



Village Caregiving

Caregiver Training

Providing excellent care is our top priority

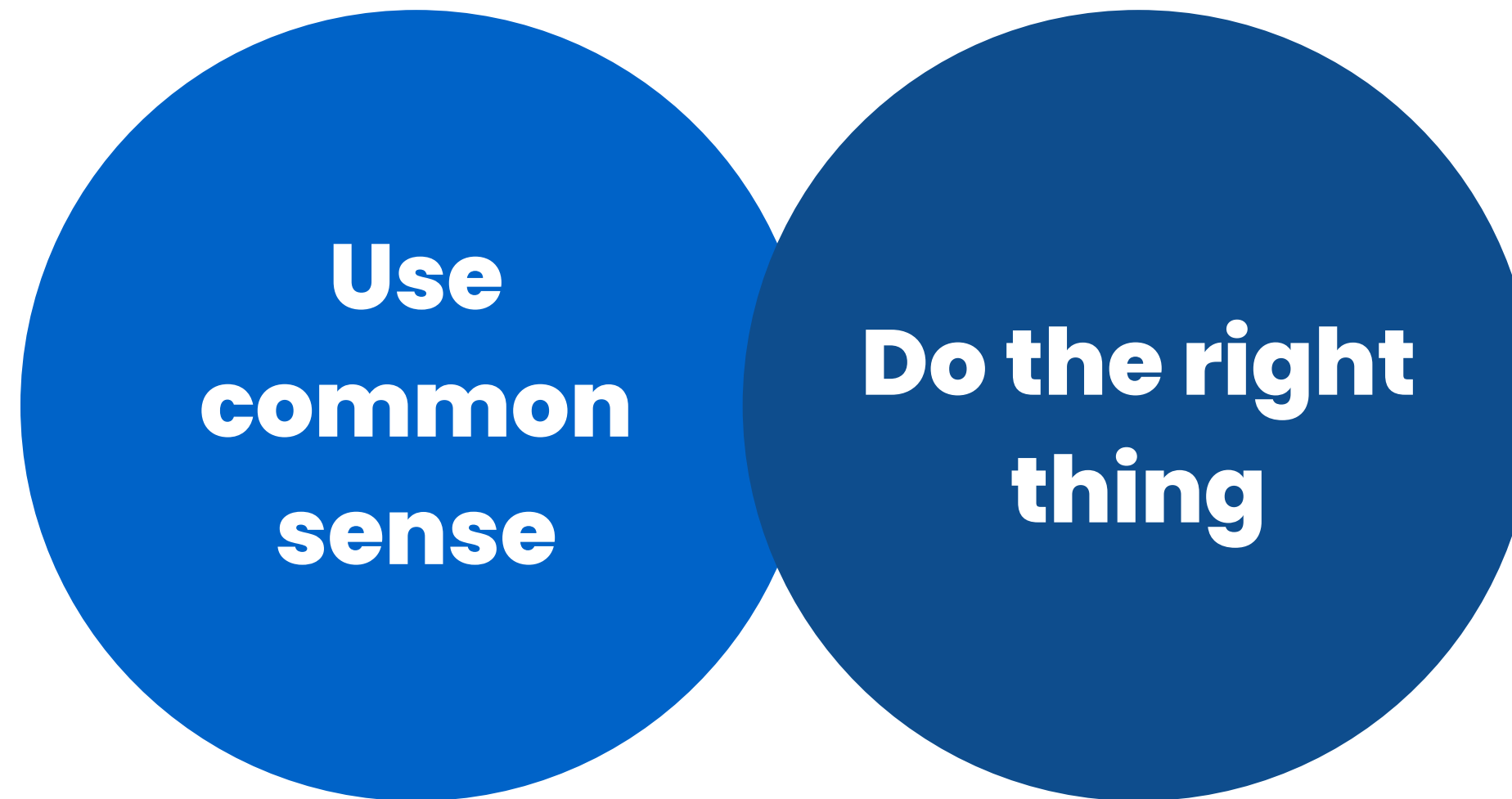


The Beginning

Village Caregiving
was founded in
2013 by three
lifelong friends.



Our Founding Values



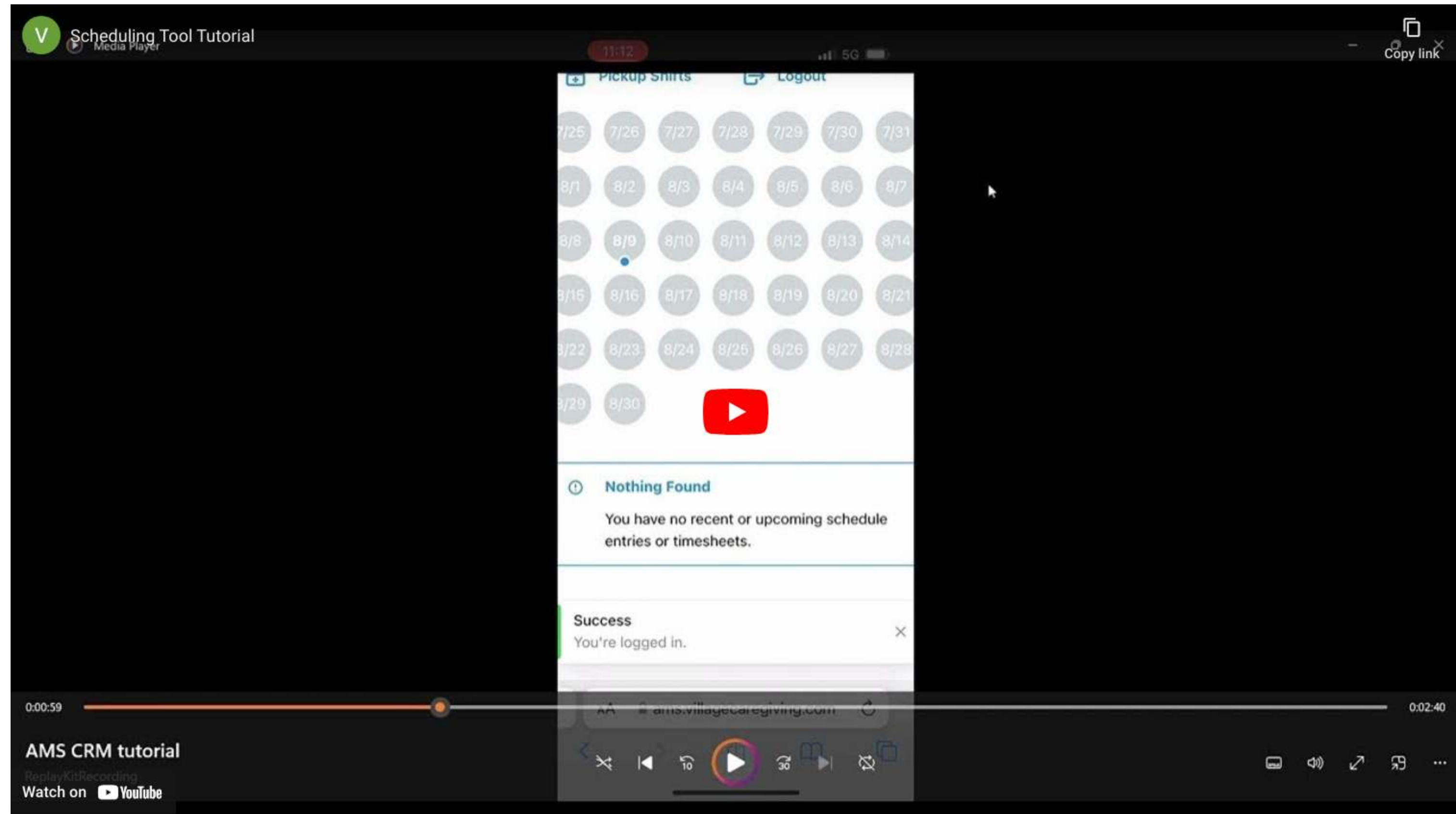
**Does the care I am
providing make sense
for the client?**

**Am I doing the right thing?
Honesty & integrity are
always key!**

Expectations as a Village Caregiving Employee:

- ✓ Follow the Village Caregiving Code of Conduct & Ethics, which is found with each office.**
- ✓ Act in the best interest of the clients.**
- ✓ Conduct yourself with honesty and integrity.**
- ✓ Be on time! Clock in & out of all shifts appropriately.**
- ✓ Have reliable transportation.**
- ✓ Wear appropriate work clothing. Scrubs are not required but preferred.**
- ✓ Display your Village Caregiving badge when working with clients.**
- ✓ Communicate effectively!**

How to Clock In & Out of Shifts:

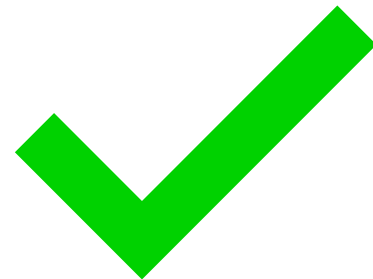


Village Caregiving- Columbus: <https://youtu.be/bctZK3m5hxM?feature=shared>

Scope of Practice

What We Do

- Support Activities of Daily Living (ADLs):
 - Bathing
 - Ambulation
 - Hygiene
 - Eating
 - Preparing Meals
 - Companionship
 - Light Housekeeping



What We Don't Do

- Provide "Skilled" Care:
 - Administering Medications
 - Diagnosing Conditions
 - Providing Skilled Therapy
 - Medical Treatment

Examples of care that staff are **NOT** allowed to provide:



Medication Administration

Do NOT handle, sort, organize, or give medications. You can only remind clients to take their medications as prescribed.



Skilled Elimination Assistance

Do NOT change ostomy appliances or clean stomas. Do NOT insert, remove, or reposition urinary catheters. Do NOT perform manual disimpaction (using finger or object to help client with bowel movement).



Wound Care

Do NOT apply medicated creams or ointments, pack or change wound dressings, or bandage wounds.



Cut Nails

Minor cuts & injuries can cause serious infections that can even lead to amputation in clients with diabetes.



Respiratory Therapy

Do NOT change a client's oxygen flow or administer any respiratory treatments.



Blood Glucose Monitoring

Do NOT stick a client under any circumstance.

Plan of Care

To ensure the best possible care for our clients, our team of nurses and directors complete a plan of care prior to the first day of service. This sheet serves as a reference guide for the director or nurse, who will then be able to inform you about your client's specific needs.

VETERAN CAREGIVER PLAN OF CARE									
Client Name:					TOTAL HOURS OF SERVICE:			Weekly:	
Client Address:								Monthly:	
Client Conditions:					Contact Information:				
Mental Status:					Key Information:				
Frequency:		Days:		Hours:					
Daily Planned Task								COMMENTS:	
PERSONAL CARE	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sunday		
Date:									
Beginning Time:									
Ending Time:									
A. Grooming									
B. Bathing									
C. Dressing									
D. Toileting									
E. Laundry									
MOBILITY	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sunday		
A. Transferring									
B. Walking									
NUTRITIONAL SUPPORT	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sunday		
A. Meal Preparation									
B. Feeding/Special Dietary Needs									
Totals:									
ENVIRONMENTAL	Mon.	Tues.	Wed.	Thur.	Fri.	Sat.	Sunday		
Date:									
Beginning Time:									
Ending Time:									
A. Light house Cleaning									
B. Dishwashing									
C. Making/Changing Bed									
D. Client's Laundry									
Totals:									
RN Signature:					Date:				
				Follow-up:					

The caregiver was educated and oriented as to the client's needs and schedule as set forth above by the Director and Nurse.

EMERGENCY PLAN: In the event there is an absence of a personal support worker, client knows to call office to arrange backup.

However, even though there is a schedule in place, VCG is largely providing care on a PRN basis pursuant to VA instructions.

Veteran not always interested in backup. Caregiver knows to call 911 in the event of an emergency.

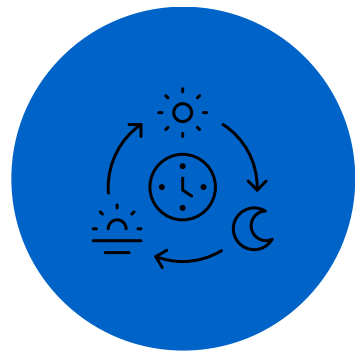
Care Considerations



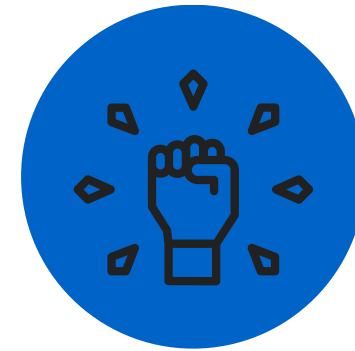
Consider the client's capabilities, preferences & the amount of assistance needed.



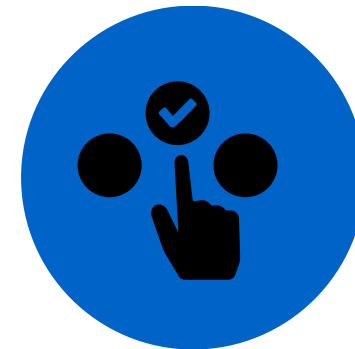
Always ensure safety and listen to the client's needs and preferences.



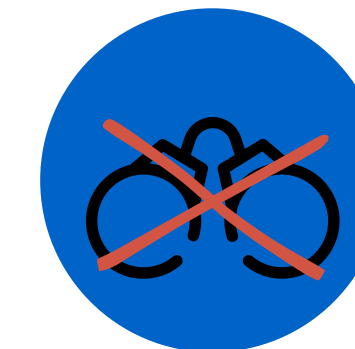
Follow the client's preferred routine as long as it is safe and in accordance with the plan of care.



Allow the client to perform as much as they are safely able to promote independence and dignity.



Clients have the right to direct their own care & refuse care.



Clients cannot ever be restrained.

Communication

Village Caregiving is committed to ensuring all staff members are effective communicators.

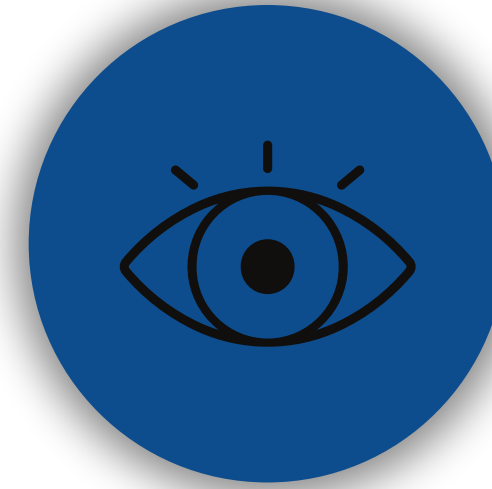


Be mindful of your verbal & nonverbal communication.



Verbal

The words you say, the tone of voice, & the speed of speech



Nonverbal

The physical gestures made when communicating, such as eye contact, posture, and your body language

Communicating with Clients with Hearing Loss



Avoid distractions and background noise.



Speak loudly & clearly without shouting or exaggerating.



Help your client explain their hearing loss to others.

Communicating with Clients with Disabilities



Show the client respect and dignity as you would anyone else.



Speak directly to the person at eye level.



Do not touch the person's wheelchair, walker, or other assistive device without permission.

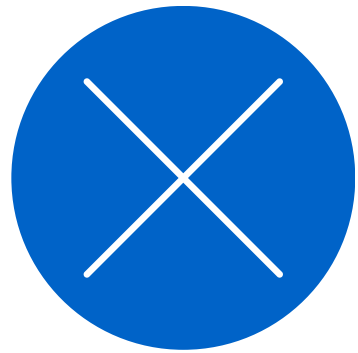


Ask if the client would like help with activities and how you can best help them.



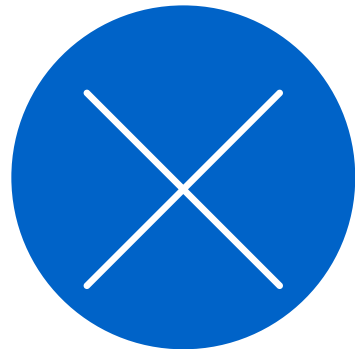
Let the client set the pace in walking and other activities.

Communicating with Clients with Memory Loss



Do NOT give orders.

Show respect by saying, "Let me help you eat" instead of "Sit down and eat."



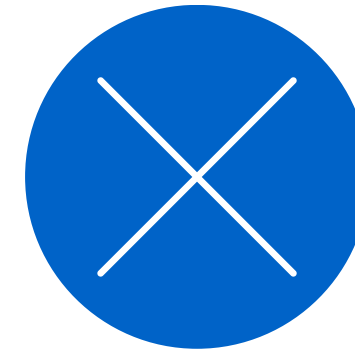
Do NOT demand the truth.

Tell the client, "Today is Monday" instead of asking "What is today?"



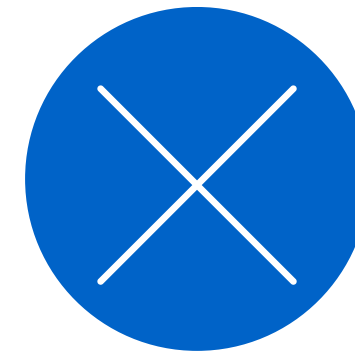
Do NOT point out and correct errors.

Say, "Let's try it this way" instead of saying "You are not doing it right."



Do NOT ask open-ended questions.

Ask, "Are you tired?" instead of "How are you feeling?"



Do NOT give too many choices.

Limit choices by asking, "Would you like chicken or meatloaf?" instead of "What do you want to eat?"

Communicating with Veterans



Appreciation

Ask what the client's military service means to them. Thank them for their service and show your appreciation for their skills and dedication.



Mental Health

Many veterans struggle with post-traumatic stress disorder and other mental health concerns. Do not ask them about PTSD, injuries, or traumatic events.



Questions

Ensure they are comfortable answering your questions, and do not assume they enjoy talking about time they spent in combat.



Human Connection

Remember that although veterans have had unique experiences and challenges, they want human connection, respect, and companionship just as everyone else.

Communicating with Clients from Other Cultures



Use Empathy

Do not judge clients based on your values and beliefs. Practice empathy by imagining yourself in your client's shoes and remembering that their culture and religion are a part of who they are.



Show Respect

Be aware of the client's customs and practices related to their culture or religion. Show respect, and allow the client time to practice what is meaningful to them.



Ensure Understanding


If a client speaks a foreign language, speak slowly and clearly without exaggerating. Be aware of what the client understands. Use gestures and pictures when needed.



Learn

Take time to learn about the client's culture, values, and beliefs. Listen and learn from them, even if you do not agree.

How to Fill Out a Care Sheet:



Village

CAREGIVING

keep your heart at home

2024 DAILY CARE NOTES

Client Name: John Smith Date of Birth: 01/01/1950

Address: 1 Main St Barboursville, WV 25504

Month (circle): Jan Feb March April May June July Aug Sept Oct Nov Dec

DATE (circle)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
DATE (circle)	<u>16</u>	17	18	<u>19</u>	20	21	22	<u>23</u>	24	25	<u>26</u>	27	28	29	<u>30</u>	31
Time In:	9am			9am				9am			9am				9am	
Time Out:	1pm			1pm				1pm			1pm				1pm	
Total Hours:	4			4				4			4				4	
CLIENT INITIALS:	JS			JS				JS			JS				JS	
Personal Care:																
Grooming:	X			X				X			X				X	
Bathing:	X			X				X			X				X	
Dressing:	X			X				X			X				X	
Toileting/Hygiene:	X			X				X			X				X	
Other:																
Mobility:																
Transferring:																
Ambulation:	X			X				X			X				X	
Nutritional Support:																
Meal Preparation:	X			X				X			X				X	
Feeding:																
Environmental:																
Light Housekeeping:																
Laundry:																

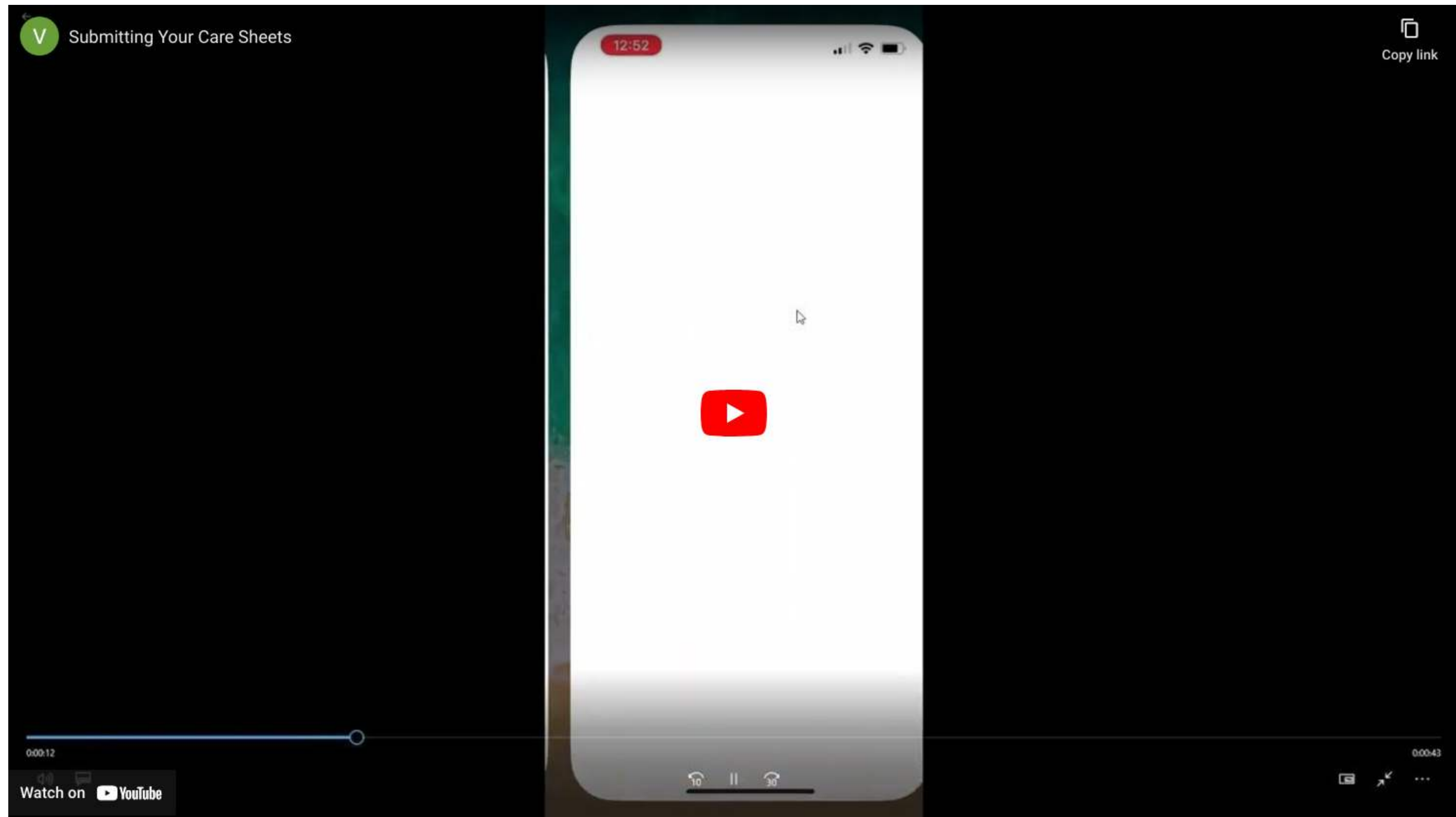
Notes: Client is reporting feeling much better following procedure last month.

Client Signature: John Smith

Caregiver (print): Jane Doe

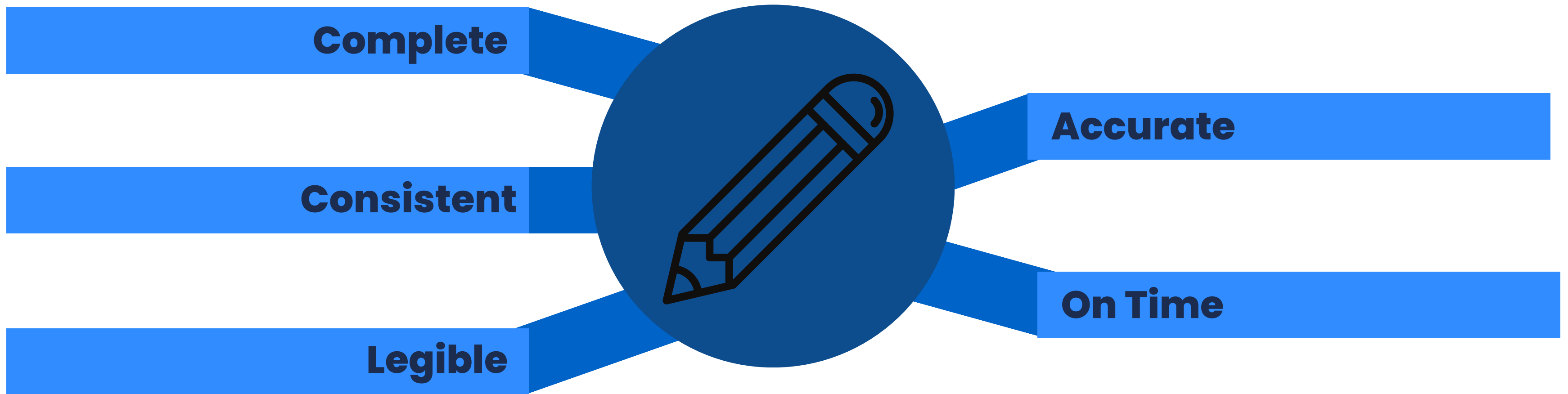
Caregiver (sign): Jane Doe

How to Submit Care Sheets:



Village Caregiving - Columbus: <https://youtu.be/P1-WAKF8-Q8?feature=shared>

5 Rules of Documentation



Vital Signs & Changes in Condition



You are required to know how to take the following vital signs in accordance with federal standards. While we do not routinely check them at Village Caregiving, they are important for their ability to detect changes occurring in the body.



Temperature

Normal temperature ranges from 96.8 to 100.4 F. A temperature > 100.4 F can often indicate an infection.



Respirations

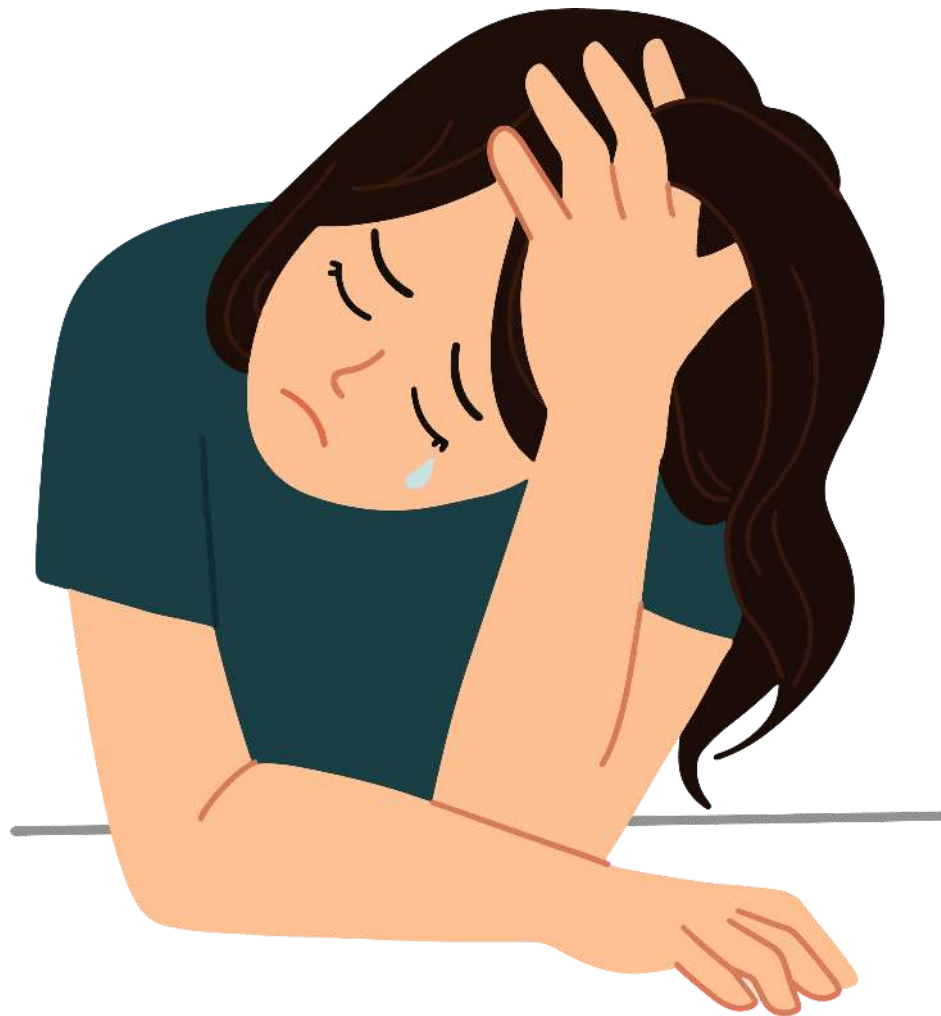
Normal respiratory rate is between 12–20 breaths per minute.



Pulse

The number of heartbeats in 1 minute.
Normal for anyone over 12 years old is 60–100 beats per minute.

Always be aware of what your client's "normal" is. If a client experiences any changes outside of their normal, you must report these to the Village Caregiving staff in a timely manner. Some examples include:



- ☒ **Skin injuries**
- ☒ **Changes in eating or bowel habits**
- ☒ **Changes in bowel habits**
- ☒ **Changes in mood**
- ☒ **Changes in the client's ability to perform ADLs**
- ☒ **The client tells you they feel ill or different.**

Remember! Village Caregiving is forbidden from managing a client's medical condition. In the case that a change in condition is observed, Village Caregiving personnel will notify the client, family, or other person identified by the client of the newly observed condition and the possible need for referral for separate medical services.

Some emergencies you must NOT delay contacting 911 for include:



- ⚠ **Changes in client's level of consciousness**
- ⚠ **Bleeding**
- ⚠ **Seizures**
- ⚠ **Difficulty breathing**
- ⚠ **Falls or accidents**
- ⚠ **Severe pain, especially chest pain!**
- ⚠ **Suicidal thoughts**
- ⚠ **Signs of a stroke**

Emergency situations are not limited to the above list.

Spotting a Stroke

BEFAST

Balance
Loss



Eyesight
Changes



Face
Drooping



Arm
Weakness



Speech
Difficulty



Time to
call 911



Emergency Response

1

Call 911!

2

**Contact the client's
emergency contact.**

3

**Contact Village
Caregiving.**



Consider:

- How would I safely remove the client from this house in case of fire?
- If the participant is bed bound, how would I remove him/her from the fire scene?
- What special precautions, indicated by the town fire department, should be taken so that they are aware of bed-bound residents or people dependent upon oxygen?

IN CASE OF FIRE REMEMBER *RACE*

R

'Rescue'

ANY PERSONS IN
IMMEDIATE DANGER



A

'Alarm'

ALERT OTHERS BY
ACTIVATING ALARM



C

'Contain'

THE EMERGENCY BY
CLOSING DOORS



E

'Evacuate'

EXTINGUISH THE FIRE
IF TRAINED AND
SAFE TO DO SO



P A S S

Pull



the **pin**

PULL



AIM

Squeeze



the **handle**

SQUEEZE

Sweep



side to side

SWEEP

https://emilms.fema.gov/is_0026/groups/159.html

Infection Prevention

It is your responsibility to minimize the risk of infection in your clients.



Follow standard precautions.



Wash your hands

Before & after contact with the client or the client's environment.



Wear gloves

If you will have contact with body fluids, contaminated items, mucous membranes, or non-intact skin.



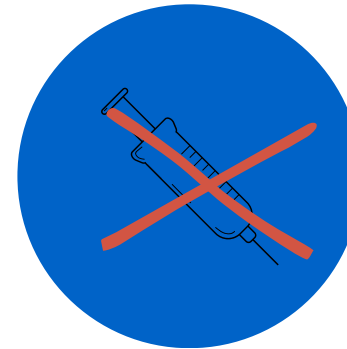
Wear a gown

As needed to protect your skin and clothing from body fluids.



Wear a mask & goggles

If you might get splashed or sprayed by body fluids.



Never handle sharps!

You can only remind clients to properly dispose of sharps.



Dispose of contaminated waste appropriately.



Disinfect environment routinely.

PPE is available at every Village Caregiving office.

(Homecare Pulse, 2022d)

Stop Germs! Wash Your Hands.

When?

- After using the bathroom
- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- After changing diapers or cleaning up a child who has used the toilet
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage



How?



Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



Lather your hands by rubbing them together with the soap. Be sure to lather the backs of your hands, between your fingers, and under your nails.



Scrub your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.



Rinse hands well under clean, running water.



Dry hands using a clean towel or air dry them.

Keeping hands clean is one of the most important things we can do to stop the spread of germs and stay healthy.

LIFE IS BETTER WITH

**CLEAN
HANDS**



www.cdc.gov/handwashing

This material was developed by CDC. The Life is Better with Clean Hands Campaign is made possible by a partnership between the CDC Foundation, GOJO, and Staples. HHS/CDC does not endorse commercial products, services, or companies.



CS319327-A

Glove Use



Putting On

1. Perform hand hygiene.
2. Ensure gloves are clean, fit properly, and are not damaged.
3. Pull gloves all the way up to your wrist.



Removing

1. Using one gloved hand, pull the other glove off downward, turning it inside out.
2. Hold the removed glove with your other gloved hand.
3. Place the index finger and middle finger of the ungloved hand inside the cuff of the glove, pulling the glove off inside out.
4. Discard gloves in the trash.
5. Perform hand hygiene.

Maintenance of a Clean, Safe & Healthy Environment

Continually ensure client's needs & preferences are met.

Ensure all equipment used for caring for the client is in safe condition and functions properly.

No smoking, especially with oxygen.

The environment should be clean & free of pests & rodents.

Watch for fall hazards!





Abuse & Neglect

Village Caregiving takes abuse, neglect, and exploitation very seriously. All clients at Village Caregiving are considered vulnerable (more at risk of being abused due to their ability to care for and protect themselves).



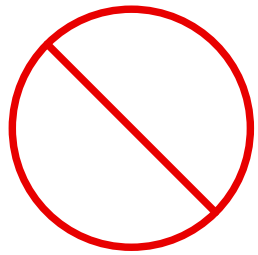
Definition

The U.S. Administration on Aging defines elder abuse as “any knowing, intentional, or negligent act by a caregiver or any other person that causes harm or a serious risk of harm to a vulnerable adult.”

All 50 states have elder abuse prevention laws. It is important to be familiar with the laws in your state.

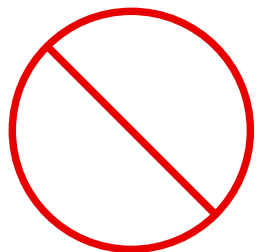


Types of Elder Abuse



Physical Abuse

The intentional use of physical force that results in illness, injury, pain, impaired function, distress, or death. Examples: choking, hitting, pushing.



Financial Abuse

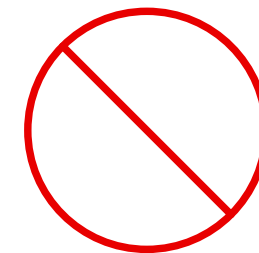
Exploitation- to misuse a person's money, property, or assets. Ex: Forging a client's signature.

Misappropriation- the illegal, dishonest, unfair, or wrongful, use of a person's money, property, or assets for one's own use. Ex. Taking money from a client.



Abandonment

Leaving a vulnerable adult alone. Ex. Caregiver leaving shift early without notice.



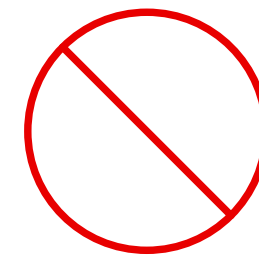
Neglect

Failure of a caregiver or responsible person to protect a vulnerable person from harm or provide food, water, clothing, shelter, health care, and other activities of daily living to a vulnerable person. Ex. Leaving the client sitting in urine or feces.



Sexual Abuse

Forced or unwanted sexual interaction of any kind. Remember that as a caregiver, you are NEVER allowed to have any kind of romantic or sexual interactions with the client.



Emotional Abuse

Verbal or nonverbal behavior that causes mental pain, anguish, fear, or distress. Ex. Yelling, threatening.

Signs of Abuse & Neglect



Frequent, unusual injuries

New and old bruises
Two different stories about how injury occurred



Lack of Hygiene & Safe, Adequate Living Conditions



Emotional Problems

Such as PTSD or panic attacks

Mandatory Reporting










As a homecare provider, you are considered a mandatory reporter. This means federal and state laws require that you report any suspected abuse.

If you yourself are suspected of abuse or neglect, you risk termination and even conviction of a crime.

Respect for the Client, Privacy & Property



Maintain professional boundaries, which help to separate actions that are helpful to those that are not. Do NOT:

-  **Spend time with clients outside your assigned hours.**
-  **Give nor accept gifts, money, or other valuables.**
-  **Borrow from the client or allow them to borrow from you.**
-  **Engage in romantic or sexual interactions, gestures, or relationships with the client.**
-  **Share personal nor financial information.**
-  **Touch the client's personal items without permission.**
-  **Eat the client's food.**
-  **Bring children, family, friends, pets, or anyone else with you to your shift- this includes leaving them in the car outside of the home.**
-  **It is not your role to care for nor clean up after the family and visitors of a client. Please contact the office if this occurs.**

HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) protects the privacy and security of a person's health information. Patient information includes all written, verbal, and electronic information.



HIPAA

- **Never take nor share photos or videos of clients, their family members or visitors.**
- **Never share information about a client, their family members, or visitors– including through email, text, or any forms of social media.**
- **Never write anything about a client in a newspaper, blog, or other form of written media.**
- **Never broadcast any information pertaining to a client, family member, or visitor on television, radio, or video.**
- **Do not discuss the client with anyone who is not directly involved in their care.**
- **VCG policy states that no client health information (including photos) may be posted on social media, even if the client gives permission. This is important to protect your client's privacy, protect yourself, and protect VCG.**
- **Always follow VCG's policies and procedures, which can be found with the director of your office.**
- **If you're ever uncertain about a situation where HIPAA may be in question, please contact your director.**

Failure to comply with HIPAA can result in terminations and other penalties/ sanctions!

Performing Safe & High Quality Care



Bath Time

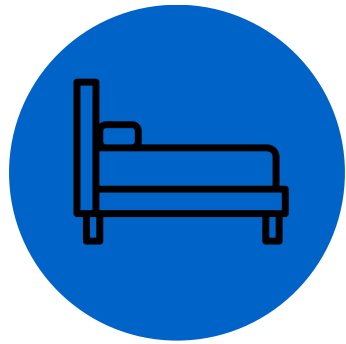
For clients, needing help with a bath or shower can often be a scary and stressful process, as they have not always been accustomed to being dependent on someone else to help them with this process.



Bath Tips

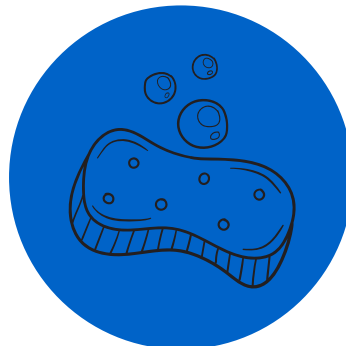


Types of Baths



Bed Bath

A full bath may be performed in bed if the patient is unable to move safely. It is important to maintain a safe environment by gathering all supplies prior to the bath and keeping them within reach. Use a light sheet or blanket to cover the patient. Uncover only the area being washed to help provide privacy and comfort.



Sponge or Partial

Similar to a bed bath but includes only the client's face, underarms, buttocks, and perineal area.



Tub

Can only give if ordered in the plan of care, as tub baths have a high risk of burn injuries, falls, and drowning. Do not fill the tub more than 6 inches deep. Should never last more than 20 minutes. You must feel secure in your ability to help the client in and out of the tub and with any assistive equipment. Encourage the client to use the toilet before starting the tub bath.



Shower

You can only give a shower if it is ordered in the plan of care. Use any assistive devices the patient requires, such as a shower chair. Place a non-slip rubber mat on the shower floor, ensuring it does not cover the drain.

Bath Safety

- **Wear rubber- soled shoes, ensure the floor is dry, & use non-slip rubber mats both in the shower or tub and outside of it.**
- **Keep a cell phone nearby when assisting the client in case of an emergency.**
- **Ensure adequate lighting and ventilation.**
- **Test the temperature of bath water prior to the client getting in with your wrist and have the client do the same.**
- **Empty the tub BEFORE helping the client to get out.**
- **Ensure both you and the client know how to properly use any assistive equipment. If not, contact your office for additional instruction prior to any baths!**
- **Never use any equipment as support that is not specifically for assistance, such as a towel bar.**
- **Notify your office immediately if you notice any safety hazards or feel the client is in need of assistive devices they do not have.**

Bath Assistive Devices



Transfer Benches

Allow the client to gradually slide into the tub.

https://en.wikipedia.org/wiki/Transfer_bench



Shower Chairs

Used for client unable to stand safely for periods of time.



Grab Bars

Installed to give the client a stable device to grab when transferring in and out of the tub. These must be securely installed and at the appropriate height and location for the client.

Other Examples

- Mechanic or hydraulic lifts
- Handheld showers
- Floor- to- ceiling grab poles
- Foam faucet protectors
- Long-handled sponges
- Wash mitts
- Adapters for turning on faucets

Hair Care

Do:

- Remove tangles by combing from the ends towards the roots.
- Listen to the client's preferences.
- When shampooing:
 - Provide a towel for their shoulders & a washcloth for their eyes.
 - Test the water temperature.
 - Offer cotton balls for the outer ear to prevent water drainage.



Do not:

- Cut or color a client's hair
- Use a flat or curling iron
- Use hair care items that belong to someone else

Nail & Foot Care



Use a wash basin & a washcloth to wash the feet and between the toes. Do not soak the feet of a client with diabetes, peripheral neuropathy, or peripheral vascular disease.



Gently clean under the nails using a plastic applicator stick and a soft cuticle or nail brush. Do not use an orange stick or cotton swab.



NEVER cut the client's nails!

Types of Toileting



Toilet

Some clients can safely ambulate to the restroom.



<https://www.istockphoto.com/photos/portable-urinal>

Handheld Urinal

May be used for clients who have difficulty with mobility.



Bedside Commode

A client may use a bedside commode if they are able to safely stand and pivot or walk a short distance but cannot safely walk to the restroom. Empty the pail into the toilet and clean using standard precautions.



Bedpan

May be used for bedbound clients.

Incontinence & Toileting

Respond promptly.

Act professionally.

Always wipe front to back.



Use safe transfer techniques.

Report unusual observations.

- A change in the client's ability to control elimination or change in the amount or frequency
- Blood or mucus in the urine or stool
- Pain with elimination
- Color or odor changes

Use Proper Body Mechanics when Lifting:

- Spread your feet at least shoulder width to maintain a wide base of support.
- Bend your legs, not your back.
- Lift object close to your body.
- Raise beds or tables to a comfortable working height.
- Keep your work area directly in front of you and turn your whole body when needed to avoid twisting.
- Push rather than pull when able.
- Do not lift objects higher than chest level.
- Use both hands and arms to lift.
- If the client has a hospital bed, raise to a comfortable working height when working with the client. Ensure safety by lowering the bed all the way down and raising upper side rails when not working at the bedside.
- If additional assistance is needed in moving a client, contact your office!

Only move a client alone if the client is...



Smaller than you



**Predictable & can follow
directions**



Can help in some way

If these 3 conditions are not met, do not move a client up alone; ask for help!



When using a wheelchair, you must ensure you push the wheelchair forward. Never pull the client backwards, especially up an incline! This poses a significant risk of falls.

Safe Transfer Tips

Determine the client's ability & willingness to transfer.

Ensure client is not dizzy, short of breath, or feels weak.

Ensure the area where client will walk is free of trip hazards.

Lock bed and wheelchair wheels, and fold up footrests on wheelchair.

Ensure client is wearing stable non-skid shoes.

Stand on the client's stronger side unless they are using an assistive device. If using an assistive device, stand on the client's weaker side.



Assistive Devices



Cane

Client should place the cane about 12 inches in front of the stronger side & bring weaker leg forward so it is even with the cane. Next, bring the stronger leg forward so it is slightly in front of the cane.



Walker

Ensure all feet of walker on securely on the ground. Have the client keep the feet securely in place when moving the walker forward. The walker should be picked up and moved, not slid. Once the walker is securely forward, the client can step forward.



Gait (Transfer) Belt

Apply around the waist. Grasp underneath or at the handles to support a client during transfers and when walking.

Hoyer Lifts & Sarah Steady Lifts



A lift may be needed to safely lift and transfer a client with significant mobility issues. In the case that your client has a lift, the Village Caregiving RN will go to the client's home with you to ensure proper use of the specific lift according to the manufacturer's instructions.

Some states and payer sources do not allow caregivers to use lifts– you MUST be aware of your state and payer source's rules regarding lifts.

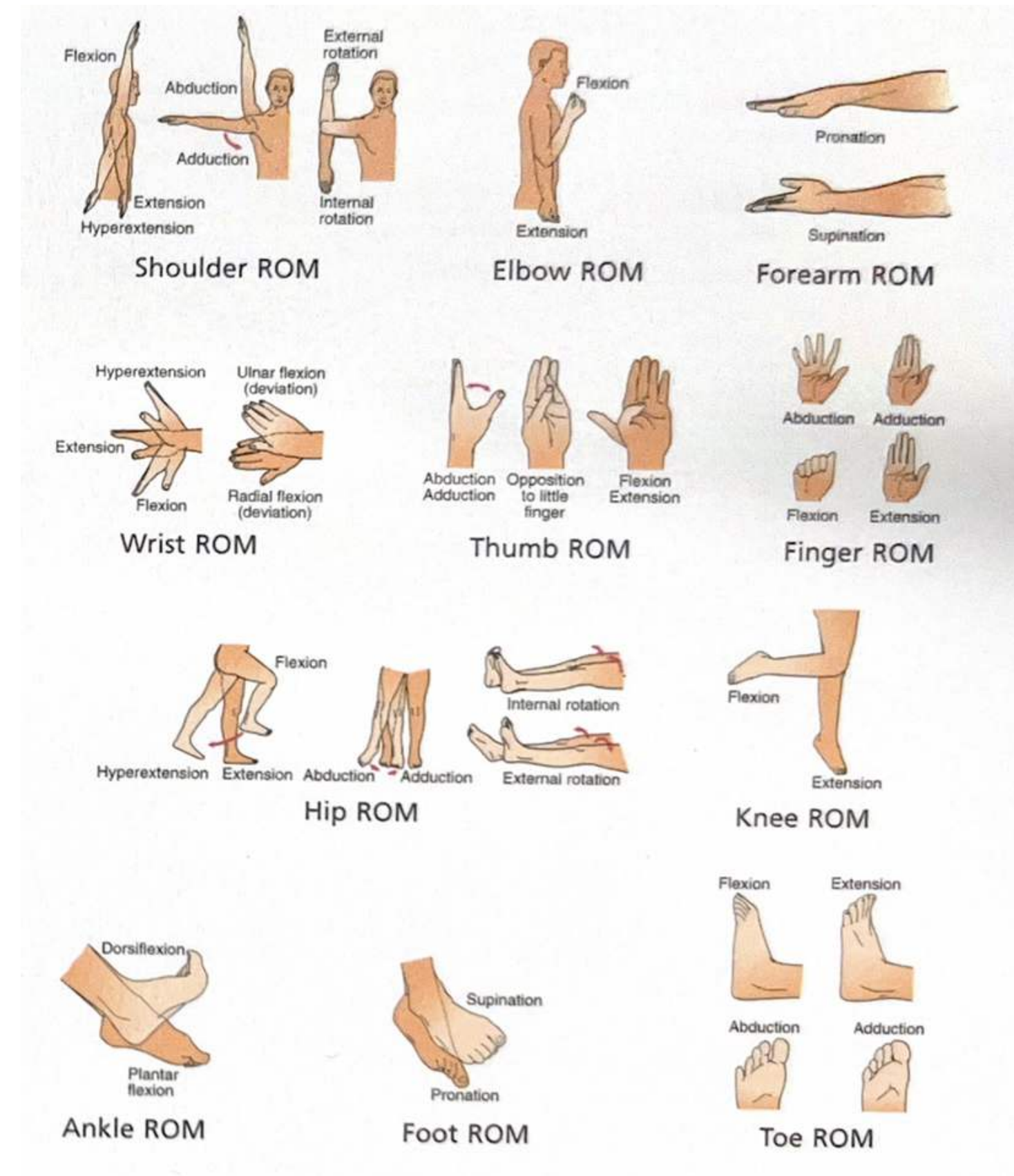
Range of Motion

Range of motion (ROM) involves moving the joints to help mitigate the risk of muscles wasting or hardening and other complications from bed rest.

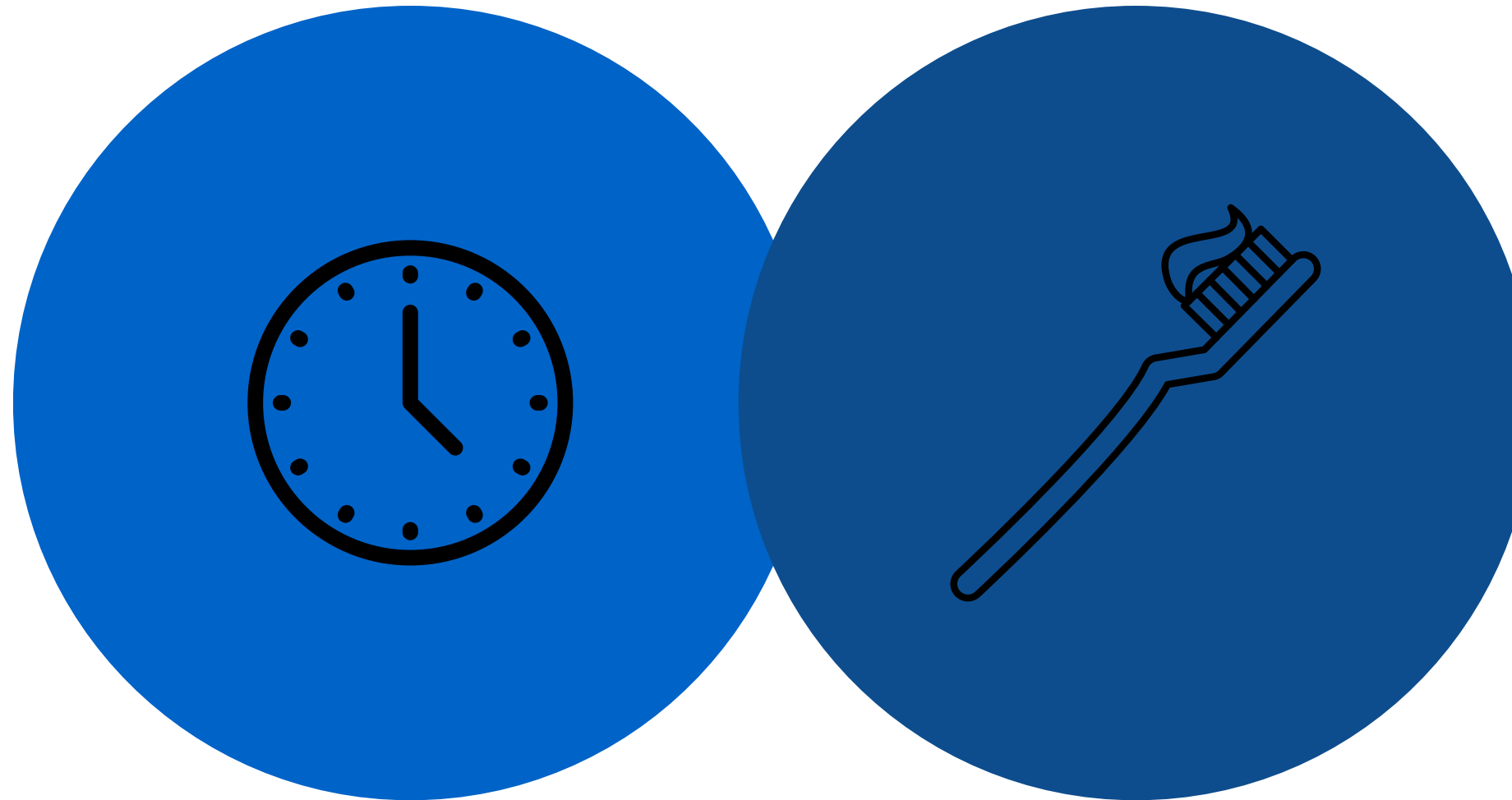
The client may be able to move their joints on their own (active ROM) or you may need to move their joints for them (passive ROM).

It is important to move the joint slowly and gently. Do not move the joint past its range of motion or to the point of pain!

Here are some examples of ways to move the joints through ROM:



Oral Care



Timing

While performing oral hygiene is best before and after meals, the client should perform oral hygiene every 12 hours at minimum.

Technique

Inspect the teeth, gums, and mucosa for any cracks, bleeding, swelling, or other unusual observations. If a client has dentures, ensure they are intact, clean, and function appropriately.

Meal Safety



Always ensure the client is in an upright, seated position before eating to prevent choking or aspiration. Offer small bites.

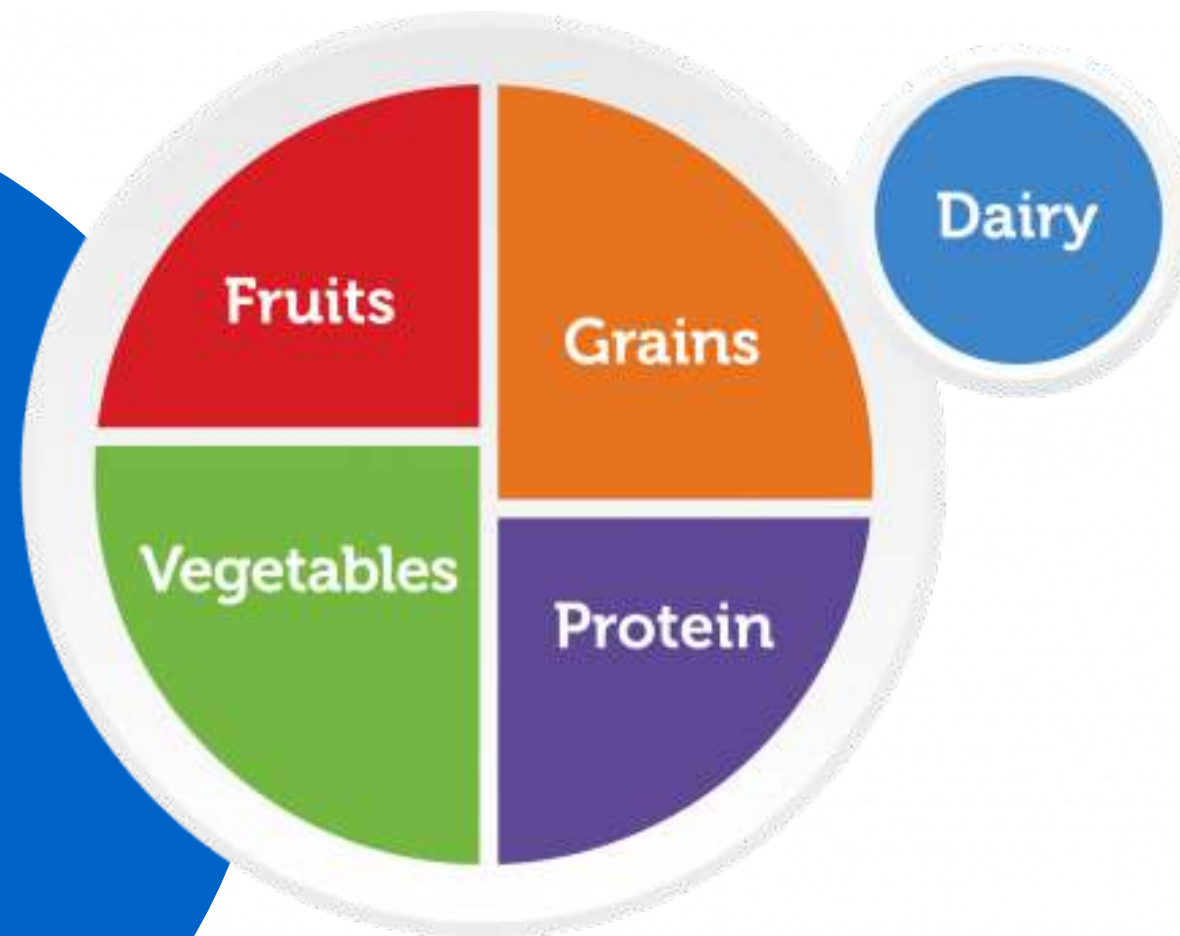


Never rush a meal! Pay attention to your client's ability to chew and swallow. Report any changes or if you do not think the diet is appropriate for the client.



If you suspect the client is choking or is having difficulty breathing after a meal, contact 911.

Meal Planning Assistance



A balanced diet is extremely important for your client's health. Know your client's dietary restrictions, and assist them in choosing healthy meal options.

Read food labels, and use resources such as [MyPlate.gov](https://www.myplate.gov) to assist you in planning healthy and affordable meals with your clients. The U.S. Department of Agriculture also has healthy, low-cost recipes by searching "[SNAP-Ed Recipes](#)."

Common Diets



Diabetic

Whole grains, fruits & vegetables, small to medium portions of meat, poultry, and beans, nonfat milk, non-fried foods, & small amounts of sugar and fats.



Liquid

Only liquids or foods that become liquid at room temperature, such as a popsicle.



Soft

Foods that are easy to chew and swallow without a lot of spices nor fiber (soft breads, cooked cereal, bananas, mashed potatoes, scrambled eggs, soup, yogurt, and pudding).



Mechanical Soft

Any food that can be mashed or blended. It differs from soft because mechanical soft can include foods with spices and fiber.



Pureed

Food is blended to the consistency of baby food. It is used for client's who are unable to chew.



Thickened Liquids

Thicken all liquids with a special thickener.

- Nectar Thick: A little thicker than water and can be drank. A straw should not be used to prevent risk of choking.
- Honey Thick: Liquids the consistency of honey. A spoon is needed.
- Pudding Thick: Liquids the thickness of pudding. They are too thick to pour, and a spoon is needed.

<https://www.digitaldiagnosticsolutions.com/single-post/the-pros-and-cons-of-thicken>

Dehydration



Dehydration can cause:

- Electrolyte imbalances
- Muscle cramps
- Changes in cognition
- Even death!



Common Signs:

- Dry mouth
- Dry skin
- Dark, concentrated urine
- Sunken eyes
- Constipation

If your client is showing signs of dehydration, contact your office immediately.

Signs of Malnutrition

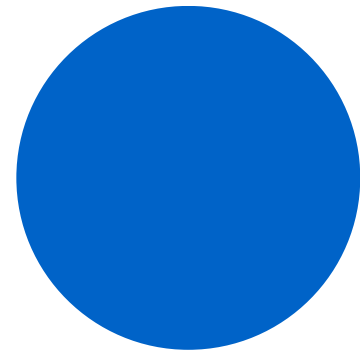


Common Signs:

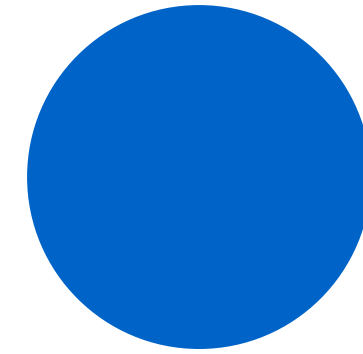
- Weight loss
- Weakness, faintness and fatigue
- Mood changes
- Dry, inelastic skin, rashes and lesions
- Brittle hair or hair loss
- Frequent and severe infections

If your client is showing signs of malnutrition, contact your office immediately.

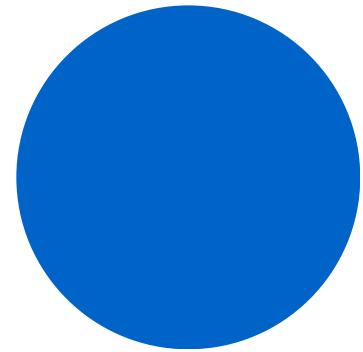
Ways to Mitigate the Risk of Pressure Injuries



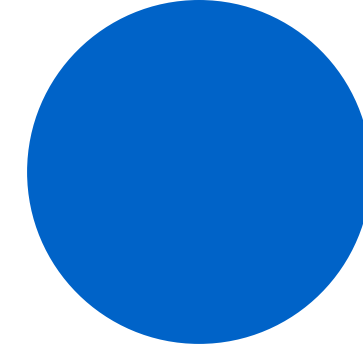
Ensure client is not sitting on any items or injured areas.



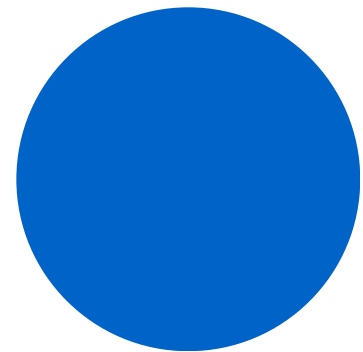
Pad bony areas, such as the heels.



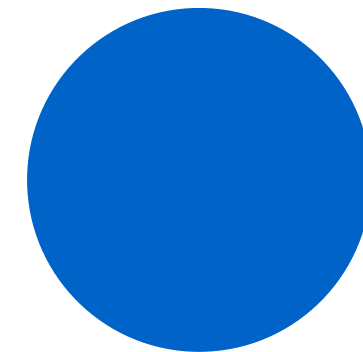
Ensure clothes and shoes fit properly.



Prevent friction and dragging when repositioning.



Turn bedbound clients every 2 hours. Ensure sheets are wrinkle-free.



Avoid moisture by ensuring client is dry. Incontinent clients are at high risk of skin breakdown!

Immediately report any changes to the skin! Even a small area of redness on the skin can be an early sign of a pressure injury.

Light Housekeeping

Your role in taking care of the client's home is to ensure the area is free of clutter that can cause injuries and free of bacteria that could cause illnesses.



Light Housekeeping



Includes:

- Sweeping
- Vacuuming
- Dusting
- Mopping
- Dishes
- Wiping counters
- Emptying trash



Does NOT include:

- Wiping baseboards
- Installing new equipment
- Cleaning up after other people in the client's home
- Mowing grass
- Any other intensive labor

Transporting Clients

Depending on the payer source, you may or may NOT be permitted to transport your client. If you are unsure on whether your client's payer source allows transportation, you MUST contact your office!



Transporting Clients

You must have a valid driver's license, registration, automobile insurance, and a safe driving record in order to transport a client.

Transportation must be in accordance with the care plan and any other state rules and regulations.

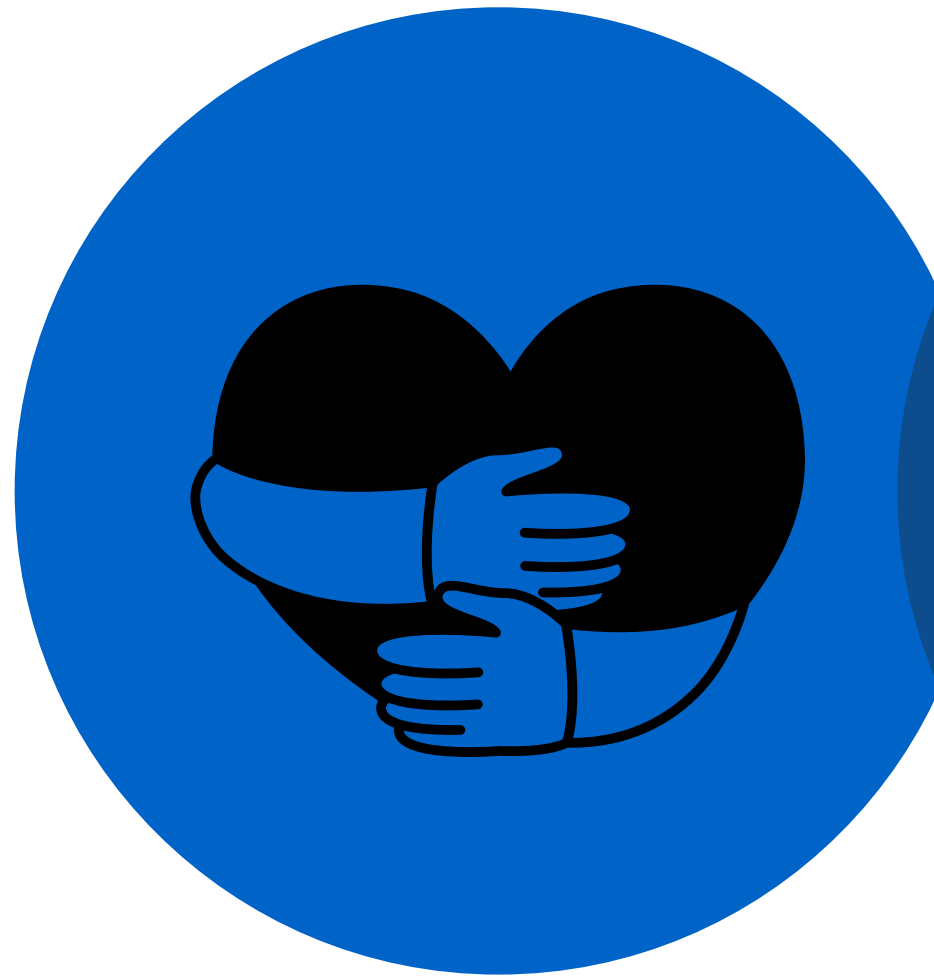
It is not appropriate for a caregiver to "borrow" a client's car for personal purposes.

If a PCA is asked to offer transportation for approved activities listed on the care plan the PCA will be reimbursed for mileage. Travel costs should be kept to a minimum.

If you are in an accident, your auto insurance is the primary insurer. Village Caregiving has hired/non - owned auto insurance, but that insurance is only a secondary insurer.

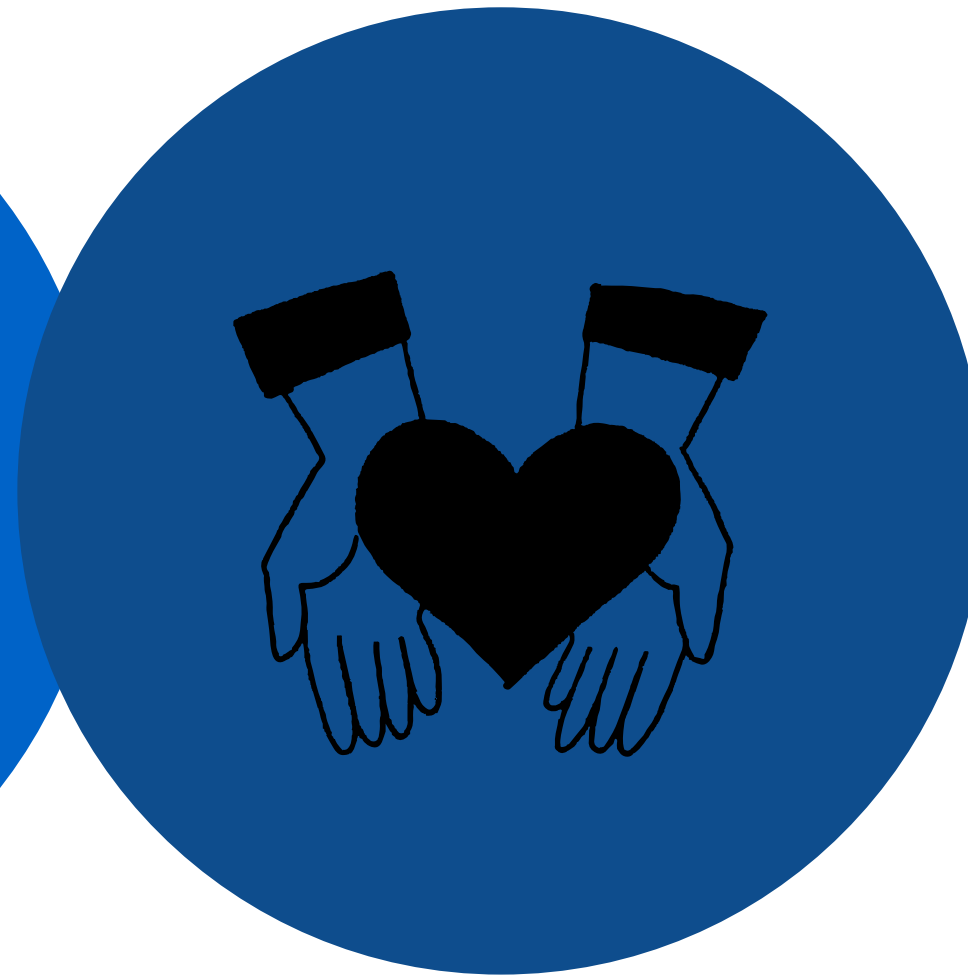
Put simply, you are responsible for driving safely and obeying all traffic laws/rules/regulations. If you are not confident in this, do not transport clients!





Respite Care

Respite care means providing care for a client to allow their primary caregiver or family members time to rest, recharge, and engage in other activities, which helps to prevent burnout.



Companionship

Clients look forward to the time you spend with them. Remember you may be one of the only people they interact with on a weekly basis. Make connections and engage in activities they enjoy.

Thank You!

Thank you for completing
this section of Village
Caregiving's caregiver
training.





Questions?



Sources

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