authority of New South Wales, www.workcover.nsw.gov.au)

To work safely you must be familiar with the Hazardous Manual Tasks Code of Practice. What does this code of practice cover in relation to hazardous manual tasks?

We often talk about good posture, base of support and body mechanics. What do we mean by these terms?
Figure 3.8 demonstrates that when a stick is placed next to the body (man on right), the inward and outward curves of the spine are balanced.

‘An injury sustained whilst carrying out a hazardous manual task is called a Musculoskeletal Disorder (MSD). MSDs occur due to:

1. Wear and tear to joints, ligaments, muscles and inter-vertebral discs caused by repeated or continuous use of the same body parts, including static body positions.

2. Sudden damage caused by strenuous activity, or unexpected movements such as when loads being handled move or change position suddenly.’

(WorkCover Authority of New South Wales, www.workcover.nsw.gov.au)

What are some common MSDs caused through performing hazardous manual tasks?
18. BACK CARE

Read the Safety Alert on page 44.

What are common signs and symptoms for someone who has a back injury?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

How do we maintain a healthy spine?

________________________________________________________________________

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________________________________________________________________________

List at least five rules for correct manual handling techniques (see page 49).

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Activity 6

Perform the following practical exercises either in the workplace or in a simulated workplace environment.

The exercises can be found in the Final Assessment section of this workbook. You will practise these exercises with your trainer before being assessed at the workplace.

• Moving a client in bed
• Raising the client’s head and shoulders
• Log rolling
• Transferring a client from bed to chair
• Transferring a client using a walk belt
• Transferring a client using a mechanical lifter and stand up lifter
• Moving a client in bed using a slide sheet
• Assisting a client from a wheelchair into a car
19. INFECTION PREVENTION AND CONTROL
(pages 69–76 of Scott, Webb and Kostelnick, 4th edition)

What is the difference between pathogens and normal flora?

What are the four types of microorganisms?
20. INFECTION
(pages 70–1 of Scott, Webb and Kostelnick, 4th edition)

An infection is a disease state resulting from the invasion and growth of microorganisms in the body. A **local infection** is in a body part – for example, conjunctivitis is an infection of the eye. A **systemic infection** involves the whole body – examples are septicaemia and measles. Signs and symptoms of infection include:

Why are older people who live in residential aged care more susceptible to infection?

Write your answers below, and then compare them with Box 2.15 on page 70.

What is meant by ‘standard precautions’?

**Additional precautions**

Additional precautions such as isolation, personal protective equipment (PPE), and disposable crockery and cutlery are applied when a client has a highly contagious disease such as measles, chicken pox or methicillin-resistant staph aureus.

A common infection in residential facilities is gastroenteritis. The Department of Social Services (previously the Department of Health and Ageing) has published an **Outbreak Coordinators Handbook** to assist staff of residential aged care facilities in the event of a gastroenteritis outbreak.

The Outbreak Management Kit can be downloaded from the Department of Social Services website. It includes all the information needed to manage a gastroenteritis outbreak, including an:

- outbreak management checklist
- outbreak flow chart
- outbreak management plan
- outbreak management plan template.

Download and read a copy of the kit to prepare for your final assessment.
Chain of infection

21. HAND HYGIENE
(pages 72–3 of Scott, Webb and Kostelnick, 4th edition)
Why is hand washing and hand hygiene so important when working in residential aged care, hospitals and in the community with clients?

When do you need to wash your hands?

Read the rules of hand washing on page 73.

Activity 7
Practical exercises on hand hygiene can be found in the Final Assessment section of this workbook. You will practise these exercises with your trainer before being assessed at the workplace or in a simulated workplace environment.
Your Moments for Hand Hygiene

Health care in a residential home

Figure 3.10: Your moments for hand hygiene
(Reprinted from World Health Organisation, Your Moments for Hand Hygiene Health Care in a Residential Home Poster, http://www.who.int/gpsc/5may/residential-care.pdf)

Personal protective equipment
(pages 74–6 of Scott, Webb and Kostelnick, 4th edition)

When should the following personal protective equipment (PPE) be worn?

<table>
<thead>
<tr>
<th>Gloves</th>
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<tbody>
<tr>
<td>Mask</td>
</tr>
<tr>
<td>Eye protection (goggles)</td>
</tr>
<tr>
<td>Apron or gown</td>
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</tbody>
</table>
Figure 3.11: Hand washing A. The uniform does not touch the sink. Hands are lower than the elbows. B. The palms are rubbed together for a good lather. C. Fingertips are rubbed against the palms to clean underneath the nails. (Sorrentino A & Gorek B, 2010, Mosby’s Textbook for Long-Term Care Assistants, Mosby, St Louis.)

22. ENVIRONMENTAL CONTROL AND CONTAMINATED WASTE

(page 77 of Scott, Webb and Kostelnick, 4th edition)

Good housekeeping, hygienic care and handling of laundry, and correct disposal of waste are all essential elements of infection control. Waste should be segregated at the point of generation. Most healthcare and aged care facilities use appropriately colour-coded and labelled containers.
Figure 3.12: Clinical waste including linen skips, biological hazard signs and sharps containers
(Dalcross Medical Equipment (Linen skip); iStockphoto/Brilt (BioHazard sign); iStockphoto/DavidFR (sharps container))

Name an example of each of the following types of waste, and state in which coloured container you would place it.

<table>
<thead>
<tr>
<th>Waste</th>
<th>Example</th>
<th>Container</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious or clinical waste</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sharps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chemical-related waste</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cytotoxic waste</td>
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<tr>
<td>General waste</td>
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23. SPILLS MANAGEMENT
(page 77 of Scott, Webb and Kotelouch, 4th edition)

Standard precautions apply in the management of spills. What is the procedure for a spill of blood or body fluids?
24. LINEN AND LAUNDRY SERVICES
(page 77 of Scott, Webb and Kostelnick, 4th edition)
Aged care facilities and organisations have documented policies regarding procedures for the collection, transport, processing and storage of linen.
What is the procedure at your facility?

25. PERSONAL HEALTH
It is also important for staff working in the healthcare setting to maintain personal health and hygiene. How do staff do this?

26. FOCUSING ON COMMUNITY CARE
List four risks relating to caring for someone in their own home, and the control measures that could be put into place for each risk (remember the hierarchy of controls):

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Control measure</th>
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27. CONTRIBUTING TO SAFE WORK PRACTICES IN THE WORKPLACE
Activity 8
Who are the members of your Work Health and Safety Committee?

Case scenario
You are working the afternoon shift and notice that some of your work colleagues are not using the correct manual handling equipment. Instead, they are lifting the clients by themselves.
What risk does this practice pose to the staff member and the client? To whom should you report this matter? What do the policies and procedures at your workplace state with regards to manual handling?

28. REFLECTING ON YOUR OWN SAFE WORK PRACTICES

Activity 9

How can you maintain currency of safe work practices in relation to work health and safety, the use of equipment, and infection control in your work role?

29. QUALITY OF LIFE

(Activity 10)

Read and discuss case study 1. Thinking back to the hierarchy of controls, with elimination being at the top of the list, do you think the risks have been eliminated or reduced? What if Margery decides not to go outside the lounge to smoke? What if she decides to have a bath, instead of a shower? If she is of sound mind, is she able to make these decisions to smoke inside the lounge and to have a bath? What about your health and safety when attending Margery’s premises? What else could be done now to eliminate or reduce the risks?

REFERENCES

