

Lifeworks Customized Support

PCA Training Manual

The purpose of this manual is to provide you with the basic information necessary to complete personal care skills as required by Department of Human Services Minnesota rule 9505.0335 (Personal Care Assistant)

Upon completion of this training the participant will have an understanding of the basic principles of caring for clients in their home. These include:

- Bowel and Bladder Care
- Skin care including prophylactic routine and palliative measures documented in the plan of care that are done to maintain the health of the skin
- Range of motion exercises
- Respiratory assistance
- Transfers
- Bathing, groom and hair washing necessary for personal hygiene
- Turning and positioning
- Assistance with furnishing medication that is ordinarily self administered
- Application and maintenance of prosthetics and orthotics
- Cleaning equipment
- Dressing or undressing
- Assisting with food, nutrition and diet activities
- Accompanying a recipient to obtain medical diagnosis or treatment and to attend other activities if the personal care assistant is needed to provide personal care services while the recipient is absent from his or her residence
- Performing other services essential to the effective performance of the duties listed above.

Learning will be accomplished by reading through this self-learning manual. Completion of the self-learning manual and sign off of skills will be documented on a performance form that will be signed by the employee and the support manager (co-employer with Lifeworks and designated supervisor of PCA)

Acknowledgements: The publications used as recourses in developing this manual:

Nasso, Jackie and Celia, Lisa. *Home Care Aide In-service Training Modules*. Delmar Learning, a division of Thomson Learning Inc. 2004

A Produce of Disability Access: Empowering Tribal members with Disabilities and their Families: Adult Aging and Disability. Spirit Lake Consulting, Inc.

McCarthy, Gunther and Hoffman. *The Nursing Assistant, Acute and Long Term Care*. Regents/Prentice Hall. 1994

Bowel and Bladder Care

Personal Cares and Freshening

Assisting a person in the bathroom can range from providing total physical assistance to simply monitoring and giving verbal reminders. Some people may need physical assistance to get on the toilet or to use the changing table to change disposable briefs (Attends). Others may need assistance to position a urinal or fasten and unfasten clothing. Some people just need verbal prompts or orientation to where the restrooms are in order to use them independently.

It is important that you know how a person communicates the need to use the bathroom and what his assistance needs are. If the person is on a bowel and bladder schedule, you are responsible for watching the time and making sure the person can use the bathroom on schedule. Read and become familiar with each individual's bathroom schedule, assistance procedure, and vulnerabilities before assisting in the bathroom.

- Bladder and bowel dysfunction can be very embarrassing for the client. Treat accidents in a matter-of-fact manner. Remind the client to void routinely if incontinence is a concern.
- Self-catheterization (removal of urine with a tube inserted into the bladder) may be essential for clients with urine retention. The procedure makes the client more susceptible to urinary infection; therefore, monitoring for signs of infection is important.
- Stool softeners, adequate intake of fluids and fiber, and suppositories are recommended to avoid constipation and obtain normal bowel function. A bowel regimen should be implemented to prevent fecal impaction. When the client is unable to defecate independently because of neurologic deficits, the feces must be removed manually. A nurse will manually remove the stool (digital removal of fecal impaction/disimpaction).
- Monitor the client's intake and output as necessary. Notify the support manager if a client has not had a bowel movement for three days or more.

Skin Care

Skin is part of the integumentary system and is the largest organ of the body. Nails are also part of the integumentary system. When other body systems are compromised, the integrity of the skin is often affected.

Oxygen, nutrients, and water are critical in maintaining skin integrity. Without these elements, the cells will die. If large amounts of cells (tissues) die, then the organ will be compromised. Since skin is the largest organ and covers the entire

body, skin is at a greater risk for breakdown. There are important reasons for maintaining skin integrity:

- Skin breakdown is easier to prevent than to heal.
- At least 1.7 billion people develop pressure ulcers annually, costing 2.2-3.6 billion dollars in care (Beckrich, K.A., 1998).
- Research suggests that the more people know about preventing skin breakdown, the better the chance of reducing pressure ulcers.
- Pressure ulcers cause pain, disfigurement, and changes in body image.

Skin Care

- Limitations frequently cause the client to become more sedentary or immobile. The client then has a greater potential for skin breakdown. Pressure ulcers (bedsores) are caused by prolonged pressure on the skin, decreasing the circulation.
- Keeping the skin clean and dry will help maintain the protective function of the skin.
- Moisturizers should be applied while the skin is still moist. Use lotions and provide back rubs to promote the circulation. Avoid rubbing alcohol because it tends to dry the skin.
- Use cornstarch on the edge of the bedpan to decrease friction on the skin.
- Clients with limited mobility need assistance with position changes. Remind clients in wheelchairs to readjust themselves in the chair to alleviate pressure.
- A client's position should be changed at least every two hours.
- Pressure from a crease can cause skin breakdown. The impression from the crease causes pressure on the underlying tissues, decreasing the circulation. Keep linens free of wrinkles.
- Use mechanical aids to help minimize pressure to sensitive areas.
- With each position change, assess the skin and provide skin care. Be careful when transferring clients to avoid friction. Do not pull clients. Use lifting devices rather than dragging clients.
- Observe for reddened areas and report changes to the support manager.

Caring For the Skin

Properly caring for the skin can drastically reduce the risk of skin breakdown. The skin's main function is protection; breaking down the first line of defense will lead to additional stress on the body. Notify the support manager if any redness or skin breakdown develops.

Keep Skin Clean

- Skin should be free of germs and odor.
- Daily baths can dry out the skin by removing natural moisture. Clients should bathe when dirty or when they have an odor.
- Avoid drying soaps, bubble baths, alcohol-based products, or perfumed moisturizers which may dry the skin. Use soaps that are free of perfume and hexachlorophene, or replace soap with a soap substitute, such as aqueous cream or emulsifying ointment.

- Emollients can be added to the water basin when giving a sponge bath.
- Bath water should be tepid, not hot.
- Discuss the method of bathing with your support manager (e.g., tub bath, shower, sponge bath).
- Maintain safety at all times.
- Commonly, clients do not want to bathe, and the PCA may become frustrated. Encourage the client to wash hands, face, and private areas daily, as well as change undergarments daily.
- Some clients wish to wear the same clothes every day. Choose your battles wisely by prioritizing what is important to the health of the client.
- Avoid irritating materials, such as wool or synthetic fabrics, next to the skin.

Keep Skin Dry

- Keeping the skin dry will help maintain the protective function of the skin.
- If water or moisture remains on the skin, it will cause skin breakdown (i.e., maceration). The result may be peeling of the epidermis.
- Gently pat dry the area between the toes, at skin folds, under the breasts, and around the groin area. Skin breakdown may occur in these areas because of the client's own body moisture. Use cornstarch to absorb moisture.
- Notify the support manager at the first sign of skin breakdown.

Managing Incontinence

- Change linens and the client's clothing as needed.
- Use disposable products for easy care.
- Protect the mattress with a disposable bed protector (a large plastic bag).
- Never have plastic in contact with the client's skin.

Moisturize After Bathing

- Topical emollients (moisturizers) should be applied while the skin is still moist.
- Smooth on lotion; do not rub. Blot excess lotion with a towel.

Increase Circulation

- Movement will help improve the circulation
- Assist with range-of-motion exercises if not contraindicated.
- Perform back rubs to improve the circulation, using circular motions.

Provide Proper Nutrition

- Encourage the client to eat a healthful diet.
- Encourage the intake of fluids, especially water.

Decrease Pressure to the Skin

- Pressure causes damage to the skin cells. Any pressure on the skin must be removed or the skin will break down. Unconsciously, we continually move about, shifting our weight and avoiding pressure even while sitting in a chair.

- Clients with limited mobility need assistance with position changes. Remind clients in wheelchairs to readjust position in the chair to alleviate pressure.
- A client's position should be changed at least every two hours.
- Keep a schedule of position changes. Alternate the client from side to back to side to stomach, if tolerated.
- Use the hands of a clock to set positions. The 12:00 position is lying on the back. Make changes at 12, 3, 6, and 9:00 or at 12, 2, 4, 6, 8, and 10:00 if turning is needed more frequently.
- Maintain proper body alignment of the client.
- When positioning, avoid friction to the skin.

Avoid Creases

- Pressure from a crease can cause skin breakdown.
- Remember the last time you wore something tight (e.g., jeans, watch, panty hose, socks)? The seams of the items cause an impression in the skin. This impression causes pressure on the underlying tissues, decreasing the circulation.
- This can also happen with wrinkles in the bed sheets. Keep linens free of wrinkles.

Mechanical Aids

Mechanical aids help minimize pressure to sensitive areas. Commonly used products include the following:

Foam Pads (Egg-Crate Mattress Pads)

- Foam pads resemble egg cartons.
- The pad is placed over mattress and is designed to reduce pressure on the skin.
- This item can be purchased in any home store.

Sheepskin

- Sheepskin is a natural fabric that is thick and soft.
- It is used to reduce friction and provide comfort.

Air Mattress

- The pressure in the mattress alternates, reducing pressure against the body.
- The air mattress has a built-in compressor and is placed over an existing mattress.

Gel Mattress

- This is a new mattress system.
- The gel in the mattress decreases pressure around bony prominences.

Powered Lateral Turning Beds

- These beds can turn the client automatically.
- They are used for clients who are immobile or paralyzed.

Range of Motion (ROM)

Kayaking, bow-hunting and wheelchair basketball are all great, but as individuals age and/or become more disabled their physical abilities may not enable them to continue participating. Exercise continues to be crucially important to keeping as healthy and physically capable as possible for a given individual.

What are range of motion exercises?

Range of motion is movement of each joint through its typical range of activity. Range of motion exercises mean exercising each joint of the client's body through its typical range of activity. The exercise can be either done by the client themselves or with the assistance of another individual. Exercising the joints is essential to avoid complications of bed rest, like contractures and muscle wasting.

Range of motion (ROM) exercises are done to preserve as long as possible the use of the joints on which they are performed. These exercises reduce stiffness and will prevent or at least slow down the freezing of joints in clients with limited movement. Range of motion is the term that is used to describe the amount of movement you have at each joint. Every joint in the body has a "normal" range of motion. Joints maintain their normal range of motion by being moved. It is therefore very important to move all your joints every day. Stiff joints can cause pain and can make it hard for you to do your normal daily activities. That is why it is so important for you to continue to move your joints.

Each person with a mobility impairment or illness needs a program of exercise tailored to his or her individual needs and abilities. With a prescription the doctor can either send client to an outpatient clinic to see a Physical Therapist or have one come to their home to help design a personalized exercise program. The therapist will see client until client or caregiver is independent with a home exercise program that you, the caregiver can follow through with daily.

It is important to remember that some diseases and disorders are progressive – this means the person loses more abilities over time. The type of ROM exercises the client will need will change. It is important to be hands-on when this occurs and ask the doctor to write client another prescription to see a therapist so your home exercise program can be modified.

Varieties of Range of Motion Exercises

There are different kinds of ROM exercises. There are stretching exercises you can do yourself when you have the muscle strength to move your joints through their complete ranges. These are called Active ROM exercises. There are Self-ROM exercises which involve using a stronger arm to assist a weaker arm to perform the exercises, eliminating the need for caregiver assistance.

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Then there are Passive ROM exercises which are done for a weaker person by a caregiver. Often a combination of the types of ROM exercises above will be used. For instance if a person has strong arms, but very weak legs, he would use an active ROM program for the arms independently and a passive ROM program for the legs. Even within a limb the type of exercise used can vary depending on the strength of the different muscle groups. People with increased muscle tone (spasticity) will also need to learn techniques to decrease the tone before exercising. The type of ROM exercises that are most effective for an individual is best determined by a therapist who can evaluate muscle strength and tone.

Lower Extremity Passive ROM Exercises

Lower extremity passive exercises are for someone else to stretch client's hips, legs, and knees if client is unable to do this himself/herself. These exercises should be done slowly and gently while client is lying on his/her back. Each exercise should be done ten times on each leg each day.

How to Perform Range of Motion Exercises

It is important that all exercise be performed in moderation. Fatigue will only increase the clients weakness and rob him/her of energy that is needed for daily routines and the activities enjoyed. If client finds that the set of exercises tires him/her, encourage client to talk to therapist. Changes can be made that will eliminate the risk of fatigue. Similarly, none of the exercises should cause pain. If client does experience pain when exercising, stop that exercise and talk to the therapist. It may be that the client and caregiver are not doing the exercise correctly, or perhaps some change to clients exercise program must be made.

If a client's joints are very painful and swollen, move them gently through their range of motion. These exercises should be done slowly and steadily. It is important with ROM exercises not to force movements and to stop a movement if it causes any pain. Damage to the joint space can occur if too much force is applied. Joint range of motion is done on one joint at a time. Stabilize with one hand just above the joint and place your other hand below the joint to move the part through its full range of motion. Client's physical therapist will tell client and caregiver/support manager how many times to do each one.

- Ideally, these exercises should be done once per day.
- Do each exercise 10 times or move to the point of resistance and hold for 30 seconds.
- Begin exercises slowly, doing each exercise a few times only and gradually build up to more.
- Try to achieve full range of motion by moving until you feel a slight stretch, but don't force a movement.
- Move only to the point of resistance. Do not force the movement.
- Keep limbs supported throughout motion.
- Move slowly, watching the client's face for response to ROM.

How to Help Someone with Range of Motion Exercises

- Do not exercise the joint to the point where the client begins to feel pain. If the client does not say anything watch his/her facial expressions for grimacing
- Exercise the joints for a short period of time a few times day
- Bring all joints through each movement three times
- Cradle the limb at the joint as it is exercised
- Adjust the joint carefully, steadily, and easily; try not to do it in sudden jerky movements
- Make sure to exercise the neck, shoulders, elbows, wrists, and forearms in addition to the fingers, hips, knees, ankles and toes.

Respiratory Assistance

Respiratory therapy is used to care for clients who have breathing problems. Oxygen therapy is one type of respiratory therapy. Several methods are used to deliver oxygen, including nasal tubes, masks, and tents. Only a nurse or a physician can adjust the oxygen flow. You may be called on, however to:

- Check the nasal opening for signs of irritation and to be sure that mucus is not blocking the oxygen flow
- Make sure tubing is secured, is not kinked, and that the client is not lying on it
- Give oral hygiene frequently to clients on oxygen, because oxygen dries out the mouth and nose. Avoid petroleum-based lubricants
- Make sure the head of the bed is elevated
- Follow special precautions to prevent fires

Respiratory therapy may also involve positioning the client to aid breathing. Clients may be positioned sitting up or leaning forward. A special positioning procedure called postural drainage helps to drain secretions from the client's body. Respiratory therapists may also use percussion (chest tapping to break up secretions) and a variety of breathing exercises to treat clients.

When you are giving care to clients with breathing problems, follow these guidelines:

- Encourage the client to rest between activities, such as eating, bathing and dressing. Avoid rushing the client.
- Encourage the client to take in fluids, which keep passages moist and thin out secretions
- Assist with breathing exercises according to the respiratory therapist's instructions. Remind the client to cough, if so instructed. Have the client cough, with the mouth closed into a tissue. Collect any sputum produced into the tissue and discard
- Make sure the client is positioned properly for his or her condition.

- Report to the nurse any changes in skin color, an increased respiratory rate at rest (over 20 respirations per minute), the presence and character of mucus and the presence and character of cough.

Transfers

Body mechanics/reminders:

- Always have a stable base of support.
- Maintain the center of gravity
- Get close to your client who is being lifted
- Use the larger muscles or muscle groups
- Use proper posture
- If you think it is too heavy to lift alone, get help
- Use coordinated movements
- Plan the move
- It is better to push, pull, or roll a client than to lift and carry them
- Use your leg muscles to lift a client, not your arm or back muscles
- Work with the direction of your efforts, not against them
- Bring your client to a comfortable position
- Avoid twisting motions

Steps to Properly Transfer a Client

1. Explain the procedure to the client.
2. Make sure the wheelchair/bed is in the locked position.
3. Position the wheelchair at a 45-degree angle.
 - a. Make sure the stronger side of the client faces the new location.
 - b. The client can use the extremities of the stronger side to assist in the transfer.
 - c. If it is unrealistic to transfer the client on the stronger side because of the floor plan of the home, transfer the client in the safest manner possible.
4. Keep both feet flat on the floor.
5. Spread your legs hip-width apart (about 10" to 12") for a broad base of support. If using the athletic stance, one foot should be in front of the other.
6. Face the client (no twisting).
7. Ask the client to slide to the edge of the chair/bed and lean forward about 20 degrees.
8. Make sure the client's feet are flat on the floor.
9. Bend your knees.
10. Place your arms under the client's arms and lock hands together around the client.
11. On the count of three, have the client stand using the arms of the chair for leverage.
12. Hold the client and lift by straightening the knees. The largest and strongest muscles of the legs (quadriceps femoris) do the lifting.
13. Maintain the natural "S" curve of the back.

14. Instruct the client to take steps toward the chair/destination. Use a rocking motion.
15. Move or pivot your feet, leading the client to the chair/destination, but continue at the client's pace. (Do not twist the back.)
16. Ask the client to tell you when he/she feels the seat of the chair/destination hit the back of her knees.
17. Bend and place the client into the chair/destination, maintaining hold as he/she slides to the back.
18. Do not let go of the client until he/she is securely in the chair/destination.

Personal Hygiene: Bathing, Grooming and Hair Washing

Personal hygiene and grooming activities are generally performed throughout the day as necessary to maintain comfort and cleanliness. The client need for help will depend on his/her age and condition. The PCA care plan will assist you in determining what this level of assistance is needed.

Bathing

- Bathing is a very personal activity. Provide as much privacy as possible without jeopardizing the client's safety
- Allow or encourage the client to do as much as possible him/her self
- Allow the client to choose the time and order of hygiene activity, follow their normal routine
- Use adaptive devices to allow the client more independence. The use of a shower bench permits the client to shower with less assistance, avoiding the need for a sponge bath
- Specially designed bathrooms allow the client to be more independent
- Practice good body mechanics at all times
- Review safe transfers and discuss any safety concerns with the support manager

Shampooing

A client's hair may be washed once a week or more frequently, depending on his or her condition and personal preference. Before shampooing, tell the client what you plan to do. Follow these guidelines for shampooing:

- Ask clients to choose the hair care products they prefer
- Avoid cold or drafty areas
- Protect clients' eyes and ears at all times
- Dry the hair right away
- Assist client in styling their hair

Oral Hygiene

Oral hygiene involves keeping the mouth and teeth clean. It is an essential part of daily client care. Teeth should be brushed before breakfast (unless the client prefers otherwise), after meals, at bedtime, and at other times as necessary.

Proper cleansing helps:

- Prevent bad breath and infections
- Prevent cavities, tooth decay and gum disease
- Increase the client's comfort and appetite

Daily Hair Care

Brushing and combing the hair are important parts of daily grooming. Well managed hair affects how people look and feel. Brushing the hair can be refreshing to the client, and it stimulates circulation of the scalp. As with other daily activities, you should promote independence but provide help as needed. Allow the client to choose how his or her hair should be combed or styled. Follow these guidelines for assisting with hair care:

- Handle hair gently
- Section the hair and work on one section at a time
- Clean their comb and brush after each use

Turning and Positioning

Proper Way to Stand When Assisting Someone

1. The feet face forward in the same direction as the knees.
2. The legs are straight, but not tense.
3. The spine is long. Do not slouch.
4. The curves of the spinal column are within normal limits (the "S" shape is maintained).
5. The head is upright.

Positioning a Client in Bed

When positioning a client in bed, the alignment of his body is the same as in a proper standing posture. The curves of the spine are maintained, the head is supported in line with the midline of the trunk, and rotation of the spine is avoided. (The neck, shoulders, and hips are all in alignment. The spinal cord is straight.) This alignment is maintained in all positions: back (supine), side lying, or stomach (prone). Support injured parts of the body. The rest should be left free to move. This will help the blood to circulate.

Moving a Client—Repositioning

A typical task is moving a client from the center to the side of the bed. If the client can assist, have him or her do as much as possible.

1. Explain the procedure to the client.
2. Stand on the side of the bed where you want the client to lie.
3. Place the client's arms across the chest.
4. Maintain a wide base.
5. Move the client's legs toward you.
6. Place your hands under each hip of the client and gently move the hips toward you. The hips may move only an inch or so at a time.
7. Place your hands under each shoulder of the client and gently move the upper torso toward you. The torso may move only an inch or so at a time.
8. Continue the above three steps until the client is at the determined site.
9. Assess the client for proper body alignment and position.

Assisting with Medication

As a PCA **you will not administer medications**. This is the responsibility of the nurse, client or family.

What a PCA can and cannot do with medications

- CAN give the container that holds the medicine to the client
- CAN notice if medications have been taken and encourage or remind the client to take the medications that have been ordered
- CANNOT take pills or other medication out of the bottle to give to the client (this is considered controlling dosage)
- CANNOT put the medication into the client's mouth (this is considered administering the medication)

Follow this rule: Never put hands or fingers inside the medicine bottle or container, and never touch a medication directly.

You may need to help the client take their medications; this can be done if the medications are pre-measured out and labeled with time and day that they are to be taken.

Application and Maintenance of Prosthetics and Orthotics

Some clients use other equipment to help them care for themselves and to improve their body image. Prosthesis is an artificial body part. There are prostheses to replace missing legs, arms, hands and feet. A client, who has had a limb amputated or surgically removed, can be fitted with an artificial one.

Women, who have had a mastectomy, or breast removal, can receive breast prosthesis. Artificial (glass) eyes are available for people who need to have an eye

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replaced. And dentures, or artificial teeth, are used in place of real teeth. In all cases, clients are fitted individually for prostheses. They are also given instructions on how to use them

When a body part is still present but is injured or impaired, an artificial support may be used. An orthotic is an appliance used to support, align, prevent, or correct deformities.

Braces are types of orthotics that support a weak part of the body or hold a part of the body in position. Braces may be made of metal, leather, and plastic. The most common type of braces are knee braces, knee immobilizers, back braces and lower leg braces.

If you take care of a client who has prostheses, orthotics, or braces, remember to:

- Take special care of skin, especially the bony parts where the prosthesis or orthotic touches the skin.
- Report to your support manager any wear or damage to the device
- Recognize that experienced clients know how to use and care for their own prosthesis or orthotic.
- Handle the device with care and store it in the appropriate place if it is not being used
- Clean the prosthesis according to individual instructions
- Clean clients' artificial eyes daily using soap and water or a special cleaning solution. Store them in eyecups half-filled with warm water. Encourage the client to remove, clean and replace his or her own artificial eye, if possible.

Cleaning Equipment

Keeping the clients surrounding clean is an important way to promote medical asepsis. The two primary ways in which this is done are through disinfection and sterilization. *Disinfection* means using a chemical substance or boiling water to kill most microorganisms. Disinfection slows the growth and activity of the microorganisms that are not killed. *Sterilization* means killing all microorganisms, including spores. Spores are bacteria that have formed a hard, protective shell around themselves. Disinfection does not usually kill spores as well as other microorganisms.

Some equipment is disposable. It is used once and then thrown away. This helps prevent infection from being spread. More expensive equipment must be cleaned and then sterilized.

- Clean clients' equipment to remove material such as blood or body fluids (i.e. wheelchairs, shower chairs.....)
- Damp dust clients living area
- Keep clean the supplies on the client's bedside stand

Assisting with Dressing or Undressing

As part of your job responsibility you will help clients dress and undress daily. Follow these guidelines when assisting any client with dressing and undressing:

- Provide privacy at all times. Cover the client in bed with a blanket.
- Begin undressing the client's strong or unaffected side first
- Begin dressing the client's weak or affected side first
- Encourage the client to do as much as possible.
- Encourage them to select their own clothing
- Check that clothes are clean, neat and in good repair, and that clothing does not constrict movement
- Ensure that clothing is appropriate for the weather and environment
- Make sure that clothing matches and isn't put on backwards.

Assisting with Food, Nutrition and Diet Activities

The Food Guide Pyramid

The Food Guide Pyramid is a graduated pyramid describing the recommended number of food servings as determined by the U.S. Department of Agriculture. The Food Guide Pyramid is a basic guide of what should be eaten daily and encourages the choice of healthier foods.

The pyramid divides foods into basic groups and recommends the number of daily servings needed for a healthy diet:

- Fats, oils, and sweets: use sparingly
- Milk, yogurt, and cheese: 2-3 servings
- Meat, poultry, fish, dry beans, eggs, and nuts: 2-3 servings
- Vegetables: 3-5 servings
- Fruit: 2-4 servings
- Bread, cereal, rice, and pasta: 6-11 servings

Nutrition

Assisting an individual to eat can range from total physical assistance to only an occasional verbal cue or simply observing and monitoring. **It is very important that you read and be familiar with that individual's eating procedure and vulnerabilities before assisting him/her with a meal.**

- A healthy diet, including fruits and vegetables, is good for everyone. Individuals with underlying illness or limitations need the nutrients to help fight complications. Encourage the client to eat a well-balanced diet.
- Poor nutrition can contribute to illness. The flu or a cold will exacerbate symptoms, resulting in greater disability.
- Keep the client well hydrated. Muscles work more efficiently when hydrated.

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- Encourage the client to eat a high-fiber diet to avoid constipation.
- Promote independence with meal preparation and eating. Have the client participate in the meal preparation as much as possible. Encourage the use of potholders during cooking to prevent burns.
- Allow the client to watch you in the kitchen if unable to participate in meal preparation. Always include the client in meal choices.
- Weakness or tremors make eating difficult. Adaptive utensils make mealtime less stressful.

Exercise and Activity

- A regular exercise program is good for body, mind, and spirit. Exercise reduces the possibility of coronary disease, lowers blood pressure, raises the "good" (high-density lipoprotein; HDL) cholesterol, helps to control weight, reduces the level of stress, and decreases the risk of diabetes.
- Encourage the client to perform exercises as per the care plan. Assist the client with greater disabilities with range-of-motion exercises. Medicating for pain before exercising can help reduce the client's discomfort and help complete the exercise program. Schedule rest periods within the exercise program.
- The program should be geared toward the client's ability. Success is accomplished by meeting a series of small goals that fit the individual's strengths and needs.
- Remaining active is vital for the total well-being of the client. The disability may cause the client to feel isolated from family and friends. Always encourage the client to participate in social activities.
- Monitor and report changes in activity level.

Traveling to Medical Treatment, Therapies and External Activities

As a PCA you may be asked or need to accompany a client to a medical appointment, therapy or outside activity. This will be identified in the client's care plan. Lifeworks policy states that you can utilize your own vehicle for this if the support manager and the employee mutually decide that the employee will be driving as part of their duties. PCA's must provide a valid driver's license and pass a motor vehicle check prior to driving.

The driver is responsible for:

1. All passengers using seatbelts and wheelchair transport equipment correctly.
2. Maintaining both a valid driver's license and personal automobile insurance.
3. Following specific guidelines for personal transportation outlined by the support manager.
4. Transporting clients to and from activities and appointments, excluding pay for mileage

You may also accompany the client on public transportation, such as city bus, taxi or medical van. The time spent with the client for medical appointments and activities will be included in your scheduled time.

Other Services

For any service and assistance that you as a PCA are asked to do and feel that you need additional specific training, please contact the support manager or your Lifeworks coordinator.

Sign the acknowledgment on the next page and return the acknowledgement to Lifeworks Human Resources.

PCA Choice Training Acknowledgment

I have received and read the Lifeworks PCA Choice training manual. I understand that the training manual is intended to provide an overview of the specific job duties that apply to the PCA position. Lifeworks may add or change any portion of this manual at its discretion.

I agree to follow the guidelines in the training manual, including any updates and modifications. I agree to keep this manual in my possession during my employment and to update with materials from Lifeworks when instructed to do so.

Employee Name (printed)

Date

Employee Signature

Date

Support Manager Signature

Date