Home Health Aide Handbook 5th edition Fuzy Test Bank

SKU: 9781604251081-TEST-BANK

Instructor's Guide for The Home Health Aide Handbook

FIFTH EDITION

by Hartman Publishing, Inc.





Home Health Aide Handbook 5th edition Fuzy Test Bank

Credits

Managing Editor
Susan Alvare Hedman

Cover Designer
Kirsten Browne

Production
Tracy Kopsachilis

Proofreader
Kristin Calderon

Copyright Information

© 2019 by Hartman Publishing, Inc.
1313 Iron Avenue SW
Albuquerque, New Mexico 87102
(505) 291-1274
web: hartmanonline.com
email: orders@hartmanonline.com
Twitter: @HartmanPub

All rights reserved. No part of this book may be reproduced or modified, in any form or by any means, without permission in writing from the publisher.

ISBN 978-1-60425-109-8

PRINTED IN THE USA

Notice to Readers

Though the guidelines and procedures contained in this text are based on consultations with healthcare professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning healthcare practices. These guidelines change, and it is the reader's responsibility to be aware of these changes and of the policies and procedures of her or his healthcare facility.

The publisher, author, editors, and reviewers cannot accept any responsibility for errors or omissions or for any consequences from application of the information in this book and make no warranty, express or implied, with respect to the contents of the book. The publisher does not warrant or guarantee any of the products described herein or perform any analysis in connection with any of the product information contained herein.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Table of Contents

Preface v

Lesson Plans

I. Defining Home Health Services 1

II. Foundation of Client Care 5

III. Understanding Clients 17

IV. Client Care 27

V. Special Clients, Special Needs 38

VI. Home Management and Nutrition 50

VII. Caring for Yourself 59

Appendices

Appendix A Key Material 61

Appendix B Handouts 78

Appendix C Exams 122

Appendix D Answer Key for Exams 142

Appendix E Final Exam 147

Appendix F Answer Key for Final Exam 154

Home Health Aide Handbook 5th edition Fuzy Test Bank

Home Health Aide Handbook 5th edition Fuzy Test Bank

Preface

Welcome to the instructor's guide for the 5th edition of *The Home Health Aide Handbook*! We want to be your teaching partner, so we have tried to make this the most useful instructor's guide we have ever written. If you have suggestions for improving it, please let us know. If you teach topics not covered in the book, call us and we will do something about it!

We have included the textbook page numbers to make it easier for you to assign readings to your students.

Appendix A contains all of the key material masters that we have created for this course, and Appendix B contains the handouts. There are exams for all sections located in Appendix C. Appendix D contains the answers for each section's exams. Appendix E contains the final exam, and Appendix F has the answers to the final exam.

Hartman Publishing's complete instructor's guides (lesson plans, transparency masters, key material, handouts, exams, PowerPoint slides, key terms, and procedure checklists) are legally protected by United States copyright law. Each instructor's guide is licensed for use as part of an adoption and purchase of textbooks. If every student in your course has a purchased textbook, and we are able to verify your purchases of Hartman books, you are free to make as many copies as you need of the instructor's guide for use at your facility, school, or agency, as well as to modify items to suit your teaching needs. Electronic or online use is limited and conditional: permission is conveyed only to purchasing institutions and the material can only be accessed by students and instructors via a private, password-protected, non-public portal. **Posting or uploading of Hartman Publishing's material to a public website is expressly prohibited.**

This instructor's guide, along with additional exams, critical thinking questions, and other teaching material, is available at no charge for registered users at Hartman Publishing's instructor's website: instructors.hartmanonline.com. Access to online skills videos is free for approved adopters: www.hartmanonline.com/Videos.

We hope you find this guide helpful, thorough, and engaging. Call us with your feedback and suggestions! We would love to hear from you.

Happy teaching!

Home Health Aide Handbook 5th edition Fuzy Test Bank

Home Health Aide Handbook 5th edition Fuzy Test Bank

1.
Defining Home Health Services

Home Health Care
Agency Structure
HHA's Role

Supplemental Tools

KEY MATERIAL 1-1 WHO PAYS?

KEY MATERIAL 1-2 HOME HEALTH AGENCY ORGANIZATION CHART

KEY MATERIAL 1-3 CARE PLANNING PROCESS

HANDOUT 1-1 WHO IS VULNERABLE TO ABUSE OR NEGLECT?

SECTION 1: EXAM

Assignment

TEXTBOOK READING: PP. 1–15

Overview of Teaching Strategies

The purpose of the teaching strategy for this section is to explain home health care, emphasizing the specific roles and functions the home health aide will be expected to perform. It is important that the future HHA understands his or her role as a member of the healthcare team. The student should have a clear understanding of the roles and tasks of HHAs, as well as their responsibilities to themselves, their employer, and their clients. Discussions should first center on how the students see themselves and what they believe they will be doing in their new career. Discussions should then move on to the text curriculum and how the role of the HHA is explained there. Asking an experienced HHA to come to the class and discuss what he or she does from day to day would be a positive approach.

HHAs are expected to follow ethical and legal codes of conduct, which are specifically explained in this section. The students should be made aware of their responsibilities regarding legal and ethical issues. Information on HIPAA is included in this section and should be emphasized. It is important that students know that there are serious repercussions for breaches of confidentiality. It is equally important to emphasize empathy with regard to confidentiality. Ask how students might feel if confidential information about them was shared with people who did not have a need to know it. In addition, the clients for whom they will care have legal rights, and HHAs must respect those rights at all times.

Home Health Care

Meeting the Topic

TEXTBOOK P. 1

Lecture

Define the following terms:

- Chronic
- Medicare
- Medicaid

Display Key Material

1-1 WHO PAYS?

Discuss who pays for home care and the percentages shown in the key material. Emphasize the influence of Medicare as a payer. Discuss how fixed amounts for all patients can be good news or bad news for agencies.

Describe Medicare coverage:

- For people 65 or older or who have disabilities and illnesses
- Part A helps pay for care in a hospital or skilled nursing facility or for care from a home health agency or hospice. Part B helps pay for doctor services and other medical services and equipment. Part C allows private health insurance companies to provide Medicare benefits. Part D helps pay for medications prescribed for treatment.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Describe home health care coverage under Medicare:

- Intermittent care
- Agency must be certified by government.
- Recipients are homebound and under a doctor's care.

Describe facts about Medicaid:

- Funded by federal government and each state
- Eligibility and coverage varies and is determined by income and special circumstances.
- People must qualify for Medicaid.

Agency Structure

Meeting the Topic

TEXTBOOK P. 2

Lecture

Discuss who may refer clients to home health, such as physicians, hospitals, social services, and family members.

Display Key Material

1-2 HOME HEALTH AGENCY ORGANIZATION CHART

Review the key material. Point out where HHAs fit within the organization.

HHA's Role

Meeting the Topic

TEXTBOOK PP. 3–15

Lecture

Discuss aspects of HHAs' work in the home that are different from other settings:

- Housekeeping
- Family contact
- Independence
- Communication
- Transportation
- Safety
- Flexibility
- Working environment
- Client's home
- Client's comfort

Define the following term:

- Activities of daily living (ADLs)

Discuss the roles of each of the following team members:

- Home health aide (HHA)
- Case manager/supervisor
- Registered nurse (RN)
- Doctor (MD or DO)
- Physical therapist (PT or DPT)
- Occupational therapist (OT)
- Speech-language pathologist (SLP)
- Registered dietitian (RD or RDN)
- Medical social worker (MSW)
- Client and client's family

Emphasize the importance of the client as a member of the care team. Without the client, there is no team.

Describe the purpose of the care plan. Discuss how and why each client care plan is different. Emphasize that activities not listed on the care plan should not be performed. Review a sample client care plan if you have one available.

Discuss the following factors in formulating a care plan:

- Client's health and physical condition
- Diagnosis and treatment
- Goals or expectations
- Other needed services and resources, such as transportation, equipment, and additional income

Display Key Material

1-3 CARE PLANNING PROCESS

Discuss how each team member contributes to the care planning process. Where does the HHA play a part? Emphasize the importance of observing and reporting changes in the client's condition.

Define the following terms:

- Chain of command
- Liability
- Scope of practice

Discuss the chain of command and where the written chain of command comes from, including

Home Health Aide Handbook 5th edition Fuzy Test Bank

physician orders, plan of care, all care plans, and HHA documents. Emphasize how important it is that HHAs understand what they can and cannot do.

Remind students that they must never do anything outside of their scope of practice. Discuss the following tasks that are generally considered to be outside an HHA's scope of practice:

- Administering medications
- Inserting or removing tubes or objects in a client's body (thermometer is an exception)
- Doing something not listed in job description or not on the assignment sheet
- Performing procedures requiring sterile technique
- Diagnosing or prescribing treatments/ medications
- Telling client or family the medical diagnosis or the medical treatment plan

Define the following terms:

- Policy
- Procedure

Discuss common policies at agencies:

- All client information is confidential.
- Client's care plan must be followed.
- HHAs must report to supervisor at arranged times.
- HHAs must report changes in clients.
- HHAs should not discuss personal problems with clients or clients' families.
- HHAs must be punctual and dependable.
- HHAs must follow deadlines for documentation.
- HHAs must provide client care in pleasant, professional manner.
- HHAs must not give or accept gifts from clients.

Discuss the examples of professional relationships with clients and with employers on pages 8–9 in the textbook.

Define the following terms:

- Person-centered care
- Compassionate
- Empathetic
- Tactful
- Conscientious

Discuss the other characteristics: being sympathetic, honest, dependable, patient, respectful, unprejudiced, and tolerant. How could an HHA demonstrate these qualities?

Define the following terms:

- Ethics
- Laws

Review the guidelines for legal and ethical behavior for HHAs:

- Be honest.
- Protect clients' privacy and confidentiality.
- Report abuse or suspected abuse of clients.
- Follow the care plan and assignments.
- Do not perform any unassigned tasks or tasks outside the scope of practice.
- Report client observations and incidents.
- Document accurately and promptly.
- Follow rules on safety and infection prevention.
- Do not accept gifts or tips.
- Do not become personally or sexually involved with clients or family members.
- Do not bring friends or family members to clients' homes.

Define the following terms:

- Advance directives
- Mandated reporters
- Abuse
- Physical abuse
- Psychological abuse
- Verbal abuse
- Sexual abuse
- Neglect
- Negligence

Discuss what the Client's Bill of Rights means to HHAs. Discuss the ways HHAs can protect clients' rights. Ask students if they can think of ways to protect clients' rights other than those listed in the book.

Discuss the signs of abuse and neglect that HHAs should observe and report. Remind students that they are legally required to report suspected abuse and/or neglect.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Distribute Handout 1-1

WHO IS VULNERABLE TO ABUSE OR NEGLECT?

Give the students time to read the handout. Ask them, "Why are these people so vulnerable?" Possible answers include the following:

- Older people may be unable to stand up for themselves.
- Older people may be unable to report abuse or neglect to others.
- Older people may not understand that they have rights.
- Older people may be much more demanding to care for.
- Caregivers may not be trained properly.
- Caregivers may not understand clients' behavior.
- Caregivers may be overworked, tired, stressed, and unappreciated, on top of caring for someone who requires so much time and energy.

Define the following terms:

- Confidentiality
- Health Insurance Portability and Accountability Act (HIPAA)

Emphasize that HIPAA applies to all healthcare providers. Remind students of penalties imposed for failure to adhere to HIPAA.

Ask students if they can think of ways that breaches in confidentiality may occur and how to prevent them.

Section Review

Critical Thinking: Role Play

The following scenarios can be used as role-playing situations:

- HHA communicating a problem to employer
- HHA taking constructive criticism from the nurse supervisor
- HHA meeting a new client for the first time
- Experienced HHA telling a new HHA how to organize her time on a case
- Employer explaining to group of HHAs exactly what responsibilities he expects them to assume within the agency
- New HHA telling prospective employee what to expect the employer to provide to all HHA employees

Role-play a situation in which the HHA is told by the client's daughter about suspicious injuries suffered by the client, emphasizing the following:

- With whom on the care team should the HHA talk?
- With whom should the HHA not discuss the information?
- Whose rights must the HHA support?
- Why is it illegal for the HHA to discuss this situation away from work?

The use of social media (Facebook, Twitter, Instagram, YouTube, Snapchat, etc.) is widespread. Role-play a situation in which an HHA posts photos of a client on Facebook, which are seen by another HHA.

Critical Thinking: Case Study

HHA number one overhears another HHA threatening to hit the client; another time the client tells HHA number one that the bruises on his arm are from HHA number two grabbing and pushing him. What action must HHA number one take and why? What client rights are involved here?

While at the grocery store, an HHA overhears another HHA talking to a friend about a client's condition. What action should she take?

Exam

DISTRIBUTE SECTION I: EXAM (APPENDIX C)

Allow students enough time to finish the test. See Appendix D for answers to the exams.

Home Health Aide Handbook 5th edition Fuzy Test Bank

II.
Foundation of Client Care

Communication
Infection Prevention and Control
Safety and Body Mechanics
Emergencies

Supplemental Tools

KEY MATERIAL 2-1 USING YOUR SENSES

KEY MATERIAL 2-2 THE CHAIN OF INFECTION

KEY MATERIAL 2-3 BODY ALIGNMENT

KEY MATERIAL 2-4 LIFTING HEAVY OBJECTS FROM THE FLOOR

HANDOUT 2-1 ABBREVIATIONS

HANDOUT 2-2 PREFIXES, ROOTS, AND SUFFIXES

HANDOUT 2-3 ABBREVIATIONS FLASH CARDS

HANDOUT 2-4 INFECTION PREVENTION DEFINITIONS

HANDOUT 2-5 DONNING AND DOFFING A FULL SET OF PPE

HANDOUT 2-6 *C. DIFFICILE*

HANDOUT 2-7 BURNS

HANDOUT 2-8 BLEEDING

SECTION II: EXAM

Assignment

TEXTBOOK READING: PP. 16–52

Overview of Teaching Strategies

The bulk of information OBRA requires to be covered in its mandated 16 hours of instruction prior to contact is found in this chapter.

Communication: Home health aides communicate important medical information to the other members of the team, who expect the information to be accurate, factual, descriptive, and pertinent. Therefore, the students should learn in this chapter to be very clear about how, when, and why they communicate properly. The importance of both oral and written communication should be emphasized.

Infection Prevention and Control: The lecture for this section should begin with an overview of what infection prevention means and the role of the HHA in meeting the precautions established by OSHA, the CDC, and the individual agency. It is important for HHAs to understand that these state and federal laws require healthcare workers, including HHAs, to follow the guidelines presented in this section. When the student learns that preventing infection is a method of lowering the incidence of illness and disease, these procedures and guidelines will take on a new level of value. The instructor's ability to emphasize the importance of these guidelines will determine whether that sense of importance stays with students for years to come. These guidelines affect not only the client's health, but the health of the HHA as well, and this should be the central theme of the lecture. Demonstration of procedures to the class and return demonstration by the students either individually or in a group would be very beneficial as a teaching strategy.

Safety: Accidents involving injuries to HHAs or clients are always a serious concern. Keeping HHAs and clients as safe as possible is best accomplished by first emphasizing the principles of proper body mechanics, demonstrating them to students, and having students do a return demonstration. HHAs should be able to apply the principles of good body mechanics to the tasks required of them as they function in their jobs. The overall objective is to teach students that there are ways to prevent many injuries and accidents. HHAs should become more educated about various high-risk situations because awareness may make a difference for themselves and their clients.

Medical Emergencies: HHAs need to have the ability not only to recognize medical emergencies, but also to be able to respond appropriately. Students will learn the skills to remain calm and to take action in this section. Many agencies require HHAs

Home Health Aide Handbook 5th edition Fuzy Test Bank

to obtain CPR certification. It is important to note that policies regarding CPR vary from agency to agency.

Disasters: Students should understand disaster and evacuation plans, especially any policies the instructor or the agency may feel are relevant to weather in in your geographical location, such as hurricanes or tornadoes.

Communication

Meeting the Topic

TEXTBOOK PP. 16–21

Lecture and Discussion

Discuss the process of communication. Emphasize that effective and accurate communication is a critical part of an HHA's job.

Define the following term:

- Combative

Discuss ways to respond to combative behavior:

- Block blows or step out of the way.
- Allow the client time to calm down before the next interaction.
- Give the client space; stand at least an arm's length away.
- Stay calm. Lower tone of voice.
- Be flexible and patient.
- Stay neutral. Do not argue or respond to verbal attacks.
- Do not use gestures that could frighten or startle the client. Keep your hands open and in front of you.
- Be reassuring and supportive.
- Consider what provoked the client.
- Report inappropriate behavior.

Emphasize to students that they must never hit a client, no matter how the client may have provoked them. Hitting is considered abuse and may result in termination and/or legal action.

Define the following term:

- Nonverbal communication

Review barriers to communication and discuss ways to respond to each of them:

- Client does not hear, does not hear correctly, or does not understand.
- Client is difficult to understand.
- HHA, client, or others use words that are not understood.
- HHA uses slang or profanity.
- HHA uses clichés.
- HHA responds with "Why?"
- HHA gives advice.
- Client speaks different language.
- HHA or client uses nonverbal communication.

Critical Thinking: Conversation Starter

Ask the students to give examples of slang expressions, such as "as if," "sweet," "dead" (empty, quiet) "straight up," etc.

Discuss honesty in verbal communication and conflicts between verbal and nonverbal messages. How can the HHA use observation as a form of nonverbal communication with a client?

Distribute Handouts

2-1 ABBREVIATIONS

2-2 PREFIXES, ROOTS, AND SUFFIXES

These handouts are for the students' reference. Go over the terms or ask them to do so at home.

Distribute Handout

2-3 ABBREVIATIONS FLASH CARDS

Either cut along the dotted lines to make flash cards before class, or have students do this in class. Break the class into small groups. Show the flash cards to the class, one by one, and give points to the students who answer first. Alternate between showing abbreviations and showing meanings.

Lecture

Review the following occurrences that should be reported immediately. Ask students to give oral examples of how they would report each:

- Falls
- Chest pain
- Severe headache
- Difficulty breathing
- Abnormal pulse, respiration or blood pressure
- Change in mental status, such as confusion or increased confusion

Home Health Aide Handbook 5th edition Fuzy Test Bank

- Sudden weakness or loss of mobility
- High fever
- Loss of consciousness
- Change in level of consciousness
- Bleeding
- Swelling of a body part
- Change in condition
- Signs of abuse

Emphasize that oral reports should contain facts, not opinions. Oral reports should be documented.

Define the following term:

- Incontinence

Display Key Material

2-1 USING YOUR SENSES

Review the key material and discuss reporting from these four senses:

- Sight
- Hearing
- Touch
- Smell

Lecture

Discuss the following reasons that proper documentation is essential:

- Guarantees clear and complete communication
- Provides legal record of client's treatment
- Protects HHA and employer
- Provides up-to-date record of client's status and care

Review guidelines for proper documentation:

- Document care immediately after the visit. Never record care before it is done.
- Think before documenting. Be brief and clear.
- Use facts, not opinions.
- Use black ink when documenting by hand. If tablets or computers are used for documentation, the agency will provide training.
- Correct errors properly.
- Sign full name, title, and date.
- Document according to policy.

Define the following term:

- Incident reports

File an incident report when these incidents occur:

- Client falls.
- HHA or client breaks or damages something.
- An HHA makes a mistake in care.
- Client or family member makes a request that is outside HHA's scope of practice or not on assignment sheet.
- Client or family member makes sexual advances or remarks.
- Anything happens to make HHA feel uncomfortable, unsafe, or threatened.
- HHA gets injured on the job.
- HHA is exposed to blood or body fluids.

Review guidelines for making a call:

- Ask permission before using the client's phone.
- Identify self.
- Ask for person with whom you need to speak.
- If person is available, identify self again. State why you are calling.
- If person is unavailable, leave a message.
- Leave a brief and clear message.
- Say "Thank you" and be polite.

Review guidelines for answering a call:

- Identify self and position.
- Do not ask for more than a name and a number.
- Do not give out information about the client. Write down the name and number and tell client about the call.

Infection Prevention and Control

Meeting the Topic

TEXTBOOK PP. 22–34

Lecture

Define the following terms:

- Infection prevention
- Medical asepsis
- Pathogens
- Microorganisms
- Direct contact
- Indirect contact

Home Health Aide Handbook 5th edition Fuzy Test Bank

Display Key Material

2-2 THE CHAIN OF INFECTION

The chain of infection is a way of describing how disease is transmitted from one living being to another. Define and describe each of the six links in the chain of infection. Ask students to think of examples of each link.

Emphasize to students that if one of the links in the chain of infection is broken—by washing hands, for example—then the spread of infection is stopped.

Distribute Handout

2-4 INFECTION PREVENTION DEFINITIONS

Go over supplemental definitions relating to infection prevention or let students take handout home to review.

Lecture

Define the following terms:

- Standard Precautions
- Mucous membranes
- Infectious
- Sharps

Discuss how the CDC defines body fluids: tears, saliva, sputum (mucus coughed up), urine, feces, semen, vaginal secretions, pus or other wound drainage, and vomit. Sweat is not considered a body fluid.

Ask, "Why should Standard Precautions be followed on every client in your care?" Answer: Because you cannot tell by looking at a person whether he or she has an infectious disease.

Review and explain the Standard Precautions measures:

- Wash hands.
- Wear gloves.
- Remove gloves immediately when finished with a procedure.
- Immediately wash skin surfaces.
- Wear a disposable gown.
- Wear a mask and goggles and/or face shield.
- Wear gloves when handling sharp objects.
- Never attempt to recap needles or sharps.
- Bag all contaminated supplies.
- Clearly label body fluids.
- Dispose of contaminated waste properly.

Define the following term:

- Hand hygiene

Discuss your school's or agency's policy on alcohol-based rubs (hand sanitizers). Remind students that it is still very important to wash their hands with antimicrobial soap and water and not to rely solely on alcohol-based rubs.

Discuss the following times HHAs should wash their hands:

- When first arriving at a client's home
- Whenever hands are visibly soiled
- Before and after all contact with a client
- Before putting on gloves and after removing gloves
- After contact with any body fluids, mucous membranes, non-intact skin, or wound dressings
- After handling contaminated items
- Before and after making meals or working in the kitchen
- Before and after feeding a client
- Before getting clean linen
- Before reaching into the clean area of the supply bag
- After touching garbage
- After picking up anything from the floor
- Before and after using the toilet
- After nose-blowing or coughing or sneezing into hands
- Before and after eating
- After smoking
- After touching areas on the body, such as the mouth, face, eyes, hair, ears, or nose
- After any contact with pets or pet care items
- Before leaving a client's home

Emphasize that handwashing is the single most important thing HHAs can do to prevent the spread of disease.

Demonstration

Demonstrate the procedure *Washing hands (hand hygiene)*. Include all of the numbered steps in your

Home Health Aide Handbook 5th edition Fuzy Test Bank

demonstration. We also have a corresponding video for this skill that you can show to the students. Have the students return the demonstration.

Lecture

Define the following terms:

- Personal protective equipment (PPE)
- OSHA
- Perineal care

Remind students that PPE must be worn if the caregiver could come into contact with body fluids, mucous membranes, or open wounds. HHAs must wear gowns, along with masks and goggles or face shields, when splashing or spraying of body fluids or blood could occur.

Discuss the following points about gowns:

- Protect exposed skin
- Prevent soiling of clothing
- Should fully cover the torso, and the sleeves should fit snugly

Demonstration

Demonstrate the procedure *Putting on (donning) and removing (doffing) gown*. Include all of the numbered steps in your demonstration. We also have a corresponding video for this skill that you can show to the students. Have the students return the demonstration.

Lecture

Discuss the following points about masks and goggles:

- Masks are worn when the client has a respiratory illness.
- Masks should fully cover the nose and mouth.
- Masks should fit snugly over nose and mouth.
- Goggles should fit snugly over eyes or eyeglasses.

Demonstration

Demonstrate the procedure *Putting on (donning) mask and goggles*. Include all of the numbered steps in your demonstration. We also have a corresponding video for this skill that you can show to the students. Have the students return the demonstration.

Discuss the following tasks during which gloves should be worn:

- Any time an HHA might come into contact with blood or any body fluid, open wounds, or mucous membranes
- When performing or helping with mouth care or care of any mucous membrane
- When performing or helping with perineal care (care of the genital and anal area)
- When performing personal care on nonintact skin
- When assisting with personal care when the HHA has open sores or cuts on her hands
- When shaving a client
- When disposing of soiled bed linens, gowns, dressings, and pads
- When touching surfaces or equipment that is either visibly contaminated or may be contaminated

Discuss the times gloves should be changed:

- Immediately before contact with mucous membranes or broken skin
- If gloves become soiled, worn, or damaged

Demonstration

Demonstrate the procedure *Putting on (donning) gloves*. Include all of the numbered steps in your demonstration. We also have a corresponding video for this skill that you can show to the students. Have the students return the demonstration.

Discuss when gloves should be removed:

- After use
- Before caring for another client
- Before touching non-contaminated items or surfaces

Demonstration

Demonstrate the procedure *Removing (doffing) gloves*. Include all of the numbered steps in your demonstration. We also have a corresponding video for this skill that you can show to the students. Have the students return the demonstration.

Distribute Handout

2-5 DONNING AND DOFFING A FULL SET OF PPE

In the textbook, the PPE skills are separate, but they are combined here for the instructor's and students' reference, as well as in the corresponding video.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Lecture

Review these guidelines for cleaning spills involving blood, body fluids, or glass:

- Put on gloves (industrial strength).
- Clean using bleach solution or special products as ordered. Do not use bleach on fabrics.
- Always use tools, never hands, to pick up glass.
- Properly bag waste.

Discuss the three categories of Transmission-Based Precautions:

- Airborne Precautions
- Droplet Precautions
- Contact Precautions

Discuss airborne diseases and precautions to take.

- Transmission: pathogens transmitted through the air after being expelled; can remain floating for some time
- Examples: tuberculosis (TB), measles, chickenpox
- Precautions: N95 or HEPA masks, gown; handwashing; proper ventilation

Discuss droplet diseases and precautions to take.

- Transmission: spread by coughing, sneezing, talking, laughing, suctioning
- Example: mumps
- Precautions: Face mask; covering nose and mouth when sneezing or coughing; handwashing

Discuss contact diseases and precautions to take.

- Transmission: touching skin, wound, or infection
- Examples: conjunctivitis (pink eye), *C. diff*, lice, scabies
- Precautions: use PPE; wash hands with soap and water; avoid touching infected surfaces without gloves; avoid touching uninfected surfaces with contaminated gloves; avoid sharing towels, linens, and clothing; use disposable equipment when possible.

Review guidelines for isolation:

- Transmission-Based Precautions are always used in addition to Standard Precautions.
- Wash plates and utensils in hot water with antibacterial soap. Family members should use different utensils.
- Wear gloves when handing soiled laundry. Bag laundry in client's room. Wash client's laundry separately using hot water and detergent.
- Clean and disinfect non-disposable equipment before taking it from the home.
- Use bleach solution to clean up spills and disinfect surfaces.
- Clean and disinfect frequently-touched surfaces and equipment.
- Reassure clients that the disease, not the person, is being isolated.

Explain types of methicillin-resistant *Staphylococcus aureus* (MRSA):

- Hospital-associated MRSA (HA-MRSA)
- Community-associated MRSA (CA-MRSA)

Explain how MRSA is spread:

- Direct contact
- Indirect contact

Emphasize that handwashing is the single most important measure to control the spread of MRSA.

Distribute Handout

2-6 *C. DIFFICILE*

Go over information on the handout or have students read material at home.

Lecture

Define the following terms:

- Exposure control plan
- Bloodborne pathogens

Discuss the fact that all agencies have policies and procedures in place regarding infection prevention.

Review employers' responsibilities regarding infection prevention:

- Establish procedures and exposure control plan.
- Provide in-service education.
- Have written procedures for exposures.
- Provide proper PPE.
- Provide free hepatitis B vaccine.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Review employees' responsibilities regarding infection prevention:

- Follow Standard Precautions.
- Follow agency's policies and procedures.
- Follow care plans and assignments.
- Use PPE when appropriate.
- Take advantage of free hepatitis B vaccine.
- Immediately report exposure.
- Participate in education programs.

Safety and Body Mechanics

Meeting the Topic

TEXTBOOK PP. 34–42

Lecture

Discuss prevention as a key to safety. Emphasize that unsafe conditions should be reported ***before*** accidents occur.

Define the following term:

- Body mechanics

Display Key Material

2-3 BODY ALIGNMENT

Demonstrate these terms, referring to the key material:

- Alignment
- Base of support
- Center of gravity

Review the principles of body mechanics as related to each of the following:

Alignment

- Try to keep the body in alignment, with both sides of the body a mirror image of each other.
- Keep object close when carrying or lifting.
- Point feet and body toward the direction you are moving.
- Avoid twisting at waist.

Base of support

- Wide base is more stable.
- Stand with legs shoulder-width apart.

Center of gravity

- When standing, weight is centered in pelvis.
- Low center provides better base of support.
- Bend knees when lifting.

Demonstration

Demonstrate the following example of applying proper body mechanics. We also have a corresponding video for this topic that you can show students.

Lifting a heavy object from the floor:

- Spread feet shoulder-width apart.
- Bend knees.
- Use muscles in thighs, upper arms, and shoulders.
- Pull object close to body.
- When standing up, push with hip and thigh muscles.

Display Key Material

2-4 LIFTING HEAVY OBJECTS FROM THE FLOOR

Ask the students to look at the key material and discuss the right and wrong way to lift an object to avoid straining the back muscles.

Review the guidlines for using proper body mechanics:

- Assess the situation and remove obstacles.
- Use both arms and hands to lift, push, or carry objects.
- When lifting a heavy object from the floor, spread your feet shoulder-width apart. Bend your knees. Raise your body and the object together.
- Hold objects close to you when you are lifting or carrying them.
- Push or slide objects, rather than lifting them.
- Avoid bending and reaching as much as possible.
- If you are making a bed, adjust the height to a safe working level, usually waist high.
- When a task requires bending, use a good stance. Bend your knees to lower yourself, rather than bending from the waist.
- Avoid twisting at the waist when you are lifting or moving something. Instead, turn your whole body. Your feet should point toward what you are lifting or moving.
- Talk to clients before moving them. Agree on a signal. Lift or move on three so that everyone moves together.

Home Health Aide Handbook 5th edition Fuzy Test Bank

- To help a client sit up, stand up, or walk, place your feet shoulder-width apart. Place one foot in front of the other, and bend your knees. Your upper body should stay upright and in alignment.
- Never try to catch a falling client. If the client begins to fall, assist her to the floor.
- Report to the supervisor any task you feel that you cannot safely do.
- Have the right tools.
- Have footrests and pillows available.
- Keep tools, supplies, and clutter off the floor.
- Sit when you can.
- Use gait or transfer belts when assisting clients with ambulation or transfers.

Lecture

Define the following term:

- Disorientation

Discuss the following types of accidents and preventative measures, emphasizing that HHAs play an important role in promoting safety:

1. **Falls**

Causes: unsafe environment, loss of abilities, diseases, advanced age, medication, loss of vision, gait or balance problems, weakness, paralysis, and disorientation

Prevention:

- Clear walkways.
- Avoid waxing floors, and use nonskid mats.
- Have client wear nonskid shoes with laces tied.
- Have client wear clothing that is not too long.
- Keep frequently used personal items close.
- Clean up spills.
- Immediately report loose handrails.
- Mark uneven flooring or stairs.
- Improve lighting.
- Lock wheels and move footrests out of the way before transferring into or out of wheelchairs.
- Return beds to their lowest position.
- Offer trips to the bathroom often and respond to requests for bathroom assistance promptly.

2. **Burns/Scalds**

Causes: dry heat (irons, stoves, other electric appliances), wet heat (hot water or other liquids, steam), or chemicals (lye, acids)

Prevention:

- Roll up sleeves and avoid loose clothing when working at the stove.
- Check that the stove and appliances are off when you leave.
- Suggest water temperature be set no higher than 120°F to 130°F.
- Check water temperature on wrist before using.
- Keep space heaters away from beds, chairs, and draperies. Keep them out of bathrooms.
- Use low setting on hair dryers.
- Report frayed cords and unsafe appliances and do not use the appliances.
- Communicate about hot liquids.
- Pour hot drinks away from clients. Keep hot drinks away from edges of tables. Use lids.
- Make sure clients are sitting before serving hot drinks.

3. **Poisoning**

Cause: ingesting harmful substances

Prevention:

- Lock harmful substances away.
- Check medication for expired dates.
- Investigate any unusual odors.
- Post Poison Control Center number.

4. **Cuts**

Cause: sharp objects

Prevention:

- Put sharp objects out of reach of children and confused clients.
- Cut food away from yourself, keeping your fingers out of the way.
- Know proper first aid for cuts.

5. **Choking**

Causes: weakened, ill, or unconscious clients

Home Health Aide Handbook 5th edition Fuzy Test Bank

Prevention:

- Keep small objects out of reach of babies and small children.
- Cut food into bite-sized pieces.
- Do not place pillows, small toys, and other objects in a crib.
- Position infants on their backs for sleeping.
- Clients should eat sitting upright.

6. **Fire**

Discuss the following guidelines for fire safety and the HHA's role:

- Roll up sleeves and avoid loose clothing when cooking or around the stove.
- Stay in or near the kitchen when anything is cooking or baking.
- Store potholders, dish towels, and other flammable kitchen items away from the stove.
- Never store cookies, candy, or other items that may attract children above or near the stove.
- Discourage careless smoking and smoking in bed. Empty ashtrays frequently. Make sure ashtrays do not contain hot ashes or hot matches before emptying them. (For more information about smoking, see note at the end of this list regarding e-cigarettes.)
- Do not leave the dryer on when leaving the house. Empty lint traps each time you use the dryer.
- If you smell gas, report it immediately.
- Turn off space heaters when no one is home or everyone is asleep.
- Make sure smoke alarms are working.
- Make sure there are fire extinguishers in kitchen and know how to use them:
  - **P**ull the pin.
  - **A**im at the base of fire when spraying.
  - **S**queeze the handle.
  - **S**weep back and forth at the base of fire.
- In case of fire, use RACE.
  - **R**emove anyone from danger if you are not in danger.
  - **A**ctivate 911.
  - **C**ontain fire if possible.
  - **E**xtinguish with a fire extinguisher, or evacuate if the fire is large.
- Stay calm.
- Have designated meeting place outside.
- Do not try to put out a large fire.
- Keep keys to locking bars on windows or doors easily accessible.
- Remove blockage from windows or doors.
- Stay low.
- Do not use elevators.
- Check for heat coming from doors.
- Stop, drop, and roll if clothing catches fire.
- Use a damp covering over mouth and nose.
- Move away from the home to the designated meeting place.

Clients may use electronic cigarettes (e-cigarettes, e-cigs). Because this type of cigarette is becoming more common, it may be helpful to briefly explain it to students.

E-cigarettes do not contain tobacco. They contain a nicotine-containing liquid that is heated and turned into a vapor that the person inhales and exhales. Matches or lighters are not needed to light this type of cigarette. They use a battery to turn the liquid into a vapor.

The batteries in e-cigarettes need to be charged often, and the liquid in the cartridges needs to be restocked. The cartridges may either be refilled when they are empty or replaced.

Research on e-cigarettes is ongoing and rules and regulations regarding their use may change.

Review guidelines for traveling safety to and from clients' homes:

- Plan your route.
- Minimize distractions, including texts, emails, phone calls.
- Use turn signals.
- Use caution when backing up.
- Drive at a safe speed.
- Always wear your seat belt.
- Keep your driver's license, car insurance, and proof of registration with you.

Discuss these guidelines for high-crime areas:

- Park in well-lit areas.
- Leave valuables at home.

Home Health Aide Handbook 5th edition Fuzy Test Bank

- Do not take your purse with you.
- Lock your car.
- Walk confidently.
- Carry a whistle.
- Carry keys in your hand.
- Do not sit in your car.
- Avoid unsafe areas after dark.
- If worried about your safety, leave the area immediately and call your supervisor.
- Do not approach a home with strangers in front of it.
- Call your client before you visit.
- Never enter a vacant home.
- If necessary, ask for an escort.
- Be sure someone knows your schedule.

Emergencies

Meeting the Topic

TEXTBOOK PP. 42–52

Lecture

Ask the students to memorize the following steps in responding to an emergency:

- Assess the situation. Make sure you are not in danger and note the time.
- Assess the victim. Check the victim's level of consciousness.
- Call for help or send someone to get help.
- Remain calm and confident.
- Properly document the emergency after it is over.

Discuss the following symptoms of injury:

- Severe bleeding
- Changes in consciousness
- Irregular breathing
- Unusual color or feel to the skin
- Swollen places on the body
- Medical alert tags
- Anything the client says is painful

Define the following terms:

- First aid
- Cardiopulmonary resuscitation (CPR)
- Cyanotic

Emphasize that if students are not trained in CPR, they must never attempt to perform CPR. Also make sure students know that not all agencies permit HHAs to start CPR—even those who are trained to do so. It is important to know the agency's policy. If your agency arranges CPR training for students, now would be a good time to explain the details. The CPR instructor could come in for this portion of the class to give the overview.

Review the sign of choking:

- Putting hands to throat

Demonstration

Demonstrate the procedure *Performing abdominal thrusts for the conscious person*. Include all of the numbered steps in your demonstration. Have the students return the demonstration.

Lecture

Define the following terms:

- Insulin reaction
- Diabetic ketoacidosis (DKA)

Discuss the following signs and symptoms of insulin reaction (hypoglycemia):

- Hunger
- Headache
- Rapid pulse
- Low blood pressure
- Cold, clammy skin
- Confusion
- Trembling
- Blurred vision
- Numbness of lips and tongue
- Unconsciousness

Discuss the following signs and symptoms of diabetic ketoacidosis (DKA):

- Increased hunger
- Increased thirst
- Increased urination
- Abdominal pain
- Deep or labored breathing
- Breath that smells fruity or sweet
- Headache
- Weakness
- Rapid, weak pulse

Home Health Aide Handbook 5th edition Fuzy Test Bank

- Low blood pressure
- Dry skin
- Flushed cheeks
- Drowsiness
- Nausea and vomiting
- Shortness of breath or air hunger
- Unconsciousness

Define the following term:

- Cerebrovascular accident (CVA)

Discuss signs that a CVA/stroke is occurring:

- Facial numbness, weakness, or drooping, especially on one side
- Paralysis on one side of the body (hemiplegia)
- Arm or leg numbness or weakness, especially on one side (hemiparesis)
- Slurred speech or inability to speak (expressive aphasia)
- Inability to understand spoken or written words (receptive aphasia)
- Severe headache
- Blurred vision
- Ringing in the ears
- Redness in the face
- Noisy breathing
- Elevated blood pressure
- Slow pulse rate
- Nausea or vomiting
- Loss of bowel and bladder control
- Seizures
- Dizziness
- Loss of consciousness

In addition to the symptoms listed above, women may experience the following symptoms:

- Pain in the face, arms, and legs
- Hiccups
- Weakness
- Chest pain
- Shortness of breath
- Palpitations

It may be helpful to describe the acronym F.A.S.T. because it can be used as a way to remember the sudden signs that a stroke is occurring.

- (F)ace: Is one side of the face drooping? Is it numb? Ask the person to smile. Is the smile uneven?
- (A)rms: Is one arm numb or weak? Ask the person to raise both arms. Check to see if one arm drifts downward.
- (S)peech: Is the person's speech slurred? Is the person unable to speak? Can the person be understood? Ask the person to repeat a simple sentence and see if the sentence is repeated correctly.
- (T)ime: Time is of the utmost importance when responding to a stroke. If the person shows any of the symptoms listed above, call 911 immediately.

Let students know that the website for the American Stroke Association (strokeassociation.org) has more information.

Define the following terms:

- Myocardial infarction (MI)
- Dyspnea

Review the symptoms of a heart attack:

- Sudden, severe pain in the chest, usually on the left side or in the center behind the sternum
- Pain or discomfort in other areas of the body
- Indigestion or heartburn
- Nausea and vomiting
- Dyspnea
- Dizziness
- Skin color may be pale or bluish (cyanotic)
- Perspiration
- Cold and clammy skin
- Weak and irregular pulse rate
- Low blood pressure
- Anxiety and a sense of doom
- Denial of a heart problem
- Women can have MI without chest pressure or pain. Their most common symptoms are shortness of breath, pressure or pain in the lower chest or abdomen, dizziness, lightheadedness, fainting, nausea, sweating, neck and jaw pain, pressure in the upper back, or extreme fatigue. Some women's signs and symptoms are more flu-like.

Home Health Aide Handbook 5th edition Fuzy Test Bank

Demonstration

Demonstrate the procedure *Responding to a myocardial infarction*. Include all of the numbered steps in your demonstration. Have the students return the demonstration.

Distribute Handouts

2-7 BURNS and 2-8 BLEEDING

Go over information on the handouts or have students read material at home. Discuss the importance of doing no harm to severe burns, which could later cause infection or damage to skin that should be saved. Emphasize not using salve or grease. Remind students to always notify the supervisor when a client is burned. Burns may require emergency help.

Lecture and Discussion

Discuss different types of disasters, especially the ones that occur in your area. Review the following general guidelines for disasters:

- Remain calm.
- Stay informed via internet, radio, or TV.
- Be ready.
- Stay in contact with others.
- Locate disaster supplies.

Critical Thinking: Conversation Starter

Ask the students to share any experiences they have had with disasters and what actions they took that were appropriate or not appropriate.

Discuss the guidelines for specific disasters found on pages 49–52 of the textbook.

Section Review

Critical Thinking: Role Play

Some suggestions for role play and discussion include the following:

- Your client does not speak any English, but you want to gain his trust.
- Your client falls in the shower and complains of pain in her left hip.
- The supervisor asks you to report on your client's skin condition. What senses do you use?
- A client is behaving combatively and you want to respond appropriately.
- You receive a text alert that there is an active bomb threat situation at a school near your client's home.

Critical Thinking: Case Studies

You find your client on her bathroom floor.

- What is your first response?
- How would you determine whether she is conscious or unconscious at this time?
- What information would you be expected to give if you were to call 911?
- What would you do if you were not trained to do rescue breathing and the client was not breathing?
- Would you feel an ethical obligation to do CPR anyway if her life was in danger?

You and your friend are at a baseball game. Your friend begins to complain of shortness of breath and sudden pain and pressure in his chest.

- What do you immediately suspect is happening?
- What other medical information would be important to observe at this time?
- What questions would you ask him?
- What is the appropriate emergency action at this time?
- If he complains of thirst, would you offer him a drink of water?
- If he stops breathing and you cannot find a pulse, what action could possibly save his life?
- If you are not properly trained to handle this situation, what would you do?

Exam

DISTRIBUTE SECTION II: EXAM (APPENDIX C)

Allow students enough time to finish the test. See Appendix D for answers to the chapter exams.

Home Health Aide Handbook 5th edition Fuzy Test Bank