

The Family Health Care Instructor Guide

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A. Beckingham, RN, PhD

M. Carroll, RN, BScN, MEd(Admin)

V.A. McKee, SStJ, CD, BScN

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INTRODUCTION TO THE FAMILY HEALTH CARE INSTRUCTOR GUIDE

PURPOSE OF THE FAMILY HEALTH CARE INSTRUCTOR GUIDE

The **Family Health Care Instructor Guide** contains information and guidelines which will help the instructor to teach the **Family Health Care** course to the general public. Through its use, the instructor will assist the student to become familiar with the knowledge, attitudes and skills required to care for an ill person at home.

Graduates of the **Family Health Care** course will be awarded a certificate in **Family Health Care**. To qualify for a **Family Health Care Certificate**, students must successfully pass a knowledge test and a skill performance test.

GOALS OF THE FAMILY HEALTH CARE INSTRUCTOR GUIDE

The Family Health Care Instructor Guide has been developed to assist the instructor to teach the Family Health Care course. Specifically the goals are:

1. to prepare the students in:
 - ! health promotion and prevention measures/techniques;
 - ! home and other adaptations required to care for an ill person at home;
 - ! skills required to administer basic nursing care to an ill person at home;
2. to standardize the teaching of the **Family Health Care** course; and
3. to improve and maintain the quality of the teaching in the **Family Health Care** course.

ELIGIBILITY

To be eligible to teach the **Family Health Care** course the instructor must possess a current **St. John Ambulance Health Care Instructor Certificate**.

ORGANIZATION OF THE FAMILY HEALTH CARE INSTRUCTOR GUIDE

The **Family Health Care Instructor Guide** is divided into fourteen teaching units which are distributed over twelve modules. The modules are:

Module 1	UNDERSTANDING HEALTH
Module 2(A)	NUTRITION
Module 2(B)	SPECIAL DIETS AND FEEDING TECHNIQUES
Module 3	ILLNESS IS A FAMILY AFFAIR
Module 4	PREVENTING ILLNESS AND INJURY
Module 5	ADAPTING THE ENVIRONMENT AND THE EQUIPMENT FOR THE ILL

Module 6	BODY MECHANICS
Module 7	COLLECTING INFORMATION ABOUT YOUR PATIENT
Module 8(A)	BASIC PERSONAL CARE - TOILETING AND BATHING
Module 8(B)	BASIC PERSONAL CARE - BACK CARE, FOOT CARE, DRESSING YOUR PATIENT
Module 9	MOUTH AND HAIR CARE
Module 10	BEDMAKING, EXERCISES AND POSITIONING
Module 11	MEDICATIONS
Module 12	TREATMENTS

LENGTH OF THE FAMILY HEALTH CARE COURSE

The **Family Health Care** course has been designed for a minimum of seventeen hours if all modules in the course are taught.

The student evaluation will increase the course length by a minimum of one (1) hour.

DIRECTIONS FOR THE USE OF THE FAMILY HEALTH CARE INSTRUCTOR GUIDE

Ensure before the start of the course that you have the space, equipment and storage facilities that you need to conduct the course.

Each module in the course contains a **PREAMBLE**, **OBJECTIVES**, an **OUTLINE OF CONTENT**, a **SAMPLE LESSON PLAN** and suggested **TEACHING/LEARNING STRATEGIES**.

The **PREAMBLE** Provides the instructor with an introduction to the main topics of the module and includes some pre-requisite tasks that are required to prepare for teaching of the module.

The **OBJECTIVES** specify the student learning outcomes for each module.

The **OUTLINE OF CONTENT** contains the information from **The Complete Handbook of Family Health Care** that is to be taught to students.

The **SAMPLE LESSON PLAN** contains suggested **Teaching Methods**, **Teaching/Learning Activities**, **Training Aids** and a **Time Frame** which the instructor may choose to use as a guideline.

The **TEACHING/LEARNING STRATEGIES** provide the instructor with suggested ways to teach the content of the module based on the **SAMPLE LESSON PLAN**. Additional or other creative methods are encouraged. For **Home Assignments**, students are encouraged to refer to books, journals, or references they may have at home or to use local library resources.

MODULE 1 - UNDERSTANDING HEALTH

A. PREAMBLE

Health is a positive state of physical, mental and social well-being. Not all of us can achieve optimal health. There are those with a chronic condition such as diabetes or a disability, such as blindness. But, even with a disease or disability we can have good health. Good health requires adequate food, exercise, sleep, a positive outlook and a supportive social environment. Our health is affected by what happens to us and how we respond. To promote health for yourself and those around you requires knowledge and practice. When you know good health practices and apply them to your own behaviour, then you are on the road to a healthy life.

In this module we will discuss the main components of health, why they are important and how individuals and groups can promote a healthy lifestyle.

Read this module and chapter one in the handbook and view the video “**Happiness is Health**”.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Describe what is meant by health.
2. Identify the components of physical health and their importance.
3. Identify the six exercises in mental health and their importance.
4. Identify behaviours which promote good health.
5. Describe resources in one's own community which can be used for a healthy lifestyle.

C. OUTLINE OF CONTENT

- ! **Nutrition**
- ! **Physical Fitness**
- ! **Sleep**
- ! **Emotional (Mental) Health**

SAMPLE LESSON PLAN

MODULE 1 - UNDERSTANDING HEALTH

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce course ! Review course arrangements ! Hand out reference material as needed	Flip chart/ black-board	20 min.
Lecture	! Introduce Module ! Outline objectives.	Flip chart/ black-board	5 min.
Lecture/ Question/ Answers	! Describe what is meant by health. ! Present components of physical and emotional health. ! Introduce video: - identifying points to be noted; and - responding to questions.	Flip chart/ black-board Video - Happiness Is Health	30 min.
Break			10 min.

<p>Brainstorming/ Discussion</p>	<p>!</p> <p>Divide class into three discussion groups.</p> <p>!</p> <p>Ask for volunteer recorder in each group.</p> <p>!</p> <p>Instruct groups to:</p> <ul style="list-style-type: none"> • identify the components of physical health, exercises in mental health and their importance; • make a list of behaviours which promote good health; and • enumerate community resources for use in promoting a healthy lifestyle and discuss implications for family health care. <p>!</p> <p>Recorders for each group will write group responses on flip chart/blackboard. Class will add any that have been missed.</p>	<p>Paper and pencils</p> <p>Flip chart/ black-board</p>	<p>30 min.</p>
<p>Summary Review and Module Evaluation</p>	<p>!</p> <p>Review points of lecture and brainstorming sessions.</p> <p>!</p> <p>Ask if there are any questions.</p> <p>!</p> <p>Display objective one on flipchart/blackboard.</p> <p>!</p> <p>Ask students to write down the objective and to write out the answer at home, which is to be handed in at the next session. They may use the handbook as a reference for their answer as well as other sources of information.</p> <p>!</p> <p>Assign required reading for next class.</p>	<p>Flip chart/ black-board</p>	<p>25 min.</p>

TEACHING/LEARNING STRATEGIES FOR MODULE 1

1. INTRODUCTION OF COURSE

Instructor Activity - Lecture

Introduce yourself to the class and the students to each other. Discuss the attendance requirements of the course. Identify what is necessary to obtain a certificate of qualification. Point out the facilities for breaks, where the washrooms are, if coffee, juice, etc. is available.

Review the building rules: fire safety, eating/drinking areas etc.

Discuss the class hours and the class schedule. Identify an emergency phone system for notice of class cancellation in the event of bad weather, illness, etc. Hand out reference material.

2. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the points listed below:

- ! review objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (brainstorming session); and
- ! tell the students there is a home assignment and describe the activities involved.

3. DEFINITION OF HEALTH AND THE IMPORTANCE OF AND RELATIONSHIP BETWEEN PHYSICAL AND EMOTIONAL HEALTH

- | | |
|---------------|--|
| Objective #1: | Describe and define what is meant by health. |
| Objective #2: | Identify the components of physical health and their importance. |
| Objective #3: | List six exercises that maintain emotional health and describe their importance. |

Instructor Activity - Lecture

The information to meet these objectives is presented in chapter one of the handbook. In addition, include the following points:

- health is more than the absence of disease; it is the well-being we feel and the capacity we have to enjoy life and cope with life stresses;
- each person has an individual responsibility to protect and promote their own health;

- activities and choices that affect our health must be made daily; and
- even with a chronic condition or disability, we can still achieve a measure of health and enjoy life.

To identify the component of physical health, include the points listed below:

Nutrition: All the things we eat and drink affect our health. The condition of our teeth and gums affects our eating and our health.

Adequate amounts of food are essential for:

- the best growth of children and youths;
- our resistance to infection;
- our recovery from disease; and
- our best performance and working efficiency.

Physical Fitness: List the benefits of regular physical activity. Describe what to do when establishing a physical fitness routine. Stress the precautions to be taken for the unfit and the elderly; i.e., check with a physician before attempting physical exercise, always begin very slowly and work up to the exercise programme.

Sleep: List what sleep does for the body and the mind. Mention that lifestyle factors such as tobacco, alcohol, coffee, stress, etc. can influence a good nights sleep.

To identify six exercises for mental health, emphasize the following points:

- emotional/mental health depends on one's ability to face problems and seek help to resolve them;
- unresolved problems can lead to tension and poor emotional health;
- one can have problems and still be emotionally healthy; and
- we can anticipate stressful events and prepare for support during those times; e.g., death of a loved one. arrival of a new baby, divorce, loss of job, moving home, etc.

Ask the class for examples of famous persons with a disability or chronic condition who have adapted to it with a positive emotional attitude. Such examples could include Terry Fox, Steve Fonyo, Rick Haven, Mary Tyler Moore (Diabetes)m Gary Coleman (kidney disease), Richard Thomas (deafness), etc.

Introduce the video, telling the class that it is a review of information presented in chapter one and in the lecture you have given. Inform the class that the video was made a decade ago, and while the information is correct there may be some omissions which we would include today. Ask the class to note the following points:

- influence of food, tobacco, alcohol, etc. on health;
- exercise and the types presented;
- methods of eating and mental health; and

- social health and the family.

Instructor Activity - Question/Answers

Ask for things omitted from the video which belong in a discussion of health, such as unemployment, fear of AIDS. etc. Ask the class for additional points which we would include today: drugs; suicide; traffic accidents from drunken driving; self-help groups for people with problems, such as eating for a child with **Cystic Fibrosis**; and having a husband who needs a kidney machine three times a week to survive, etc. These self-help groups provide valuable emotional support in times of crisis, help to keep people emotionally healthy, and assist in promoting family stability.

4. HEALTHY LIFESTYLES AND COMMUNITY RESOURCES

- Objective #4: Identify behaviours which promote good health.
- Objective #5: Describe resources in one's own community which can be used to encourage a healthy lifestyle.

Instructor Activity - Brainstorming/Discussion Session

Display the purpose of the brainstorming/discussion session clearly on the flip chart/blackboard. Divide the class into three groups. Ask for a volunteer from each group to record the points for the group. Provide paper and pencils. Circulate among the groups to ensure they stay on the topic. At the 20 minute mark, tell the class that they have ten minutes to finish their assignment. Have each recorder write the group's responses on the flip chart/blackboard.

Student Activities

Each group has 30 minutes to review the components of physical health, review the exercises in mental health and their importance, identify behaviours which promote good health and describe resources in their own community for a healthy lifestyle. Responses might include:

- moderation with alcohol and caffeine and the importance of eliminating use of tobacco;
- skating, skiing or other sports such as softball, soccer, basketball, tennis, squash;
- for those with little money and little energy-reserve, walking is a very good exercise as is swimming or cycling; and
- there may be recreational activities in the community not mentioned in the video.

5. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activity - Lecture

Review main points of lecture material and brainstorming session. Ask students if they have any questions. Describe the requirements of the home assignment i.e.; students are to write down in their own words what health means to each of them.

The answer should be written at home and presented at the next class.

Assign reading for next class.

MODULE 2(A) - NUTRITION

A. PREAMBLE

In this module the four basic food groups and their functions are covered as well as the daily servings recommended to maintain good health.

Food is important for growth, pregnancy, resistance to disease and recovery from illness. Eating and mealtimes are important social and cultural activities. Eating patterns are an important part of individual lifestyle.

Good nutrition is achieved by eating a variety of foods from the four food groups, by a balance of energy intake and activities, and by taking certain foods in moderation. A knowledge of what ensures a good daily intake and how to provide this for a family will promote health and prevent problems.

To prepare for the teaching of this module, read it through along with chapter two of The Complete Handbook of Family Health Care. The instructor should obtain copies of Canada's Food Guide, one for each student, and make copies of the Canada's Food Guide Scorecard. The instructor may also wish to write down on a flip chart/blackboard the main points of all lecture material contained in this module.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify the four basic food groups. .
2. Describe the two main functions of each food group.
3. Identify the number of servings from each food group required for a well balanced diet for one day for an adult.
4. Identify the changes in nutrition needs throughout the life cycle.
5. Document the preparation of one day's meals, from buying to serving, using one's own home resources.

C. OUTLINE OF CONTENT

- ! **The Basic Food Groups and Other Foods**
- ! **Planning A Daily Menu**
- ! **Food Plans for the Elderly**

SAMPLE LESSION PLAN

MODULE 2(A) - NUTRITION

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module ! Outline objectives ! Hand out reference material as required.	Flip chart/ blackboard	5 min.
Lecture	! Present the four basic food groups and their functions. ! Describe the recommended servings for each group. ! Describe the changes in nutritional needs throughout the life cycle.	Flip chart/ blackboard	25 min.
Brainstorming Session	! Divide class into small groups of 4-5 each. ! Ask for a volunteer recorder for each group. ! Instruct each group to: <ul style="list-style-type: none"> • identify the number of servings recommended in each group which meet daily requirements for an adult. ! Make a list of inexpensive foods available in the community from the four food groups.	Flip chart/ blackboard	25 min.
Break			10 min.

<p>Brainstorming Session</p>	<p>!</p> <p>Have students return to their small groups to:</p> <ul style="list-style-type: none"> • develop a daily menu of three meals for a family; • identify the steps necessary to plan, buy, prepare, cook, serve, and store the food for the family's daily menu of three meals <p>!</p> <p>Each recorder is to present menus and the steps to the class.</p>	<p>Flip chart/ blackboard</p>	<p>35 min.</p>
<p>Summary Review and Module Evaluation</p>	<p>!</p> <p>Summarize main points of lecture and brainstorming sessions.</p> <p>!</p> <p>Discuss home assignment.</p> <p>!</p> <p>Hand out copies of Canada's Food Guide Scorecard to each student.</p> <p>!</p> <p>Assign required reading for next class.</p>	<p>Flip chart/ blackboard</p> <p>Scorecards</p>	<p>20 min.</p>

TEACHING/LEARNING STRATEGIES FOR MODULE 2(A)

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module by making the following points:

- ! review the objectives for the module which have been previously written on a flip chart/blackboard;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (brainstorming sessions, take home assignment); and
- ! hand out copies of **Canada's Food Guide** and **Canada's Food Guide Scorecard**.

2. THE FOUR BASIC FOOD GROUPS, THEIR FUNCTION AND THE SERVINGS IN EACH GROUP

- | | |
|---------------|--|
| Objective #1: | Identify the four basic food groups. |
| Objective #2: | Describe the main functions of each food group. |
| Objective #3: | Identify the number of servings from each food group required in a well balanced diet for one day. |
| Objective #4: | Identify the changes in nutrition needs throughout the life cycle. |

Instructor Activity - Lecture

Review the basic food groups. Some of the points may be found in chapter two of the handbook under the heading **THE BASIC FOOD GROUPS AND OTHER FOODS**. Others are detailed below. Be sure to start off with a description of Canada's Food Guide. Such a description could include the following points.

- **Canada's Food Guide** is designed for Canadians over two years of age; it is a guideline to assist in making sensible food choices for nutrient needs and energy requirements;
- the essential food choices for a healthy diet are presented in four groups, which together make a complete circle; these are illustrated on the **Canada's Food Guide**; a person who eats the recommended servings from these four groups each day will get the necessary energy and nutrients for good health and growth.

The instructor should then make a list of the food groups by name on a flip chart/blackboard, each in a separate area. Ask the class to give examples of common foods appropriate to each group and write these on the list. Encourage them to think of foods available in their area, or favoured by their ethnic group. Examples of foods are given in **The Complete Handbook of Family Health Care** and on the **Canada's Food Guide**.

The foods of each group provide particular nutrients for the growth and maintenance of the body. It is helpful for the student to understand some of the functions of these for promotion of health and protection against illness.

When presenting the functions of the four food groups, the instructor should make the points that are in the list that follows.

The Meat and Alternates Group

This group provides:

- protein for growth and repair of body tissues, bone and muscle, and the production of antibodies to fight infection;
- iron for blood formation;
- vitamins for healthy skin, nerves, appetite and digestion; and
- fibre for bulk, to aid in elimination of body wastes and to prevent constipation.

The Milk and Milk-Products Group

This group provides:

- calcium for structure of bones and teeth, and prevention of **Osteoporosis**;
- protein for growth and repair of body tissues, bone and muscle, and antibodies to fight infection;
- vitamin D for formation of healthy bones and teeth; and
- vitamin A for healthy skin, hair, teeth and vision

The Fruits and Vegetables Group

This group provides:

- vitamin A for healthy skin, hair, teeth, and vision;
- vitamin C for healthy teeth and gums and strong blood vessels;
- carbohydrate for energy;
- fibre for bulk to aid in elimination of body wastes; and
- iron for blood formation.

The Breads and Cereals Group

This group provides:

- carbohydrate for energy;
- protein for growth and repair of body tissues, bone and muscle, and antibodies to

- fight infection;
- fibre for bulk to aid in elimination of body wastes;
- iron for blood formation; and
- vitamins for growth, appetite, normal digestion and function of the nervous system.

Emphasize the need for variety by showing that some nutrients are provided by more than one food group. By having a variety of foods we can ensure a healthy diet with the necessary nutrients, as well as increasing enjoyment of our meals.

Some foods should be consumed in moderation. It is particularly important to limit foods high in fat, salt, or sugar in order to reduce the risk of health problems such as Heart Disease, Dental Cavities, Diabetes, Obesity, and Hypertension. Moderation can be achieved by changing food preparation methods: broiling or baking instead of frying, substituting herbs and spices for salt, and reducing the amount of sugars in recipes up to one-third. If alcohol is used it is advisable to limit the amount.

To introduce the material on the number of servings for each food group, begin with definition of a serving. A serving is a portion of prepared food, in an amount recommended by **Canada's Food Guide** which gives needed daily nutrients. Refer to examples of servings in the handbook and in **Canada's Food Guide. (See ANNEX A).**

To identify the effect of the life cycle on nutritional requirements, emphasize the need to balance the intake of food with physical activity. Optimal body weight is achieved when energy intake (food calories in) balances body activity levels. Needs vary according to age, sex and activity.

The basic number of servings from Canada's Food Guide provides 1000-1400 kilocalories per day. However, most healthy people need a greater energy intake daily to maintain energy balance. To get additional energy one can increase the number and size of servings from the food groups. or one can add other foods and beverages not in the food guide.

The age groups of the life cycle are detailed below.

Children Ages 2-11 years

Children need sufficient food to support growth. This is the time of life when they are learning to accept new foods, and establish patterns of food eating and exercise. An extra serving of milk or milk products is suggested to provide more calcium for growing bones. A source of fluoride for strong teeth is recommended if this mineral is not in the community water supply. Your local dentist or community health unit can advise if a fluoride supplement is indicated for children.

Adolescents

Adolescents need more milk and milk products during their years of growth and maturation, and 3 to 4 servings are recommended. It is especially important for girls to have adequate iron intake and calcium to build strong bones which will resist Osteoporosis in later years. Teenagers should be encouraged in good eating patterns with wise choices for snacks. They may need help in planning nutritious weight control diets.

Pregnant and Breastfeeding Women

These women need 3 to 4 servings of milk and milk products to provide calcium for the growing infant as well as other nutrients. They will eat more to meet increased energy needs. Their weight gain should be monitored by a doctor or clinic.

The Elderly

As one gets to the older years energy requirements are less and servings will be smaller. However, older people need the same variety of foods as before. It is important to have adequate calcium intake especially for those women at risk of Osteoporosis.

Fibre in the diet helps to prevent constipation. Food choices and preparation will need to be made carefully when there are dental problems. The elderly are often concerned with rising food costs, and they can get practical help with planning from nutritionists or dietitians.

3. PLANNING A DAILY MENU

Instructor Activity - Brainstorming Session

Start the brainstorming session with the key points for planning a daily menu. These may be found in chapter two of the handbook under the sections PLANNING A DAILY MENU and FOOD PLANS FOR THE ELDERLY.

The instructor should then display the purpose of the brainstorming session clearly on the blackboard/flip chart. Hand out copies of Canada's Food Guide and divide the class into groups of four to five students.

Instruct the groups to list the four basic food groups with three examples of inexpensive foods available in the local community for each group.

Ask the groups to appoint a recorder and circulate among the groups to provide assistance as required. At the 20 minute mark, inform the class that they have five minutes to complete the task.

Advise recorders to retain their sample menus for later presentation to the class.

Student Activities

Students should develop the menu to meet the needs of an adult. They should identify suitable foods for each group. The fully developed menu might look like this:

Food Group	Number of Servings	Food Choices
Meat and Meat Alternatives	2 servings	1. 2. 3.
Milk and Milk Products	2 servings	1. 2. 3.
Breads and Cereals	3-5 servings	1. 2. 3.
Fruits and Vegetables	4-5 servings	1. 2. 3.

4. MEAL PLANNING AND PREPARATION FOR THE FAMILY

Objective #5: Document the preparation of one day's meals for a family, from buying to serving using home resources.

Instructor Activity - Brainstorming Activity

At the beginning of the session, have each recorder present their sample menu for an adult including the list of inexpensive foods chosen. Write down the different choices pointing out the different local foods chosen by all the groups, reinforcing the need for variety.

The instructor should then explain that healthy eating for an entire family involves planning and knowing what foods are available in the community according to season and locale.

Students should return to their original small groups and be provided with flip chart paper and marker pens.

Advise each group that they are planning breakfast, lunch, and dinner for a family that has at least one child under two years and one other child and at least one adult. Encourage each group to document meal preparation from the buying stage through to the cooking and serving stages.

Circulate among the groups to provide assistance as required. At the 30 minute mark, inform the groups that they have five minutes remaining.

Have each recorder present the menu planned for a family. Emphasize and reinforce the need for planning at each stage of food preparation.

Student Activities

Students should begin the task by describing the family according to age and sex.

For each member described, they should make a list of appropriate foods for each meal. The menu for the entire family should reflect the serving sizes for each person as well as the preparation method.

The sample menu used for planning a daily menu for an adult can be modified for use in the family situation.

5. SUMMARY REVIEW AND MODULE EVALUATION

The instructor may review the main points of all lecture material. Emphasis should be placed on those points which were poorly understood by students.

The home assignment should then be described. Students are instructed to fill in the section(s) of the **Canada's Food Guide Scorecard (See ANNEX B)** which applies to them using the present day's meals (or the previous day's meals) as a guide.

Explain that the scorecard can be used to check if intake is adequate for each member of the family over the age of two.

Students are to hand in their scorecards at the next class.

The instructor should then assign the required reading for next class.

Canada's Food Guide

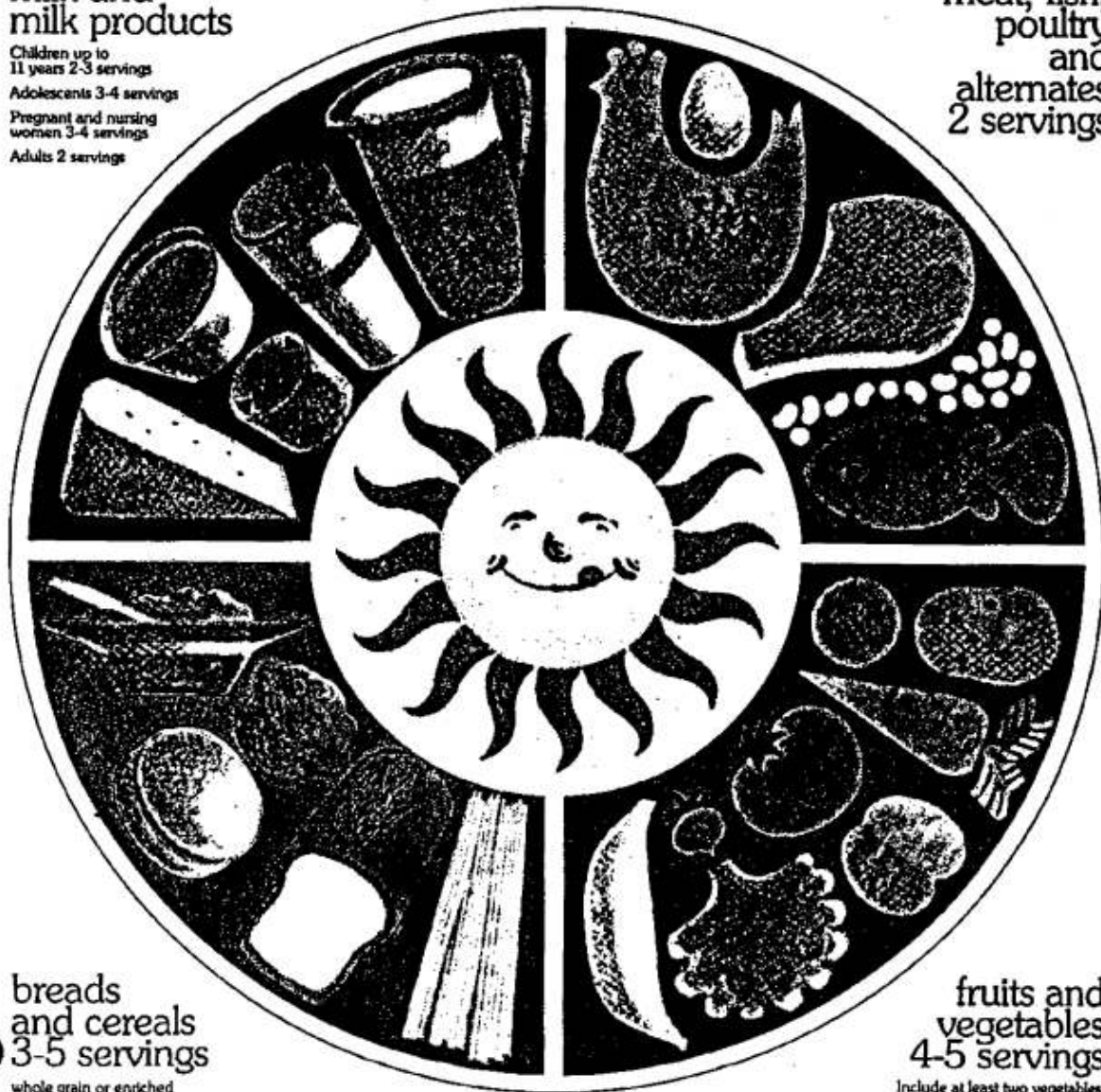
Eat a variety of foods from each group every day

milk and milk products

Children up to 11 years 2-3 servings
Adolescents 3-4 servings
Pregnant and nursing women 3-4 servings
Adults 2 servings

meat, fish, poultry and alternates

2 servings



bread and cereals

3-5 servings

whole grain or enriched

fruits and vegetables

4-5 servings

Include at least two vegetables.

Variety

Choose different kinds of foods from within each group in appropriate numbers of servings and portion sizes.

Energy Balance

Needs vary with age, sex and activity. Balance energy intake from foods with energy output from physical activity to control weight. Foods selected according to the Guide can supply 4000 - 6000 kJ

(kilojoules) (1000 - 1400 kilocalories). For additional energy, increase the number and size of servings from the various food groups and/or add other foods.

Moderation

Select and prepare foods with limited amounts of fat, sugar and salt. If alcohol is consumed, use limited amounts.

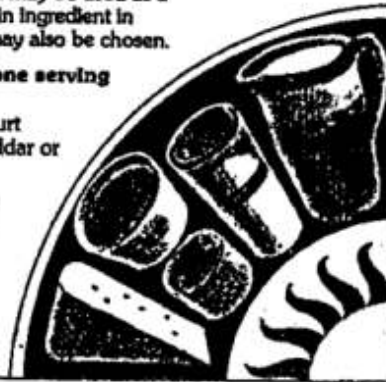
milk and milk products

- Children up to 11 years 2-3 servings
- Adolescents 3-4 servings
- Pregnant and nursing women 3-4 servings
- Adults 2 servings

Skim, 2%, whole, buttermilk, reconstituted dry or evaporated milk may be used as a beverage or as the main ingredient in other foods. Cheese may also be chosen.

Some examples of one serving
250 mL (1 cup) milk
175 mL (¾ cup) yoghurt
45 g (1½ ounces) cheddar or process cheese

In addition, a supplement of vitamin D is recommended when milk is consumed which does not contain added vitamin D.



meat, fish, poultry and alternates

2 servings

Some examples of one serving
60 to 90 g (2-3 ounces) cooked lean meat, fish, poultry or liver
60 mL (4 tablespoons) peanut butter
250 mL (1 cup) cooked dried peas, beans or lentils
125 mL (½ cup) nuts or seeds
60 g (2 ounces) cheddar cheese
125 mL (½ cup) cottage cheese
2 eggs

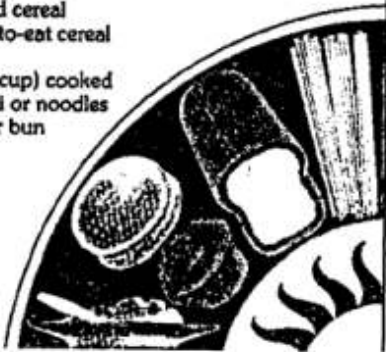


bread and cereals

3-5 servings

whole grain or enriched. Whole grain products are recommended.

Some examples of one serving
1 slice bread
125 mL (½ cup) cooked cereal
175 mL (¾ cup) ready-to-eat cereal
1 roll or muffin
125 to 175 mL (½ - ¾ cup) cooked rice, macaroni, spaghetti or noodles
½ hamburger or wiener bun



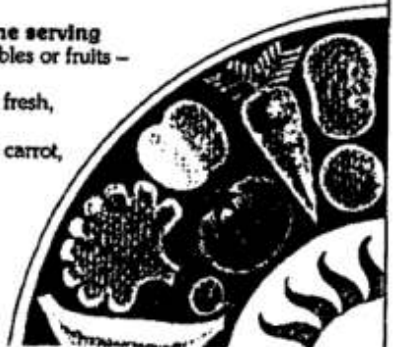
fruits and vegetables

4-5 servings

Include at least two vegetables.

Choose a variety of both vegetables and fruits — cooked, raw or their juices. Include yellow, green or green leafy vegetables.

Some examples of one serving
125 mL (½ cup) vegetables or fruits — fresh, frozen or canned
125 mL (½ cup) juice — fresh, frozen or canned
1 medium-sized potato, carrot, tomato, peach, apple, orange or banana



Chapter XII

CANADA'S FOOD GUIDE SCORECARD

The Scorecard on page 41 can show Canadians how well they understand and follow the FOOD GUIDE. Just as CANADA'S FOOD GUIDE is a guide to food choices, the Scorecard is considered to be a guide to food intakes. There are many ways in which food can be chosen to satisfy nutritional requirements. To establish whether or not an individual is at risk for a nutritional deficiency, a more rigid measure of nutrient intake plus other biochemical and clinical tests are needed.

Although there are instructions for self-administering this Scorecard, nutrition educators may want to discuss the results and suggest improvements where necessary. Sometimes people choose too many servings from one food group, and then are not hungry for foods from other food groups. An example would be a teenage boy who drinks a couple of litres of milk in a day, but is missing out on vegetable servings. He could substitute tomato or vegetable juice for some of the extra milk.

Additional foods and beverages, for example, butter, margarine, coffee and alcohol, are acceptable in moderate amounts as long as they do not replace recommended foods and the person is maintaining optimum energy balance.

Combination Dishes: Often people choose to combine foods from different food groups in appetizing combinations to add variety to their menus. A combination dish, such as macaroni and cheese or pizza, does not fit into one food group, but the major ingredients can be assigned to several food groups.

For example:

A serving of vegetable-beef stew (375 mL [1 ½ cups]) could have 60 g (2 ounces) beef + onions, potatoes and carrots
OR
MEAT, FISH, POULTRY AND ALTERNATES + FRUITS AND VEGETABLES
1 serving 1 serving

A serving of tuna casserole (250 mL [1 cup]) could have 30 g (1 ounce) tuna + noodles
OR
MEAT, FISH, POULTRY AND ALTERNATES + BREADS AND CEREALS
½ serving 1 serving

A slice of pepperoni pizza (1/8 of 35 cm or 14 inch) has crust + pepperoni + cheese + tomato, green pepper, etc.
OR
BREADS AND CEREALS + MEAT, FISH, POULTRY AND ALTERNATES + MILK AND MILK PRODUCTS + FRUITS AND VEGETABLES
1 serving ½ serving ½ serving 1 serving

SCORECARD INSTRUCTIONS

To use this Scorecard, first locate the section on the Scorecard (A, B, C or D) which applies to you.

The dark squares represent the minimum number of servings recommended in CANADA'S FOOD GUIDE. The lighter squares are for optional additional servings as recommended in the FOOD GUIDE. Extra servings above the number recommended are recorded in the unmarked spaces for each food group.

Each time you eat a food simply shade in the appropriate square or space. Each square represents one serving. If you have half a serving, shade in just half of the square. For example, shade in one square in BREADS AND CEREALS for one slice of toast. For one egg shade in half a square in the MEAT, FISH, POULTRY AND ALTERNATES.

In the FRUITS AND VEGETABLES section, write a V on the shaded squares which represent vegetable servings. At least one serving from this group should be fruit.

For combination dishes, separate the ingredients and score each separately. For a tuna and noodle casserole the score would be one serving of BREADS AND CEREALS and 1/2 serving of MEAT, FISH, POULTRY AND ALTERNATES.

For more servings from a food group than are recommended in the FOOD GUIDE, add extra check marks in the spaces. It is important to remember that extra servings from one food group cannot replace recommended servings from another food group when using CANADA'S FOOD GUIDE.

A desirable score would show all dark squares shaded and at least two V servings in the FRUITS AND VEGETABLES. Any dark square not shaded indicates that a serving from an important food group is missing. That could mean missing essential nutrients.

CANADA'S FOOD GUIDE SCORECARD

A. CHILDREN UP TO 11 YEARS

CANADA'S FOOD GUIDE	FRUITS AND VEGETABLES – 4 to 5 servings					
	BREADS AND CEREALS – 3 to 5 servings					
	MILK AND MILK PRODUCTS – 2 to 3 servings					
	MEAT, FISH, POULTRY AND ALTERNATES – 2 servings					
	ADDITIONAL FOODS AND BEVERAGES					

B. ADOLESCENTS

CANADA'S FOOD GUIDE	FRUITS AND VEGETABLES – 4 to 5 servings					
	BREADS AND CEREALS – 3 to 5 servings					
	MILK AND MILK PRODUCTS – 3 to 4 servings					
	MEAT, FISH, POULTRY AND ALTERNATES – 2 servings					
	ADDITIONAL FOODS AND BEVERAGES					

C. ADULTS

CANADA'S FOOD GUIDE	FRUITS AND VEGETABLES – 4 to 5 servings					
	BREADS AND CEREALS – 3 to 5 servings					
	MILK AND MILK PRODUCTS – 2 servings					
	MEAT, FISH, POULTRY AND ALTERNATES – 2 servings					
	ADDITIONAL FOODS AND BEVERAGES					

D. PREGNANT AND LACTATING WOMEN

CANADA'S FOOD GUIDE	FRUITS AND VEGETABLES – 4 to 5 servings					
	BREADS AND CEREALS – 3 to 5 servings					
	MILK AND MILK PRODUCTS – 3 to 4 servings					
	MEAT, FISH, POULTRY AND ALTERNATES – 2 servings					
	ADDITIONAL FOODS AND BEVERAGES					

MODULE 2(8) - SPECIAL DIETS AND FEEDING TECHNIQUES

A. PREAMBLE

For most people eating is a necessary and pleasant experience. However those who are ill may have little desire for food. Because of inactivity they have had little chance to build a healthy appetite. Therefore, it is important to make meals pleasant and appetizing in order to encourage good nutrition.

In this module we will discuss how to encourage eating for someone who is ill, by using special techniques and diets which promote good nutrition. Read through this module and chapter two, section two of the handbook, and preview the video **An Apple a Day is not Enough**.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Describe the purpose of a liquid diet and the types of food it may contain.
2. Describe the purpose of a soft diet and identify some of the foods it may contain.
3. Describe the purpose of a high residue diet and the type of food it may contain.
4. Demonstrate the steps to follow when feeding a patient.
5. Identify eight foods which can be given to a person on a weight-gaining diet.

C. OUTLINE OF CONTENT

! **General Guidelines**

! **Diets**

- Liquid diets
- Soft diets
- Special diets

! **Caring For Your Patient at Mealtimes**

! **Some Thoughts on Feeding Techniques**

SAMPLE LESSON PLAN

MODULE 2(B) - SPECIAL DIETS AND FEEDING TECHNIQUES

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	<ul style="list-style-type: none"> ! Introduce the module. ! Outline objectives. 	Flip chart/ blackboard	5 min.
Lecture	<ul style="list-style-type: none"> ! Review general guidelines as given in handbook. ! Present diets: liquid, soft, high residue, weight-gaining. ! Identify the foods each contains. ! Introduce video, identifying points to be noted. 	Flip chart/ blackboard Video: An Apple a Day is Not Enough	15 min.
Demonstration/ Return Demonstration	<ul style="list-style-type: none"> ! Divide students into groups of three - one to act as patient, one to read out the steps for feeding a patient, and a third to carry out the procedure. ! Each student will demonstrate the procedure of feeding a patient. 	Chair Towel Tray Plate Knife Fork Spoon Cup Straw	15 min.
Brainstorming Session	<ul style="list-style-type: none"> ! Students will stay in their groups of three; one will act as a recorder. ! Each group will compose items for four meals: one liquid, one soft, one high residue, and one weight-gaining. ! Recorders will record the group's meals on the flip chart paper. ! Each group presents its meals to the class. ! Fill in knowledge gaps as required. 	Flip chart/ blackboard	15 min.

Summary Review	! Review meals on flip chart. ! Identify main points of diets. ! Ask for questions.	Flip chart/ blackboard	5 min.
Module Evaluation	! Read out loud questions to assess student learning. ! Ask students to write down answers and hand them in to the instructor.	Teaching/ Learning Strategies; Module Evaluation Flip chart/ blackboard	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 2(B)

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module by making the following points:

- ! identify the objectives for the module which have been previously written on a flip chart/blackboard;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (demonstration, brainstorming session);
- ! ensure that students bring the required equipment for the demonstration (i.e. utensils for feeding, plates, cups, glasses, etc.); and
- ! inform the students that the session will end with questions and answers (written on the flip chart/blackboard prior to the class).

2. GENERAL GUIDELINES AND DIETS

- | | |
|---------------|--|
| Objective #1: | Describe the purpose of a liquid diet and the types of food it may contain. |
| Objective #2: | Describe the purpose of a soft diet and identify some of the foods it may contain. |
| Objective #3: | Describe the purpose of a high residue diet and the type of food it contains. |
| Objective #5: | Identify eight foods which can be given to a person on a weight-gaining diet. |

Instructor Activity - Lecture

Begin the lecture with the points listed under general guidelines in the section **Good Nutrition for Your Patient**. Emphasize the need for well balanced meals, in accordance with the doctor or other health professional's guidance.

It is important also to stress the need to monitor the patient's appetite. Sudden changes should be reported to a health professional.

Begin the topic of diets with the information given in the introductory section of **DIETS**. Identify by name the diets that will be covered in the module and that will be presented in the video.

Instruct the students to take note of the following points with respect to the content of the video:

- general guidelines for making food appetizing;
- the type of food served for a soft liquid diet;
- how to make food trays more appetizing; and
- the techniques for feeding an ill person.

The points noted by the students will be the focus of the module's demonstration and brainstorming session.

Review in summary form the information in the handbook under **Liquid Diets**, **Soft Diets**, and **Special Diets**.

3. CARING FOR YOUR PATIENT AT MEALTIMES AND SOME THOUGHTS ON FEEDING TECHNIQUE.

Objective #4: Demonstrate the steps to follow when feeding a patient.

Instructor Activity - Demonstration

Record on the flip chart/blackboard the steps for feeding a patient, as described in the handbook section **SOME THOUGHTS ON FEEDING TECHNIQUES**.

Ensure before the class that you have the required equipment ready. You will need chairs, towels, trays, plates, knives, forks, spoons, cups, and straws. The students should have brought this equipment (from home) to be used for their own demonstrations. Demonstrate the procedure, emphasizing the need to feed slowly and to make this time enjoyable for caregiver and patient.

Instructor Activity - Return Demonstration

Divide the students into groups of three. One student will act as the patient. Instruct the patient to sit on a chair and respond to questions when asked by the caregiver. The third student of each group will read out the instructions from the flip chart or blackboard. Each student will demonstrate the steps to follow when feeding a patient.

The instructor may find it useful to have one group feed a blind patient, another group feed a patient who is only able to hold a cup, and another group feed a patient who cannot sit up.

The instructor should circulate among the groups to ensure proper technique. Observations to be made are listed below:

- have patient test hot liquids from a spoon before drinking with a straw;
- bite size portions are served; and
- the rate of feeding is established by the patient.

Student Activities - Return Demonstration

After each student has demonstrated the feeding techniques, have those who played the role of patient,

report back to the class how they felt during the experience.

Instructor Activity - Brainstorming Session

The purpose of this session is to give the students some practical experience in planning meals for special diets. Display this purpose clearly on a flip chart/blackboard, identifying the diets to be used.

Keep the class in the same groups as for the demonstration. Have each group prepare one meal for someone on a liquid, soft, or high residue diet. The handbook may be used as a reference. Circulate among the groups to provide assistance as required.

At the twelve minute mark, tell the class they have two minutes to complete the task.

Each group is to report on their meals developed. Fill in knowledge gaps as required.

4. SUMMARY REVIEW

Review the main points from all lecture sessions. Summarize the steps to be used when feeding a patient.

5. MODULE EVALUATION

Questions for the module evaluation which are listed below, should be written on the flip chart/blackboard. Tell the students to put their name on the top of a piece of paper and complete the answers to the questions.

The finished paper is handed back to the instructor for correction.

Questions

Write down the alphabetical letter which gives the best answer for the following questions:

1. The purpose of a liquid diet is to:
 - a) give food to someone who cannot chew, swallow or digest solid food easily.
 - b) help someone to gain weight.
 - c) help someone lose weight.

2. The purpose of a soft diet is to give nutrition to:
 - a) someone who is blind.
 - b) someone who is trying to lose weight.
 - c) someone who is not ready to eat a normal diet because of surgery or an abdominal problem.

3. The purpose of a high residue diet is to:
 - a) help people who cannot eat a normal diet.
 - b) help people with elimination problems.
 - c) help people who are overweight.

Answers

1. a)
2. c)
3. b)

MODULE 3 - ILLNESS IS A FAMILY AFFAIR

A. PREAMBLE

At one time or another everyone is affected by an illness that must be cared for at home. Whether the illness is temporary, serious or long term, the family can give successful home care. To be successful, knowledge and planning is needed because the presence of an ill person in the home will affect family routines.

In this module, students will learn to recognize the problems which a family encounters when caring for someone at home. They will also learn how these problems may be solved through communication, cooperation, planning, diversion, and rehabilitation.

Not all successful home care results in patient recovery. For this reason, students will become familiar with the emotional stages experienced by a terminally ill person as he/she comes to accept death.

Services and resources are available in the community to assist the family in the care of its member at home. Students will become familiar with the role and function of such services/resources and will be able to identify those available in their own local setting.

In preparation for the teaching of this module, the instructor should read through this module, and chapter three of the handbook.

The instructor should prepare a list of community support and other health services which are available in the community. This list should include the function and eligibility criteria for such services.

The instructor may also wish to use guest speakers to present module segments such as death and dying. In these circumstances, a set of guidelines which outline the objectives of the segment and the content to be covered should be prepared for the speaker.

The instructor may also wish to prepare a list of the major points for the lecture portions of the module on a flip chart/blackboard in advance of the class.

Copies of the two case studies which are to be analyzed by students as a **Home Assignment** should also be made.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify the stages of growth and development, and the effects of illness on each group.
2. Identify any four problems faced by families when a member is ill at home and describe solutions.
3. Identify the principles of rehabilitation and diversion as methods of care.
4. Describe the five emotional stages which people experience when they have a terminal illness.
5. List and discuss community resources for assistance with the care of ill persons at home.

C. OUTLINE OF CONTENT

! **Illness and Its Effects**

! **Stages of Development**

- childhood
- adolescence
- adulthood

! **Diversion**

! **Rehabilitation**

! **Let's Talk About Death**

! **Your Community Can Help**

SAMPLE LESSON PLAN

MODULE 3 - ILLNESS IS A FAMILY AFFAIR

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! Outline objectives.	Flip chart/ blackboard	5 min.
Lecture	! Review the developmental behaviours in each of the three stages. ! Identify the effects of illness on each group.	Flip chart/ blackboard	10 min.
Lecture	! Review the effects of illness on the family and its routines.	Flip chart/ blackboard Case studies in handbook.	15 min.
Lecture	! Review the importance of diversion and rehabilitation as an integral component of care. ! Discuss the use of community resources.	Flip chart/ blackboard	10 min.
Lecture	! Identify and describe the five emotional stages of death and dying.	Flip chart/ blackboard	10 min.
Summary Review and Module Evaluation	! Review main points of lecture material for this module. ! Ask for questions and fill in knowledge gaps as required. ! Distribute Home Assignment , explaining its purpose and completion date.	Flip chart/ blackboard	10 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 3

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! identify objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (case study as a **Home Assignment**); and
- ! distribute copies of community support and other health services available locally.

2. ILLNESS AND ITS EFFECTS, STAGES OF DEVELOPMENT

- | | |
|---------------|--|
| Objective #1: | To identify the stages of growth and development and the effects of illness on each stage. |
| Objective #2: | Identify any four problems faced by families when a member is ill, and describe solutions. |

Instructor Activity - Lecture

Review the growth and development for each stage as detailed below. Emphasize that between physical and emotional growth and development a balance exists. Illness may cause an upset in the balance.

Instructors are encouraged to review the content in the **Child Care in the Home** and the **Caring for the Aging** and **Healthy Aging** courses.

Stage	Developmental Behaviour	Effects of Illness
Childhood (0 - 11 years)	<ul style="list-style-type: none"> • a time of rapid physical growth • a time when many new abilities are developed e.g. language, walking, social relationships. • a time when affection and jealousy go together • a time of curiosity • a time when needs change and vary from minute to minute, hour to hour, and day to day 	<ul style="list-style-type: none"> • a time when illness and accidents are likely to occur • a time when an infant cannot specify illness for himself • a time when an illness can worsen rapidly • a time when regression to earlier childhood behaviours is likely to occur • an inability to cope with long periods of inactivity • an increase in fear due to lack of knowledge of illness
Adolescence (12-19 years)	<ul style="list-style-type: none"> • a time of transition from childhood to adulthood • a time when there is a need to build self-confidence and to take charge of one's own life and future 	<ul style="list-style-type: none"> • easily frustrated and tendency to brood • illness is perceived with more understanding
Adulthood (20 - death)	<ul style="list-style-type: none"> • responsibility toward family, work, and the community • older persons experience loss of independence as process of aging affects systems of the body 	<ul style="list-style-type: none"> • stress may develop if ill person plays a major role in the family e.g. loss of income, loss of homemaker, etc. • depression, withdrawal, because of need to feel useful, loved, and a part of the family/society.

Introduce the case studies in the chapter and summarize the problems faced by the **Thibert** and **Langlois** families. Identify differences and similarities in both cases. Present the solutions in a similar manner.

Assess learning by asking students to complete selected questions in the **Short Review** at the end of the chapter (questions 1-4, 11, 14).

3. **DIVERSION, REHABILITATION, AND COMMUNITY RESOURCES**

Objective #3: Identify the principles of diversion as a method of care and rehabilitation.

Objective #4: Discuss community resources for assistance with the care of an ill person at home.

Instructor Activity - Lecture

Review the goals of diversion and rehabilitation including examples for each. Using the text and the case studies describing the **Thibert** and **Langlois** families. ask students to identify diversive activities and rehabilitative activities for **Dianne** and **Pierre**.

Review the roles and functions of government health and voluntary agencies as described in the handbook. Ask students to identify the agencies known to be available in their community and those which could be helpful to the **Thibert** and **Langlois** families. Fill in knowledge gaps including function and eligibility criteria to access such services.

4. **LET'S TALK ABOUT DEATH**

Objective #5: Identify the five emotional stages which people experience when they have a terminal illness.

Instructor Activity - Lecture

Review the main points in the section **Let's Talk About Death**. Ask students to describe any experiences in their own families.

To assess student learning, the instructor may question students verbally or distribute the questions as listed in **ANNEX A** of this module.

5. **SUMMARY REVIEW AND MODULE EVALUATION**

Instructor Activity - Lecture

Review major points of lecture portions of module. Hand out **Case Study #1** to half the class and **Case Study #2** to the other half (**See ANNEX B**).

Tell the class that this is a take home assignment. Inform them that they are to identify problems faced by the family and devise solutions. They are to include in the solutions the community support services and voluntary agencies which could assist the family in the care of its ill member.

Students may use **The Complete Handbook of Family Health Care** and other resources as references.

The written assignments should be handed in at the next class.

LET'S TALK ABOUT DEATH

1. Circle only one answer:

Which of the following statements best describe the effects of a terminal illness on the family of a father who is dying?

- a) Only the wife of the dying father will be affected by his death.
- b) The older family members are more likely to be affected by the death of the father.
- c) Only family members living at home with the dying father will be affected by his death.
- d) The whole family will be affected by the death of the father.

2. Place a T (true) beside the statement if it is true, or an F (false) if it is false.

- a) Denial is a typical reaction to a terminal illness. T/F
- b) Acceptance is the last emotional stage of dying.
- c) All terminally ill patients must be institutionalized.

3. Which of the reactions listed below would not be expected in a dying patient?

- anger
- withdrawal
- happiness
- denial
- bargaining

Answers

- 1. d
- 2. a) T b) T c) F
- 3. happiness

Home Assignment

Student Instructions

Analyse the assigned case study to identify the problems a family might experience in caring for the ill person at home.

Identify solutions to the problems including the role that community support and voluntary organizations can play in the solutions suggested.

Case Study #1

Ted is in his final year at high school. He had injured his knee last year but continued to play active sports against his parents' wishes. In his last hockey game he was checked heavily and injured himself. He had to be taken to hospital where surgery was required for his damaged knee. After two weeks in hospital he is home for two more weeks before he can get on crutches and return to school. The surgery may mean no more soccer, hockey or other sports and he is depressed. After being in a state of near-independence from his parents he is now totally dependent on them.

Case Study #2

Harry has always worked hard. He started from scratch and built his own business. He was an active man. Harry had a heart attack three weeks ago. He is home now and faces a six week period of rest before he returns to business. Harry worries a lot. He is more touchy than usual. The children get on his nerves. His wife does not work outside the home and this adds to Harry's worries about money. His rehabilitation and adjustment to activities of daily living is slow. He feels he is in the way at home.

MODULE 4 - PREVENTING ILLNESS AND INJURY

A. PREAMBLE

Prevention of illness and injury is a major aspect of health promotion. Freedom from illness and/or injury enables a person to live a better life. Prevention can be described as health protecting behaviour because it emphasizes guarding or defending a person or a group of people against a specific disease such as **Tuberculosis**, or against accidents which can cause serious injuries.

The term primary prevention is used to describe early protection against disease or injury. One form of early protection against illness is immunization. This protection not only enables the person immunized to fight the disease but also prevents the spread of disease to other people. Primary prevention includes making people aware of how to protect themselves against accidents and how to promote their mental health.

In this module, we will be discussing primary prevention in terms of immunization and prevention of accidents in the home. Read through the module and chapter four of the handbook and preview the video **Safe and Sound**. In addition, prepare and duplicate blank immunization schedules for student handouts. The immunization schedule/record in the handbook may be used.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Describe the purpose of immunization.
2. Document a schedule of immunization for each member of the family.
3. Identify which vaccines are of benefit to the aged and those with chronic health problems.
4. Identify six measures to prevent the spread of infection in the home.
5. Demonstrate the five steps for handwashing.
6. Identify four ways to prevent falls and four ways to prevent burns/scalds.
7. Describe steps to be taken when a poison has been swallowed.
8. Identify the International Safety Symbols and their purpose.

C. OUTLINE OF CONTENT

! **Immunization**

- A Recommended Immunization Schedule
- Vaccines for the aged and chronically ill

! **Preventing the Spread of Germs**

- personal measures
- measures for the sick room

! **Common Home Hazards**

- falls
- fires, burns, and firearms
- poisons, corrosives, flammables, and explosives

SAMPLE LESSON PLAN

MODULE 4 - PREVENTING ILLNESS AND INJURY

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module ! Outline objectives ! Hand out reference material as needed	Flip chart/ blackboard	5 min.
Lecture/ Brainstorming Session	! Introduce video. ! Identify points to be noted. ! Divide class into small groups of five to eight. ! Ask for volunteer recorder for each group to write down: <ul style="list-style-type: none"> • reasons for immunization; • when it is best to immunize; • how to prevent spread of infection; and • how to prevent injuries from falls, burns, and scalds. 	Video Safe and Sound Paper and pencils for each group.	35 min.
Break			10 min.
Lecture	! Have each recorder read out points which are then listed on blackboard/flip chart. ! Review purpose of immunization for all age groups as per handbook. ! Relate and review purpose to brainstorming responses. ! Read out schedule for immunization for all age groups as per handbook and relate to brainstorming responses.	Flip chart/ blackboard	20 min.

<p>Lecture/ Demonstration</p>	<p>! Review recorder responses from groups which identify measures to prevent the spread of infection.</p> <p>! Ask for volunteer student to demonstrate handwashing techniques while you repeat steps.</p>	<p>Soap Nail brush Towel Sink or wash basin</p>	<p>10 min.</p>
<p>Return Demonstration</p>	<p>! Divide students into pairs to demonstrate handwashing motions while you circulate checking techniques</p>	<p>The procedure may be simulated.</p>	<p>20 min.</p>
<p>Lecture</p>	<p>! Review prevention of injuries/burns/poisonings in home.</p> <p>! Review International Safety Symbols and their meaning.</p> <p>! Review - what to do if someone is poisoned.</p>	<p>Flip chart/ blackboard</p>	<p>10 min.</p>
<p>Summary Review and Module Evaluation</p>	<p>! Question/answer period.</p> <p>! Review home assignment.</p> <p>! Assign reading for next week's class</p>	<p>Flip chart/ blackboard</p>	<p>10 min.</p>

TEACHING/LEARNING STRATEGIES FOR MODULE 4

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! review objectives of the module (previously written on blackboard/flip chart);
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (brainstorming session, return demonstration);
- ! indicate that students will be given a home assignment which will require them to develop an immunization schedule for each member of their family; and
- ! hand out copies of blank immunization schedules, and other materials as required.

2. IMMUNIZATION, PREVENTING THE SPREAD OF GERMS, HOME HAZARDS

- | | |
|---------------|--|
| Objective #1: | Describe purpose of immunization. |
| Objective #4: | Identify six measures to prevent spread of infection in the home. |
| Objective #6: | Identify four ways to prevent falls and four ways to prevent burns/scalds. |

Instructor Activity - Lecture/Brainstorming Session

Introduce the video by telling the class it is a review of the information in chapter four of the handbook. Tell them to note each of the following points since these will be the major focus of the brainstorming session. The points are:

- preventing the spread of infection in the home including the purpose and procedure for handwashing;
- common hazards in the home that can cause falls, fires. etc.;
- meaning of **International Safety Symbols**; and
- how to provide a safe home environment.

Display the purpose of the brainstorming session clearly on a flip chart/blackboard.

Divide class into groups of five to eight persons. Ask for a volunteer from each group to record the points.

Circulate among the groups to ensure they stay on the topic. At the 15 minute mark inform the groups they have two minutes to finish their report for the main group. Call the class together after 20 minutes.

Student Activities

Each group has approximately 20 minutes to describe the purpose of immunization, identify measures to prevent infection spread, and identify ways to prevent falls/burns and scalds.

The recorders are to save their responses for presentation at a later time.

3. IMMUNIZATION

Objective #1: Describe the purpose of immunization.

Objective #2: Document a schedule for immunization for each member of the family.

Instructor Activity - Lecture

Ask the recorders from each of the brainstorming groups to read out the reasons recorded for immunization by each group. Note the responses given on blackboard/flip chart.

Review the purpose of immunization as per handbook relating it to the reasons given by each group.

Points should include descriptions of:

- natural immunity; and
- acquired immunity.

Indicate why it is necessary to immunize all groups using the information on the schedule in **The Complete Handbook of Family Health Care**. For example:

- all age groups are at risk for different infections at different times, i.e. farmers are at high risk of tetanus because of their work (injuring themselves) and the fact that tetanus lives in the soil and in raw flesh.

Indicate why vaccines are necessary for the aged and those with chronic health problems:

- flu vaccines are beneficial for the aged and those with chronic health problems because they have a lowered immunity and are more likely to get a serious infection such as pneumonia from a flu infection.
- because there are many types of flu and they vary from year to year, the local public health department or a doctor should be contacted in September of each year; they will indicate which flu vaccine is required and where and when to get it.

4. PERSONAL MEASURES

Objective #5: Demonstrate the five steps for handwashing.

Instructor Activity - Lecture/Demonstration

From the previous brainstorming session, review the responses given for preventing the spread of infection. Fill in the knowledge gaps as necessary. The required teaching points may be found in the section **MEASURES FOR THE SICKROOM**.

Write objective five on the flip chart/blackboard. Have the class gather around a sink or wash bowl in the room. Obtain a volunteer student from the class to demonstrate the technique. Instruct student to perform the steps as stated in chapter four of the handbook under section **HOW TO WASH YOUR HANDS**.

Involve the students by asking them to identify the purpose of handwashing and when handwashing should be done. Students may use the handbook as a reference. Emphasize that proper handwashing includes after care of the skin. Moisturizing creams should be applied to prevent drying/cracking.

Instructor Activity - Return Demonstration

The instructor should divide the class into pairs and have each pair demonstrate handwashing technique. One student can perform the steps while the other student reads them out loud. The instructor should circulate among the pairs to ensure proper technique. Such observations include the following tasks:

- the caregiver removes watch and all other jewelry from wrists and fingers;
- hands and wrists are soaped to a good lather;
- surfaces under the finger nails are cleaned;
- hands and wrists are washed for a period of not less than two minutes; and
- soap is thoroughly rinsed from all skin and nail surfaces.

5. THE PREVENTION OF INJURIES FROM FALLS, BURNS, AND POISONING

Objective #6:	Identify four ways to prevent falls and four ways to prevent burns/scalds.
Objective #7:	Describe the steps to be taken when a poison has been swallowed.
Objective #8:	Identify the eight International Safety Symbols and their purpose.

Instructor Activity - Lecture

Have each recorder review points previously obtained from the brainstorming session. Fill in the knowledge gaps with additional points from the handbook under section **Common Home Hazards**.

Indicate that a person who has been poisoned should always have a follow-up medical check-up.

The instructor should then present the **International Safety Symbols** from the handbook. The instructor may wish to list the symbols on the flip chart/blackboard in advance of the class. The students are asked for the meaning of each symbol. The handbook may be checked for reference.

6. SUMMARY REVIEW AND MODULE EVALUATION

The instructor should review the main points of all lecture material. If problems were experienced with the handwashing demonstrations, these problems should be resolved.

To informally assess student learning, the instructor may wish to have the students respond to the questions in the **Short Review** at the end of the chapter. Additional Questions are listed below.

Questions

Circle the statement which best answers the question described below.

1. Who would give you information about immunization?
 - (a) Public health department.
 - (b) Your family doctor.
 - (c) Both (a) and (b).

2. The elderly and those with a chronic health problem need immunization against:
 - (a) Measles and mumps.
 - (b) Flu.
 - (c) Rubella.

3. When a poison has been swallowed you should:
 - (a) Call your Poison Information Centre.
 - (b) Tell them the name of the poison, instructions on the label, and condition of the victim.
 - (c) Follow the instruction you receive.
 - (d) All of the above.

Write these questions on a flip chart/blackboard in advance of the class. Randomly select students to answer the questions until all students have been given an opportunity to respond. Present correct answers and fill in knowledge gaps as required.

Present the home assignment by instructing students that they are required to write out an immunization schedule for each member of his/her immediate family. Particular note should be made of the age of each member when writing out the schedule. Schedules should be handed in at the next class.

Assign reading for next class.

Answers

1. (c)
2. (b)
3. (d)

MODULE 5 - ADAPTING THE ENVIRONMENT AND THE EQUIPMENT FOR THE ILL

A. PREAMBLE

Illness or injury can occur at any time and affect a friend or member of the family. If you decide to care for someone in your home you will need to prepare the room and your family. Preparation of the home requires the cooperation of family members. and the knowledge contained in this module.

To prepare for the teaching of this module the instructor should read it through. read chapter five of the handbook and preview the video **Illness is a Family Affair**.

The instructor should also have on hand as many of the sickroom items as possible. Many of these items may be obtained from a local loan cupboard and the instructor may wish to display them as they are described in the handbook.

Two case studies are included in this module. The instructor should make copies of the studies one for each student or note the main points on a blackboard/flip chart in advance of the class.

Newspapers are needed in an appropriate quantity which will allow each student to produce a disposable bag for wastes.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify and describe the functions of furniture and bedroom articles for the sickroom.
2. Identify and describe the ideal room for a sick person in a home.
3. Describe methods to produce a backrest.
4. Describe the purpose of pressure pads.
5. Demonstrate the production of a disposable bag for wastes.

C. OUTLINE OF CONTENT

! The Room

! The Equipment

SAMPLE LESSON PLAN

MODULE 5 - ADAPTING THE ENVIRONMENT AND THE EQUIPMENT FOR THE ILL

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! Outline objectives.	Flip chart/ blackboard	5 min.
Lecture	! Introduce video. ! Show segment beginning with family decision to provide home care including the location of the room and to equipment needed to provide successful home care.		15 min.
Case Study/ Lecture	! Divide students in pairs. ! Hand out copies of case studies, one to each pair. ! Students are to: <ul style="list-style-type: none"> • read the case study; • list the furniture needed and its function. ! Review points of case study filling in knowledge gaps as required.	Case Studies (Annex A) Paper, pens Flip chart/ blackboard	30 min.
Demonstration/ Return Demonstration	! Demonstrate the steps of making a waste bag. ! Have each student return the demonstration.	Newspapers	5 min.
Summary Review and Module Evaluation	! Review main points of lecture portions of module. ! Discuss home assignment. ! Assign reading for next class.	Flip chart/ blackboard	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 5

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! outline the objectives of the module which have been previously written on a blackboard or flip chart;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (case study, demonstration);
- ! indicate that students will be given a home assignment which will require them to assess their own home and locate a room suitable for the care of a sick person; and
- ! distribute handout materials as required.

2. THE ROOM, THE EQUIPMENT

- | | |
|---------------|---|
| Objective #1: | Identify and describe the functions of furniture and bedroom articles for the sickroom. |
| Objective #3: | Describe the methods used to produce a backrest. |
| Objective #4: | Describe the purpose of pressure pads. |

Instructor Activity - Lecture

To introduce the video, begin by telling the class that the scene opens with a family discussion of whether or not to care for their grandmother at home. It then proceeds to identify the pre-requisites and requirements for successful home care.

Instruct the students to pay particular attention to the points listed below. since this information is needed to complete the case studies. The information to note is as follows:

- how to locate the best room in the house for the care of a sick family member;
- the required furnishings and equipment including their function; and
- supplies and equipment to relieve pressure on body parts.

Instructor Activity - Case Studies

Divide students into pairs and distribute **Case Study #1** to half of the pairs and **Case Study #2** to the other half. Instruct students to look at each case study in light of objectives one, three, and four. The students should be told that the type of equipment needed for Mrs. Jones may differ from that which is required for Mr. Black. They should be told that they have 20 minutes to complete the assignment. The instructor should circulate among the pairs to provide assistance as required. At the 20 minute mark, have each pair read out their listed items. These items are then noted on the blackboard/flip chart adding only those that have not been previously mentioned. Any missed equipment should be explained in terms of the purpose of each and the situation in which it might be used. If time permits, have each student complete the questions in the **Short Review** at the end of the chapter. Fill in knowledge gaps as required.

Student Activities

Students should list the type of equipment and its purpose needed for **Case Study #1 or #2**. The list should include equipment items 1-7, 9, 11 and 12, as they are described in chapter five of the handbook.

3. BAGS FOR WASTE

Objective #5: Demonstrate the production of a disposable bag for waste.

Instructor Activity - Demonstration/Return Demonstration

Refer back to the objective previously written on the flip chart/blackboard. Provide all students with a newspaper. Have each student gather round to watch the demonstration. The students should follow the steps written in the handbook as you demonstrate them. Each student should return the demonstration by following your steps.

4. SUMMARY REVIEW AND MODULE EVALUATION

Objective #2: Identify and describe the ideal room for a sick person in the home.

Instructor Activity - Lecture

The instructor should review the main points of all lecture portions in the module. Advise the students to review chapter five of the handbook at home before starting the assignment. Each student is to walk through his or her own house to identify an ideal sickroom, using a case study patient as the ill family member. The student should write down the location of the room, and discuss why it would be best for this patient.

Before the end of the class, the instructor should encourage students to handle and operate the sickroom items that have been available and on display during the teaching of this module.

Assign reading for next class.

Case Study #1

Mrs. Jones, is a widow and 67 years old. She has had a stroke leaving her with weakness in her left arm and leg. Although she is right handed, Mrs. Jones' doctor does not want her to be alone at home for the next little while. She is going to stay with her daughter and her daughter's family for this period. The doctor has told Mrs. Jones that she may resume her normal daily routines gradually but not to get over-tired.

Case Study #2

Mr. Black at age 45 has had a heart attack. He is returning home to be cared for by his wife. The doctor has told him that for the first little while he should get plenty of rest. He can only get out of bed to go to the bathroom and for meals.

MODULE 6 - BODY MECHANICS

A. PREAMBLE

It is important to recognize that the way you sit, stand, and move affects not only the way you look, but also the way you feel. The way you use your body when you sit, stand, or move is called body mechanics. Good body mechanics can also prevent injury which could occur when you lift or move heavy objects.

In this module the instructor will teach the proper use of body mechanics. Students will learn how to lift heavy objects and to move patients in and out of bed safely. In preparation for this class, the instructor should read through this module, chapter six of the handbook and view the video **Walking and Other Triumphs**.

For the class, ensure that you have at least two beds (couches may be used) and two chairs for demonstrations. To assess student learning informally, the questions at the end of the module and in the **Short Review** at the end of chapter six may be used.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Define and describe the use of body mechanics for good posture.
2. Identify six ways to avoid muscle strain.
3. Demonstrate the use of body mechanics for moving a patient up in bed.
4. Demonstrate the use of body mechanics to transfer a patient from bed to chair and back to bed.
5. Demonstrate the use of body mechanics for helping a patient up from a fall.

C. OUTLINE OF CONTENT

- ! Good Posture and Good Body Mechanics
- ! Using Body Mechanics to Assist Your Patient

SAMPLE LESSON PLAN

MODULE 6 - BODY MECHANICS

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture/ Question/ Answers	! Introduce module. ! Outline objectives. ! Describe body mechanics ! Review ways to avoid muscle strain.	Flip chart/ blackboard Anatomical diagram in handbook; Selected questions at end of chapter	10 min.
Lecture/ Question/ Answers	! Introduce video. ! Tell students to observe demonstration of various body movements. ! Fill in knowledge gaps from student responses to questions selected from Short Review .	Video Walking and Other Triumphs Selected questions at end of chapter	10 min.
Demonstration	! Ask for student volunteers who will, under your guidance, demonstrate: <ul style="list-style-type: none"> • moving a patient up in bed; • moving patient from bed to chair and back again; • lifting a patient up from a fall. 	Bed Chair	10 min.
Return Demonstration	! Divide class into groups of three. ! Circulate among groups to check performance.	Bed Arm chair Straight back chair	20 min.

Summary Review and Module Evaluation	! Review definition of body mechanics. ! Review skills learned. ! Read or hand out prepared questions to each student. ! Have students answer questions and hand them in. ! Correct mistakes as required. ! Assign reading for next class.	Flip chart/ blackboard See Questions from Summary Review and Module Evaluation	10 min.
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TEACHING/LEARNING STRATEGIES FOR MODULE 6

1. INTRODUCTION OF MODULE, GOOD POSTURE AND GOOD BODY MECHANICS

- Objective #1: Define and describe the use of good body mechanics for good posture
- Objective #2: Identify six ways to avoid muscle strain.

Instructor Activity - Lecture/Question/Answers

The instructor should introduce the module making the following points:

- ! review objectives of module previously written on blackboard/flip chart;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (demonstration, question and answer evaluation);
- ! advise students that any person with a back injury/problem should not take part in the lifting demonstration.

To define **Body Mechanics** and **How to Achieve Good Posture**, present the material as outlined in chapter six in the section **Good Posture** and **Good Body Mechanics**. Review the points contained in the section **Simple Ways to Avoid Muscle Strain**.

To reinforce the teaching points, ask students to complete question one to six from the **Short Review** at the end of the chapter. Correct mistakes filling in the knowledge gaps as required. For an exercise, have each student stand up and assume the position which illustrates the appropriate position for good posture.

2. USING BODY MECHANICS TO ASSIST YOUR PATIENT

- Objective #3: Demonstrate the use of body mechanics for moving a patient up in bed.
- Objective #4: Demonstrate the use of body mechanics to transfer a patient from bed to chair and back to bed.
- Objective #5: Demonstrate the use of body mechanics when helping a patient up from a fall.

Instructor Activity - Lecture/Question/Answers

The instructor should ensure that the video segment starts at the diagram of the anatomical figure in back (dorsal) view. Inform the students that the video will begin with a review of body mechanics. It will then proceed to a caregiving setting in which the correct method for moving a patient up in bed into a sitting position and the transfer procedures from bed to chair, chair to bed and up from a fall will be seen. Ask the students to note the demonstrations and the use of body mechanics in those demonstrations. At the end of the segment students are to complete questions seven to fifteen in the **Short Review** at the end of the chapter. Correct mistakes filling in knowledge gaps as required.

Instructor Activity - Demonstration

Ensure that beds (couches may be substituted) and chairs are properly positioned for the demonstration.

Select a student to act as the patient.

Select another student to be the caregiver and to perform the demonstrations under your guidance. Have the remaining students gather around to act as observers.

Read out the instructions for moving a patient up in bed, sitting a patient up in bed, getting a patient out of bed and into a chair and into bed from a chair. Include the instructions for helping a patient up from a fall. These skills may be found in the sections **Moving Your Patient Up In Bed, Sitting Your Patient Up In Bed, Getting Your Patient Out Of Bed And Into A Chair, Getting Your Patient Into Bed From A Chair, and Walking**. Have the remaining students follow along using their handbooks.

Select another three students to demonstrate moving a helpless patient up in bed. Advise students to seek the advice of a health care professional worker for the best approach to the care and management of the helpless patient. Caring for such a person without appropriate help can result in back strain.

Instructor Activity - Return Demonstration

Divide students into groups of three: one to act as the patient, one to act as caregiver, and one to read out the instructions. All students should rotate through the caregiver role. It is desirable to have all students experience the patient role as well. The instructor should circulate among the three groups to ensure correct application of technique. Observations should include the following:

- informing the patient of what is to be done and the order in which it is to be done; and
- checking to make sure the patient is properly balanced before proceeding to the next change in position.

3. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activity - Lecture

Review definition of body mechanics. Review skills learned in this module. Encourage the students to practise these skills at home with members of the family.

Re-emphasize that moving a patient should not cause pain to the caregiver. If any students feel pain or have experienced a painful back from a previous injury, then medical advice must be sought before attempting to lift a patient. Pain can result from incorrect technique.

Hand out the questions listed below. Have the students answer the questions and hand in their answers. Correct mistakes and fill in knowledge gaps as required.

Questions

Place one of the following words in the spaces provided to complete each statement correctly:

- | | |
|------------------|------------|
| • small | • large |
| • posture | • close |
| • evenly | • buttocks |
| • straight | • thighs |
| • body mechanics | • lift |
| • back | • face |
| | • arms |

- (1) _____ is the position of your body when you sit, stand or walk.
- (2) Your best posture will be displayed when the body weight is _____ distributed.
- (3) A _____ line should be formed by your head, shoulders, and hips.
- (4) _____ is the way we use our bodies in any activity.
- (5) Using and relying on _____ muscles rather than small ones will ease strain.
- (6) Bend your knees instead of your _____ to lift.
- (7) Use your _____ as levers.
- (8) Always _____ the object you wish to move.
- (9) Contract the muscles of your _____ and before lifting a heavy object.
- (10) Hold the object you are carrying _____ to your body.

Answers

- | | |
|-------------------|---------------------|
| 1. posture | 6. back |
| 2. evenly | 7. arms |
| 3. straight | 8. face |
| 4. body mechanics | 9. buttocks, thighs |
| 5. large | 10. close |

MODULE 7 - COLLECTING INFORMATION ABOUT YOUR PATIENT

A. PREAMBLE

In order to give good care a person must learn how to observe the condition of an ill or convalescent patient. Physical and emotional changes need to be observed and recorded as they occur. This information can be passed on to the professional health care worker who will find it valuable for assessing the patient's progress. The caregiver is in an ideal position to provide this information because of the time spent with a patient.

In this module, students will be taught how to gather and record information about a sick person. They will also learn what information is valuable to the professional health care worker.

To prepare for the teaching of this module, the instructor should read it through, chapter seven of the handbook and preview the video **Look, Listen and Count**.

The instructor should also have on hand the equipment and supplies necessary for the skill demonstrations to be performed by the students. Task cards which outline the procedure steps of each skill should be prepared in advance. These cards will be placed at each skill practice station for student reference during the return demonstrations.

The instructor should prepare and duplicate copies of patient charts for student use in recording the information collected.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify methods of obtaining information from a patient.
2. Describe the purpose of observation and identify the four senses used for observation.
3. Identify the average temperature, pulse and respirations for children and adults.
4. Demonstrate the reading and recording of an oral temperature, and the taking and recording of pulse and respirations.
5. Document information which must be written on a patient chart.

C. OUTLINE OF CONTENT

! Listening and Observing

- listening to your patient
- observing your patient

! Checking Vital Signs

- temperature
- pulse
- respiration

! Recording

SAMPLE LESSON PLAN

MODULE 7 - COLLECTING INFORMATION ABOUT YOUR PATIENT

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! Outline objectives. ! Explain purpose of patient chart form.	Flip chart/ blackboard Patient chart forms	5 min.
Lecture	! Review Listening and Observing	Flip chart/ blackboard	10 min.
Lecture/ Demonstration	! Introduce video by indicating the points to be noted: <ul style="list-style-type: none"> • introductory segment; • observations; • oral temperature; • pulse; • respirations; • fever in children (excluding Tepid Sponge). ! Ask for two student volunteers - one will act as patient, one as the caregiver. ! Instructor reads out the steps for taking an oral temperature and the caregiver carries out instructions. ! Repeat above steps for pulse and respirations. ! Have the caregiver record information on a patient chart under instructor guidance.	Video Look, Listen and Count Thermometer Bowl to discard dirty thermometers Watch with second hand Handwashing supplies Flip chart/ blackboard	10 min. (optional) 10 min.

Return Demonstration	! This session will require three skill practice stations. (1) Temperature station, (2) Pulse and respiration station, (3) Recording station. ! Students need to be aware of the progress through the stations and objectives they will meet for these teaching/learning activities.	Refer to Instructor Activity - Return Demonstration	25 min.
Summary Review and Module Evaluation	! Review main points of information gathering, and of recording information. ! Correct student responses to questions completed for each skill practice station. ! Assign reading for the next class.	Flip chart/ blackboard	10 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 7

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! review the objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module;
- ! describe the learning activities in which students are expected to participate (demonstration); and
- ! hand out patient charts, explaining their purpose.

2. LISTENING AND OBSERVING

Objective #1: Identify methods of obtaining information from a patient.

Objective #2: Describe the purpose of observation and identify the four senses used for observation.

Instructor Activity - Lecture

Using a flip chart/blackboard, present the teaching points for this lecture which are in chapter seven of the handbook under the headings **Listening to Your Patient** and **Observing Your Patient**. The instructor may wish to start off by stating the importance of collecting information. To encourage class participation, students may be asked to help identify the observations under the sub-headings in the section **Observing Your Patient**.

3. CHECKING VITAL SIGNS

Objective #3: Identify the average temperature, pulse and respirations for children and adults.

Objective #4: Demonstrate the reading and recording of an oral temperature. and the taking and recording of pulse and respirations.

Objective #5: Document information which must be written on a patient chart.

Instructor Activity - Lecture (Optional)

To introduce the video **Look, Listen and Count** inform the class that it will start off with a review of content in section one of the chapter. A sample chart will be shown including the proper way to complete it. The procedures for taking an oral temperature, a pulse and respirations will then be demonstrated. Emphasize that a minimum of three minutes is required for taking an oral temperature in order to recognize deviations from the normal. When complete accuracy is required, the thermometer must be left in place for eight to ten minutes.

Instructor Activity - Demonstration

To demonstrate temperature, pulse and respirations. the instructor should have available:

- handwashing supplies and facilities;
- an oral thermometer;
- a watch with a second hand; and
- a patient chart form on which to record the information collected.

Select two volunteers from the class: one to act as the patient and one to act as the caregiver.

Instruct the patient to sit on a chair and to answer the questions when asked. These questions are located at the beginning of the section **How to Take an Oral Temperature**.

The caregiver should be in a seated position as well. The instructor should read out loud the steps of the procedures for taking an oral temperature, pulse and respirations beginning first with the questions. Be sure to include the content which identifies **Points to Remember about Temperatures**, as progress is made from one procedure to the next.

Complete the demonstration by reading out the instructions for cleaning a thermometer.

At the end of the demonstration, have the caregiver fill in the required information on the patient's chart. This should include the patient's name and date and time when the vital signs were taken.

Encourage the observing students to follow the demonstration using their own handbooks and patient chart forms.

Instructor Activity - Return Demonstration

Three skill practice stations can be used for the student return demonstrations.

The equipment required for **station one** is listed below:

- two chairs;
- a student volunteer to act as a patient;
- oral thermometers (one for each student);
- a watch with a second hand; and
- a task card with the instructions for taking an oral temperature written on it (**See ANNEX A**).

The equipment required for **station two** is listed below:

- two chairs;
- a student to volunteer as a patient;
- a watch with a second hand; and
- a task card with the instructions for taking a pulse and respirations (**See ANNEX B**).

Station three will require a chair, table and a completed patient chart form with a space to make proper entries of a patient's temperature and pulse and respirations. A task card is needed to tell students to record their findings from skill practice stations one and two on their own patient chart forms.

The instructor should circulate between skill practice stations one and two to check on student performance.

Student performance should include the observations listed below.

When taking an oral temperature, the student:

- places the thermometer (bulb end) between the lips and under the tongue;
- advises the patient to keep his/her lips closed and not to bite down on the thermometer;
- indicates verbally that thermometer will be left in place for three minutes; and
- reads temperature accurately.

When taking and recording a pulse and respirations the student:

- correctly places two or three fingers on the patient's wrist;
- counts the beats for a 60-second period;
- leaves the fingers in place to count the number of respirations for a 60-second period; and
- records the temperature pulse and respirations accurately on the patient's chart.

Student Activities - Return Demonstration

Each student should begin the demonstrations at skill practice station one and complete the demonstrations at skill practice station three. They should be instructed to hand in their completed patient chart forms and their responses to the questions listed on each task card. Students who have passed through all skill practice stations may act as patients in stations one and two.

4. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activity - Lecture

The instructor should review the main points of the lecture portions of this module. Student learning may be assessed by reviewing student responses to the questions from the task cards at stations one, two and three filling in the knowledge gaps as required.

TASK CARD FOR SKILL PRACTICE STATION ONE

Objective #4: Demonstrate the taking and reading of an oral temperature

Student Instructions

Using the clean oral thermometer provided, take this patient's temperature.

After three minutes, remove the thermometer, read and record your finding on a piece of paper. Place the used thermometer in the bowl marked dirty thermometers.

To obtain an accurate reading of a patient's temperature the following tasks should be done.

- ! Wash your hands thoroughly.
- ! Hold the thermometer by the end opposite to the mercury bulb.
- ! Wipe the thermometer with a swab dipped in water to remove any antiseptic solution.
- ! Check the thermometer for cracks or broken areas.
- ! Shake down the thermometer so that the mercury line registers 35°C.
- ! Place the bulb end of the thermometer between the lips and under the tongue.
- ! Advise your patient to keep his or her lips closed, but not to bite down.
- ! Allow a minimum of three minutes for the thermometer to register the oral temperature (this may be simulated).
- ! Gently remove the thermometer.. Wipe it to remove the saliva.
- ! Turn the thermometer so that the numbers are toward you. Slowly rotate it backward and forward, until you can see the mercury column clearly. Your patient's temperature is indicated by the reading at the end of the mercury column.

Please write on your paper the answers to the following questions:

Circle one response to each of the following.

Questions

1. What is the average oral temperature for an adult?
 - a) 39°C.
 - b) 37°C.
 - c) 36°C.

2. What is the average rectal temperature for an adult?
 - a) 39.5°C.
 - b) 38.5°C.
 - c) 37.5°C.

3. The length of time needed to register an oral temperature for screening purposes is:
 - a) 2 minutes
 - b) 3 minutes
 - c) 10 minutes
 - d) 15 minutes

4. To take a temperature by axilla, the thermometer should be placed in the:
 - a) mouth
 - b) rectum
 - c) groin
 - d) armpit

5. To obtain an accurate rectal temperature, the thermometer should be left in place for:
 - a) 2-3 minutes
 - b) 3-5 minutes
 - c) 5-10 minutes
 - d) 8-10 minutes

Answers

1. (b)
2. (c)
3. (b)
4. (d)
5. (b)

TASK CARD FOR SKILL PRACTICE STATION TWO

Objective #4: Demonstrate the taking and recording of pulse and respirations.

Student Instructions

Using a watch with a second hand, take the patient's pulse and respirations. Obtain the patient's pulse first. Then, leaving your fingers on the person's wrist, obtain a reading of his or her respirations. Both readings should be recorded on your patient's chart.

To obtain an accurate reading of a pulse.

- ! Place two or three fingers (not your thumb) on the inside of your patient's wrist, just below the base of the thumb.
- ! Press lightly on the artery with your fingers so that you do not stop the natural flow of blood.
- ! Use the second hand on your watch or a clock, and carefully count the beats for a 60-second period.
- ! The number of pulse beats counted during a 60-second period is the pulse rate.

To obtain an accurate reading of respirations.

- ! Keep your fingers on your patient's wrist and count the number of complete respirations in one minute. A complete respiration has an:
 - " Inspiration phase.
 - " Expiration phase.
 - " Pause phase.

Questions

Please write on your paper the answers to the questions listed below.

1. What's the average normal pulse for a young baby?
 - a) 60-80 per min.
 - b) 90 per min.
 - c) 160 per min.

2. What is the average normal respiration for an adult?
 - a) 16-20 per min.
 - b) 20-35 per min.
 - c) 40 per min.

Answers

1.(b)

2. (a)

TASK CARD FOR SKILL PRACTICE STATION THREE

Objective #5: Document information which must be written on a patient's chart.

Student Instructions

The patient chart below has been prepared as a guide for students to show how entries are made accurately. Note that the chart has entries which identify the date, the name of the ill person, the time when an observation was made or a treatment took place.

On your own patient chart enter the same information as below. Enter also the temperature, pulse and respiration readings that you obtained from your patient in the **1000 hrs.** space. Submit the completed patient chart to the instructor.

Date: 21 July 1987

Name: Jane Doe

0915 hrs. 1 bowl of jello, 1 glass orange juice

1000 hrs.

1200 hrs. 1 teaspoon penicillin syrup

1400 hrs. Not coughing. Not flushed.

Questions

Read questions 1 to 3 below and write on your paper a T if it is true, and an F if it is false.

1. Listening to a patient can tell you if he/she has breathing problems.
2. Observation is a vital part of obtaining information from a patient.
3. Taking a patient's temperature, pulse and respirations is a method of obtaining information.
4. Which of the statements below best describes the purpose of observation.

The purpose of observation is to:

- a) obtain information on someone's condition.
 - b) know if someone has a cough.
 - c) show the patient that the caregiver is interested in him/her.
5. Which of the following senses are used most often for observation of a patient?
- a) Touch.
 - b) Sight.
 - c) Hearing.
 - d) Smell
 - e) Taste.

Answers

1. T 2. T 3. T 4. a) 5. a, b, c, d.

MODULE 8(A) - BASIC PERSONAL CARE - TOILETING AND BATHING

A. PREAMBLE

Little things do mean a lot. It is caring for the little things that make the big things such as problems and setbacks, easier to take. There are many activities a caregiver can do to ease the discomfort of a sick person, ranging from bed baths to toileting.

In this module, the instructor will prepare the student for those things we take for granted when we are well but which need to be carefully performed for those who are ill or convalescing. Tasks such as giving a bedpan or urinal and a bed bath will be covered.

To prepare for the teaching of this module, the instructor should read it through, read chapter eight, sections one and two and preview the video **Little Things Mean A Lot**.

The instructor should also ensure that a bed, bedpan (slipper and regular types) and bed bath supplies are on hand for the demonstration of skills in this module. It may be helpful, as well, to have on display equipment and supplies for the care of the incontinent patient. There are many different types of incontinent pads and diapers available in the community. In addition, community health nurses, physiotherapists and occupational therapists are available to provide expert advice on the selection of suitable bathroom aids. Bathroom aids increase the ill/convalescent person's safety and independence when performing personal hygiene measures in the bathroom. The instructor may also find it useful to prepare in advance, on a flip chart/blackboard, the major points to be covered in the lecture portions of this module.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Demonstrate how to give a bedpan and urinal to a patient.
2. Describe techniques used in the care of an incontinent person in bed.
3. Identify five safety precautions for giving a tub bath and shower to a patient.
4. Demonstrate the procedure for giving a bed bath.

C. OUTLINE OF CONTENT

! Toileting

- how to give a bedpan or urinal
- if your patient is incontinent

! Bathing

- tub bath or shower
- bed bath

SAMPLE LESSON PLAN

MODULE 8(A) - BASIC PERSONAL CARE - TOILETING AND BATHING

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! ! Outline objectives.	Flip chart/ blackboard	5 min.
Lecture/ Demonstration/ Return Demonstration	! ! Introduce video, identifying what students will see and points to be noted. ! ! Demonstrate procedure to give a bedpan to an ill person. ! ! Have students return the demonstration for giving a bedpan.	Video Little Things Mean A Lot Bedpans Handwashing supplies Bedpan cleaning equipment Gloves Toilet tissue	20 min.
Lecture	! Review measures to cope with incontinence.	Blackboard/ flip chart Incontinent pads Plastic sheet for bed Water resistant creams	5 min.
Demonstration	! ! Introduce and show video segments for bed and tub bathing. ! ! Demonstrate procedure for giving a bed bath.	Little Things Mean A Lot Flip chart/ blackboard Manikin doll Bed bath supplies	20 min.
Lecture	! Review safety precautions used when taking a shower/tub bath.	Flip chart/ blackboard	5 min.
Summary Review and Module Evaluation	! ! Review main points of module. ! ! Correct student answers to selected questions in Short Review of chapter eight. ! ! Assign reading for next class.	Flip chart/ blackboard	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 8(A)

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! identify objectives of the module which have been previously written on a flip chart/blackboard;
- ! state the length of time that will be required to teach the session; and
- ! describe the learning activities in which students will participate.

2. TOILETING

- | | |
|---------------|---|
| Objective #1: | Demonstrate how to give a bed-pan/urinal to a patient. |
| Objective #2: | Identify techniques to care for an incontinent person in bed. |

Instructor Activity - Lecture

To introduce the video, inform the class that it will begin with a young man's accident. As it progresses, students will see the correct method of giving a bedpan using two different techniques:

- when the ill person can lift on/off the bedpan; and
- when the ill person rolls on and off the bedpan.

The video also describes some common ways to cope with incontinence.

In the scene, the caregiver does not wear gloves. The instructor should inform the class that some illnesses require the caregiver to wear gloves when handling body wastes, such as urine, stool, sputum, vomitus and blood. The instructor should explain that in some illnesses, live bacteria is excreted in the body's waste material. If the caregiver's hands come into contact with this bacteria, infection may spread from the ill person to the caregiver. Emphasize that the caregiver should always check with the ill person's doctor or the community health nurse to see if gloves are recommended. If gloves are required, they should be disposable. Disposable gloves are used only once and then discarded in a manner that is approved and authorized by the local community health unit.

Contaminated gloves and other disposable items that have been soiled with body wastes should be discarded immediately in a plastic bag, sealed in another plastic bag and then discarded. Non disposable items such as bed linen should be laundered separately in hot soapy water. Bedpans and commode chairs should be wiped with a disinfectant solution like a 1:10 dilution of 5.25 sodium hypochlorite in water (normal household bleach such as Javex and Lysol).

Instructor Activity - Demonstration

Start off the demonstration by identifying when bedpans and urinals are necessary. Indicate where these may be obtained and the different types available, i.e. slipper as opposed to regular bedpans. These points are summarized in the introductory portion in the section Toileting.

Stress once again, the need for checking with the doctor or community health unit to determine if any

precautions such as gloves are to be worn by the caregiver.

Ask for four volunteers from the class, one to act as the patient, one to demonstrate the procedure when a patient can either roll onto or lift on and off a bedpan and two volunteers to demonstrate giving a bedpan when assistance cannot be given by the patient.

The instructor should then read out the steps described in the section **How To Give a Bedpan Or Urinal**. These steps should include also the handwashing procedure, the method used When the patient can roll onto one side as well as the remaining points in the section which include the need for privacy and the need to observe the contents of the bedpan etc.

When the patient cannot provide any assistance, the instructor should emphasize the need for caregivers to use:

- proper body mechanics; and
- smooth and coordinated movements when lifting on/off bedpan.

Students not participating in the demonstrations should gather around the bed and act as observers.

If proper cleaning facilities are not available, this procedure as well as that which is used for the soiled bedpan may be simulated.

Instructor Activity - Return Demonstration

After the first four students have demonstrated the procedures, the remaining students should return the demonstrations.

The instructor should check student performance to ensure that the student:

- places the toilet paper within reach of patient;
- checks to make sure the patient is clean following elimination including handwashing; and
- cleans the bedpan properly after use.

Instructor Activity - Lecture

Review the points identifying measures to cope with incontinence found in the section **If Your Patient is Incontinent**. If samples of incontinent pads and diapers are available, introduce them and allow students an opportunity to examine them.

During this time, emphasize the patient's need for proper diet, exercise, and the need to record any abnormalities on the patient's chart. These points are in the section **Points to Remember**.

3. BATHING

Objective #3: Identify five safety precautions for giving a tub bath and shower to a patient.

Objective #4: Demonstrate the procedure for giving a bed bath.

Instructor Activity - Lecture

Introduce the topic of bed baths by reviewing the reasons for giving a bed bath found in the section **A Bed Bath**.

When introducing this section of the video, ask the students to note the following points:

- temperature of the bathing water; and
- the position of the ill person.

Instructor Activity - Demonstration

Begin the demonstration with a review of the key points in the bed bath procedure. These may be found in the section **The Procedure** and should include the points below:

- the use of at least two face cloths, one to wash and one to dry;
- if a third wash cloth is not to be used to wash the genital area, then this area should be done at the end of the bed bath;
- the need to encourage the patient to wash as much of his or her own body as possible;
- the need to assess the condition of the skin in between the toes before soaking the feet;
- soaking will dry out the skin, so this area should be dried thoroughly;
- if dry skin is a problem, the soap used should be mild;
- deodorant soap and perfumed creams should be avoided since many of these products contain alcohol;
- the need to change the bath water when it becomes cold or soapy; and
- indicate that during the bath time mouth care, foot care, hair care and back care may be done; these topics will be covered in later modules.

The instructor may choose to perform the bed bath procedure on a manikin doll or may choose to simulate the procedure using a student.

The instructor should then proceed with a review of the bed bath equipment and select a student to perform the role of caregiver while the remaining students act as observers. Assume that the patient can perform some of the bathing steps.

Repeat the steps for the bed bath found in **The Procedure**.

Students should be encouraged to review the procedure and practise it on a family member at home.

Instructor Activity - Lecture

Review safety precautions which are located in the section **A Tub Bath or Shower**. The points to stress are:

- avoiding the use of bath oils in the bath water;
- avoiding the use of the shower curtain, and soap dish bar to maintain balance when

getting in and out of the bath tub; and

- staying with the patient during the procedure to offer assistance as required.

4. **SUMMARY REVIEW AND MODULE EVALUATION**

Instructor Activity - Lecture

Review main points of all lecture material. To informally assess learning, have students complete questions one to five and nine in the **Short Review** at the end of chapter eight. Correct mistakes, filling in the knowledge gaps as required.

Assign any reading for the next class.

MODULE 8(B) - BASIC PERSONA CARE - BACK CARE, FOOT CARE, DRESSING YOUR PATIENT

A. PREAMBLE

There are many things a caregiver can do to make a person confined to bed more comfortable. In this module we will discuss how to make a person more relaxed and comfortable by giving back and foot care. We will also discuss how to help a patient dress with the minimum of pain or difficulty.

In preparation for the teaching of this module, read it through and sections three, four, and five of chapter eight in the handbook. You should also preview the video **Little Things Mean A Lot** and select two students to act as participants in the role study (**See ANNEX A**). The instructor may wish to use guest speakers to present various portions of this module, for example: podiatrist, physiotherapist.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify the purpose for giving back care.
2. Demonstrate the actions of giving a back rub to a patient.
3. Describe the purpose of giving foot care.
4. Demonstrate the method of giving foot care.
5. Demonstrate dressing a person with an injured/paralyzed arm.
6. Demonstrate how to dress a patient lying in bed.

C. OUTLINE OF CONTENT

! **Back Care**

! **Foot Care**

! **Dressing Your Patient**

- sleeves over arms
- garment over head
- trousers or panties over legs

SAMPLE LESSON PLAN

**MODULE 8(B) - BASIC PERSONAL CARE - BACK CARE, FOOT CARE,
DRESSING YOUR PATIENT**

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! Outline objectives.	Flip chart/ blackboard	5 min.
Lecture/Role Play/ Demonstration	! Introduce video, describing what will be demonstrated and the points students are to note. ! Introduce the topic of the role play. ! Proceed with the role play. ! Give a summary of points raised.	Video Little Things Mean a Lot. ROLE PLAY SCRIPT Flip chart/ blackboard	30 min.
Return Demonstration	! Divide students into pairs. ! Have them demonstrate the procedures from the role play session. ! If there are not enough beds, chairs can be used for foot care and dressing the upper part of the body.	Bed Bowl for foot soak Cream/lotion Large sized blouse Large sized trousers	20 min.
Summary Review and Module Evaluation	! Discuss Home Assignment. ! Assign reading for next class.	Home Assignment	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 8(8)

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module by making the following points:

- ! identify the objectives which have been written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the session;
- ! describe the learning activities in which students are expected to participate (role play. demonstration); and
- ! inform the students there will be a **Home Assignment**.

2. BACK CARE, FOOT CARE AND DRESSING YOUR PATIENT

Objective #2:	Demonstrate the actions of giving a back rub to a patient.
Objective #4:	Demonstrate the procedures for giving foot care.
Objective #5:	Demonstrate dressing a person with an injured/paralysed arm.
Objective #6:	Demonstrate how to dress a patient lying in bed.

Instructor Activity - Lecture

To introduce the appropriate video segments of **Little Things Mean a Lot**, inform the class that three procedures will be shown. They are to pay particular attention to:

- the hand motions used in giving a back rub; and
- the changes in position of patient when the lower body is dressed.

The instructor should caution the class in the use of nail cutting instruments. Blunt or smooth rounded nail scissors are safer to use than are sharp curved scissors. The use of emery boards to smooth rough nail surfaces may also cut sensitive skin. Pumice sticks are available in the community and are safer to use. For additional information the instructor. should refer to the instructor's guide for **Caring for the Aging, St. John Ambulance (1986)**.

Instructor Activity - Role Play

The instructor should select two students from the class one to act as the patient and one to act as the caregiver.

Copies of the script which contain a description of the scene and the physical condition of the patient should be given to both players. Allow them sufficient time to study their parts providing direction as required (**See ANNEX A**).

The remaining students should gather around the scene and act as observers. They will be asked to

report on their observations at the end of the role play.

Begin the role play with a description of the scene and the players. Inform the class of the length of time for the role play and what is expected of the observers. Monitor the role play carefully to ensure that the main points are brought out. The instructor may also wish to callout the steps of the procedures for trimming the nails, giving a back rub, etc. At the end of the role play thank the players and ask the observers for their observations. These should include the points listed below:

- a description of how the caregiver responded to the patient's initial refusal to comply with the caregiver's request;
- a description of the difficulty experienced by the patient in pain who must be carefully moved;
- what part of the hands the caregiver used to massage the patient's back;
- the motions used by the caregiver to administer the back rub; and
- what arm was dressed first.

Additional points to be brought out are:

- foot and back massage are given mainly as a means of improving circulation and preventing pressure sores; foot care helps to prevent infection occurring in the feet;
- the precautions to be observed when caring for feet and nails, and recommended procedures for administering a foot soak and for trimming the nails as described in **Caring for the Aging**;
- the advice of a health professional should be obtained before trimming toenails and administering foot care to persons of any age with ingrown toenails, abnormal nailst or any condition which impairs circulation or sensation to the feet (examples are patients with Diabetes, Spina Bifida, Cerebral Palsy. etc.);
- special care must be given with infants to avoid injury to the soft tissue when trimming nails; and
- all warts should be seen by a physician for advice about treatment.

Instructor Activity - Return Demonstration

Divide students into pairs to return the demonstrations. Indicate that each student will practise all four procedures beginning with the procedure for dressing the upper body to be followed by the procedures for a back rub, foot care and finally dressing the lower body of a patient in bed.

Ensure smooth progress of students through the area where they will practise dressing the lower body of a bedridden patient.

Circulate among the pairs to ensure correct performance. The instructor should make the observations listed below.

To Give a Back Rub:

- lotion is applied to the caregiver's hands (this may be simulated); and

- the palms of the hands are used only.

To Give Foot Care:

- the patient's feet and toes are inspected for abnormalities;
- the patient's feet are washed and dried thoroughly, especially between the toes (this may be simulated);
- the skin on the feet, especially the heels and ankles, is massaged with cream; and
- the toenails are cut straight across and then smoothed to the shape of the toes (this may be simulated).

To Dress the Upper Portion of the Body:

- the paralysed arm is dressed first.

To Dress the Lower Body:

- the trousers are pulled over the legs and feet first; and
- the patient rolls to one side of the bed and the free part of the trousers is pulled up over the hip.

Student Activities - Return Demonstration

When students have completed the practice sessions for the first three skills, they should perform the procedure for dressing the lower part of the body.

Students may use the handbook as a source of reference during the practice of all skills.

3. SUMMARY REVIEW AND MODULE EVALUATION

Review main points of all lecture material. Have students complete questions one to twelve in the **Short Review** and fill in knowledge gaps as required.

Summarize the main points in the role study emphasizing again the precautions to be taken when caring for the feet of a patient.

Assign any required reading for the next class. Review the **Home Assignment**, outlining what is expected of students. Tell them to write out the answers to the questions listed below. They may use the information in the handbook as a resource. Assignments are to be handed in at the next class.

Home Assignment:

In your own words, please describe the purpose(s) for giving back care.

OR

In your own words, please describe the purpose(s) for giving foot care.

ROLE PLAY SCRIPT

Mrs. Smith is a seventy-four year old woman who has advanced arthritis. Mrs. Smith has been a widow for many years. Up until a year ago, she was living independently in her own apartment. Last year she suffered a stroke which left her with left sided weakness. As a result, she is living with her daughter who helps her with many activities of daily living. This morning her arthritis is bothering her and she will need help bathing and dressing herself. She is experiencing pain in her right hand and foot especially when she moves. She is not looking forward to her bath and getting dressed for the day. She is in bed and has just finished her breakfast which her daughter prepared for her. Her daughter is coming down the hall to pick up the tray.

Daughter enters and says: Finished with your breakfast tray mother? Oh, good! I'll just take it to the kitchen and I'll be back to help you with your bath. You know, your toenails need to be cut and I think we'll do it this morning.

Mother becomes visibly agitated and says: Oh, please not this morning. My arthritis is kicking up and I'm having a lot of pain moving. Couldn't we just forget the whole thing. I'd really like to stay in bed for the day.

Daughter's reply: Mother do you remember the last time you had this pain. Do you remember what the physiotherapist said?

Mother's reply: Oh, that was a long time ago but I think she said that the best thing I could do was to rest, stay nice and warm and that's all I really want to do now.

Daughter's reply: You're right she did say stay warm and to rest. But she also said that you should do your exercises so that the muscles and tendons in your feet and hands wouldn't stiffen up. Now, suppose I run a nice warm bath for you and you stay in it long enough to loosen up your muscles and take away some of the pain you are having. I'm sure that by the time you've finished your bath, cutting your toenails will be easy and when you get back into bed I'll give you a nice back rub so you can rest easily. Then later when you feel more rested I'll come and help you get dressed.

Mother Agrees

After bath: The caregiver examines the skin and nail surfaces of each foot before trimming the nails. Any abnormality should be noted and reported to a health professional.

In Mrs. Smith's situation the caregiver inspects each toe at the joints and separates the toes gently to examine the skin in between each toe.

When trimming the nails, blunt scissors are used and small snips of nail are cut away (this may be simulated). Rough edges are filed smooth with a pumice board (this may be simulated).

Next, Mrs. Smith's ankles, heels and toes are massaged with moisturizing lotion ensuring that the lotion is completely absorbed (this may be simulated).

To administer the back rub, the daughter uses only the palm surfaces of both hands and begins the rub at the base of the spine. She rubs upward on each side of the spine, returning to the lower back using a series of circular movements. She massages the buttocks with large circular motions, until all surface areas are covered. She massages the shoulder blades, hip bones and base of the spine with care since these areas are vulnerable to pressure sore development (this may be simulated). Following the massage the daughter covers Mrs. Smith with the top bed linen and leaves her to rest.

Sometime later Mother wake up. You've slept for almost an hour. How about getting up
daughter returns to now?
bedroom and says:

Mother Agrees

Daughter helps Mrs. Smith to put on a pair of slacks by:

- pulling the trousers over the feet and up high as much as possible; and
- mother lifts her buttocks off bed and daughter pulls slacks over the hips to the waist.

Daughter helps Mrs. Smith to put on her blouse by:

- putting the left arm into the blouse sleeve first;
- holding the blouse out so that Mrs. Smith can put her right arm into the sleeve; and
- encourages Mrs. Smith to do up the buttons of her blouse independently.

MODULE 9 - MOUTH AND HAIR CARE

A. PREAMBLE

If you have ever had to remain in bed for any length of time because of illness you will know how good it feels to have a bath, wash your hair and put on fresh clothes. Just to feel clean raises spirits and lessens the discomfort of illness. Care of the mouth is also important for the person who is ill or convalescing. Food particles which remain in the mouth can produce bacteria which cause gum disease and tooth decay. Proper care of the mouth can prevent tooth decay, promote healthy gums and give an overall pleasant feeling.

The instructor may wish to obtain a guest speaker, such as a dentist or dental hygienist to teach the techniques for care of the teeth. In addition, students should bring their own mouth care supplies for use in the return demonstrations of the mouth care procedures.

In this module students will also learn the proper care for hair. To prepare for this class the instructor should read through the module, chapter nine of the handbook, and preview the video **It's All in Knowing How** and outline on a flip chart/blackboard the major points of the lecture portions of this module.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify the purpose of mouth care for oneself.
2. Demonstrate how to floss and brush teeth on oneself and on a set of dentures.
3. Demonstrate through simulation the technique of giving mouth care to a dependent person.
4. Demonstrate the technique of giving a wet shampoo to a person confined to bed.

C. OUTLINE OF CONTENT

! Mouth Care

- mouth care for oneself
- flossing
- brushing

! Dentures

! Mouth care for a Dependent Patient

! Hair Care

- the dry shampoo
- a quick, semi-wet shampoo
- a wet shampoo for a person confined to bed

SAMPLE LESSON PLAN

MODULE 9 - MOUTH AND HAIR CARE

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce the module. ! Outline the objectives. ! Introduce guest speaker if necessary.	Flip chart/ blackboard	5 min.
Lecture	! Identify purpose of mouth care emphasizing the importance of flossing, brushing and fluoride. ! Identify the similarities in mouth care for the denture wearer and the non-denture wearer.	Flip chart/ blackboard	5 min.
Demonstration	! Select volunteer student to administer mouth care procedures to a set of dentures.	Floss Tooth brush Tooth paste Dentures Denture cup Denture cleaning agent Face cloth	10 min.
Lecture	! Review purposes of hair care including different methods. ! Introduce video segment by telling students what they will see and what they are expected to note. ! Indicate that the procedures will be done on a dependent person.	Video It's All In Knowing How	10 min.
Return Demonstration	! This session will require two skill practice stations: (1) Mouth care station (2) Hair care station	Refer to Instructor Activity - Return Demonstration	25 min.

Summary Review and Module Evaluation	! Summarize main points of lecture material. ! Fill in knowledge gaps identified from student responses to task card questions. ! Inform class of assigned reading for next class.	Flip chart/ blackboard	5 min.
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TEACHING/LEARNING STRATEGIES FOR MODULE 9

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! review the objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the session;
- ! describe the learning activities in which students are expected to participate (demonstration); and
- ! inform students if there is to be a guest speaker and that he/she will present the techniques for brushing and flossing the teeth; give a brief biographical sketch of the speaker, relating his/her expertise to the topic that is to be presented.

2. MOUTH CARE - FOR ONESELF

Objective #1: To identify the purpose of mouth care for oneself.

Objective #2: To demonstrate how to floss and brush teeth on oneself and on a set of dentures.

Instructor Activity - Lecture

The instructor should review the four purposes of mouth care as outlined in the section **Mouth Care**.

The instructor may also wish to question the class on their own mouth care practices such as brushing after meals or snacks, before going to bed, etc., relating them to the purposes of proper mouth care.

State that proper mouth care involves flossing and brushing.

Flossing and brushing help to remove plaque from tooth and gum surfaces which trap food particles/bacteria and may lead to inflammation of the gums and tooth decay.

Stress the role that fluoride plays in reducing tooth decay. If the local drinking water supply does not contain fluoride, emphasize the importance of seeing a dentist for application of concentrated fluoride or to recommend a fluoride mouth rinse.

Indicate that flossing should precede brushing and that it cleans those areas between the teeth that brushing does not reach.

Students should be aware that proper brushing of all tooth surfaces should take approximately three minutes if plaque is to be removed from the crevices and flat surfaces of the teeth.

To introduce the topic of denture care, stress the need for regular dental care including check ups with a dentist and dental hygienist. State that the removal of teeth causes the bone structure of the jaw and mouth to change, and as a result, gums may also change which will then require the alteration of dentures to ensure a proper fit.

Mouth care for the denture wearer involves brushing and soaking of the dentures and brushing and rinsing of the gums.

Students should know that plaque can build up on dentures just as it does on regular teeth. It can also adhere to surfaces that rest against the gums and the roof of the mouth. Stress the fact that soaking in a denture cleaner alone does not remove plaque. Brushing with a special denture brush and a cleaning agent such as baking soda or any of the readily available commercial ones should be used to remove plaque.

Emphasize also that hard or excessive scrubbing will damage dentures. If stains are a problem, most commercial soaking agents will clean them away effectively. Dentures should not be allowed to dry out. When they are not in the mouth they should be stored in cool water or a cleaning solution. Gums should be brushed as well, using a soft bristle brush.

The instructor should complete this portion of the lecture by stating that mouth care for the denture wearer and the non denture wearer is performed properly when the bacteria and debris has been rinsed away following flossing and brushing.

Instructor Activity - Demonstration

To demonstrate the procedures for flossing and brushing teeth, the instructor should select a volunteer from the class to administer the flossing and brushing techniques under guidance. Encourage the remaining students to follow the progress of the demonstration using their own handbooks.

Start off the demonstration by reviewing the equipment and supplies needed for each technique. In the case of flossing, stress the need to avoid flossing between tight areas because of the danger of damaging the gums.

In the case of dentures, a facecloth or towel in the bottom of a sink will prevent breakage from accidental dropping. Filling the sink half full with lukewarm water will accomplish the same purpose.

Read out loud the steps for flossing the teeth found in the section **Flossing**. The caregiver should carry out the steps as they are read out. Be sure to emphasize that a clean section of floss should be used at all times.

Next read out the steps for brushing the teeth found in the sections **Brushing** and **Dentures**. The steps which are essential to demonstrate are the brushing movements for:

- chewing surfaces;
- all other surfaces;
- cleaning the tongue; and
- denture cleaning.

The remaining steps such as rinsing the mouth, applying tooth paste to the tooth brush, and soaking dentures may be simulated.

3. MOUTH CARE AND HAIR CARE FOR A DEPENDENT PERSON

Objective #3: To demonstrate the technique of giving mouth care to a dependent person.

Objective #4: To demonstrate the technique of giving a wet shampoo to a person confined to bed.

Instructor Activity - Lecture

To introduce the video **Its All In Knowing How**, inform the students that the segment will begin with a review of the flossing and brushing procedures just demonstrated. **Mouth Care** for a dependent person will then be presented followed by the techniques for giving a dry, semi-wet and wet shampoo. Instruct the students to note the equipment used for the care of the dependent person's mouth. Students should be advised that wearing disposable gloves may be required by the caregiver in some situations. Students are advised to check with a health professional to determine if this precaution is necessary. Students should also pay particular attention to the position of the person who is to have a wet shampoo in bed.

Instructor Activity - Return Demonstration

Two skill practice stations are required, one for the practice of mouth care and the other for giving a wet shampoo.

The first skill practice station should have:

- a bed or a sofa;
- a table on which to place the mouth care supplies;
- glass of warm water, a drinking straw, a small basin, gauze squares, lemon and glycerin swabs, mineral oil or petroleum jelly, a mouth wash, towels, a paper bag, disposable gloves if necessary; and
- a task card with the learning objectives, the mouth care procedure and a series of questions which are to be completed by the student. **(See ANNEX A)**.

The second skill practice station should have:

- hair supplies, plastic sheet, waterproof cape (a plastic garbage bag with a hole), a small towel/face cloth, two large towels, pillows, basin and warm water, pitcher, bucket, shampoo, comb, hair dryer;
- a bed; and
- a task card which contains the learning objectives to be achieved and the procedure for shampooing the hair, and a series of questions for assessment of student learning.

The instructor should circulate between both skill practice stations to check on student performance.

Student performance at skill practice station one should include the following activities:

- the dependent person should be positioned in the side-lying position;
- the person's clothing and bedlinen is protected;
- the caregiver tells the patient what is to be done before performing the task;
- the caregiver indicates that the brushing procedure will begin with the cleaning of all chewing surfaces and will use a slight trembling motion;

- the caregiver has the patient rinse out the mouth after flossing and brushing; and ;
- the caregiver simulates how to use gauze squares or lemon and glycerine swabs correctly.

Student performance at skill practice station two should include the following:

- the patient should be in the back-lying position with the shoulders supported by pillows and the head at the edge of the bed;
- the plastic cape is used to protect the front and side of the patient at the edge of the bed and forms a trough into a pail for the rinse water; and
- the patient's eyes are well protected by a small towel or face cloth.

Student Activities - Return Demonstration

Divide the class into two student groups, one to start at skill practice station one and the other at station two. Students should be subdivided again at each station to form groups of three, one student to act as the patient, one to act as the caregiver and one to call out the steps of the procedure written on the task card. The remaining students at each station should act as observers for that skill practice session.

To practise the flossing and brushing techniques, a set of dentures is recommended. If a set is unavailable, students should practice the techniques on themselves using their own tooth brushes, floss and a mirror.

The procedures for mouth care for a dependent patient may be simulated.

To practise the technique for giving a wet shampoo, students need not use shampoo or water. The shampoo and rinse steps may be simulated.

When a student has completed the skill practice session at a station, including answering the questions on the task card, he/she may proceed to the next station.

Answers to the questions at the skill practice station should be written on a separate piece of paper and handed into the instructor.

4. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activities - Lecture

Review the main points of the lecture portions of this module. Include any points not raised by the guest speaker if necessary. Indicate the common difficulties experienced by students in performing the skill tasks.

Review student responses to questions on each task card filling in the knowledge gaps as required.

Assign any reading for next class.

TASK CARD FOR SKILL PRACTICE STATION ONE

Objective #1:	Identify the purpose of mouth care for oneself.
Objective #2:	Demonstrate how to floss and brush teeth on oneself or on a set of dentures.
Objective #3:	Demonstrate through simulation the procedure for giving mouth care to a dependent person.

Student Instructions

Using the supplies at hand, demonstrate the procedure for flossing or brushing the teeth on yourself or on the dentures provided.

The procedure for flossing is listed below.

- ! Draw out a 50 centimetre length of floss.
- ! Create a large floss arc by wrapping the floss around the middle finger of each hand.
- ! Next, shorten the working space by creating a smaller floss arc, using:
 - the thumb and forefinger for the upper teeth; and
 - both forefingers for the lower teeth.
- ! Using the smaller floss arc, move the floss into position between each pair of teeth.
- ! Floss up and down until the tooth squeaks.
- ! Use a clean section of the floss whenever a used part becomes soiled or frayed.
- ! After flossing, rinse the mouth.

The procedure to brush the teeth is described below.

- ! Dampen the tooth-brush. Spread a little tooth-paste or tooth-powder on it.
- ! First, brush the chewing surfaces of the teeth. Press the bristles into the pits and grooves of the chewing surface. Keep the brush in this position while using a slight trembling movement.
- ! Start at the back, on the outside of the upper right teeth and follow around to the left side. Place the side of the bristles against the teeth with the bristles pointing upward and slightly overlapping the edge of the gum. Press against the teeth and use a tiny back-and-forth motion, drawing the brush slightly away from the gum.
- ! Start at the back, on the inside of the upper left teeth and follow around to the right side in the same manner.
- ! Start at the back, on the outside of the lower right teeth and follow around to the left side. Point the bristles downward. Place them against the teeth and gum in the manner described above.
- ! Start at the back, on the inside of the lower left teeth and follow around to the right side.

! Brush off the tongue.

! Rinse the mouth thoroughly to get rid of bacteria and debris loosened by brushing.

To administer mouth care to a dependent person, the procedure is listed below.

! Protect your patient from wetness by covering him/her and the bedcloth with towels.

! Put on a pair of disposable gloves if advised by the doctor or community health nurse.

! Let your patient sip the mouthwash through a drinking straw and rinse his/her mouth.

! Assist your patient to spit out the mouthwash in a bowl or basin held to the chin.

! Floss and then brush your patient's teeth and tongue, as described earlier (this may be simulated).

! If your patient's mouth or gums are tender, gauze squares or cotton swabs may be used instead of a tooth-brush. Gauze squares or cotton swabs that have been moistened with mouthwash can be wrapped around your finger to cleanse your patient's teeth, mouth and tongue (this may be simulated).

! Discard the soiled swabs or gauze in a paper bag.

! Rinse your patient's mouth with mouthwash (this may be simulated).

Questions

Write on your paper the answers to the following questions.

1. Proper mouth care for non denture wearers involves:

- a) brushing the teeth and rinsing out the mouth
- b) flossing the teeth and rinsing out the mouth
- c) rinsing the mouth only
- d) flossing, brushing, and rinsing the mouth

2. Fill in the blanks with the words provided.

- a) Flossing cleans the areas _____ the teeth.
- b) Floss up and down until the tooth surface _____.
- c) A tooth-brush should be _____ and have _____ or more rows of bristles that are rounded at the tip and cut _____ across.
- d) Proper mouth care prevents tooth _____, and _____ healthy gums.

promotes, between, squeaks, tooth, soft, decay, bad breath, straight, two, three

Answers

1. d)
2. a) between
b) squeaks
c) soft, two, straight
d) decay, promotes

TASK CARD FOR SKILL PRACTICE STATION TWO

Objective #4: Demonstrate the technique for giving a wet shampoo to a person confined to bed.

Student Instructions

Using the supplies and equipment provided, demonstrate the technique for administering a wet shampoo. It is not necessary to use shampoo or water. You may simulate the actions of scalp massage and rinsing.

To administer a wet shampoo, you should perform the tasks listed below.

- ! Protect the bed with the plastic sheet.
- ! Place the waterproof cape over your patient, leaving the head uncovered. Do not tuck the cape under your patient. Spread the back of the cape over the pillow and let it hang over the edge of the bed to form a trough for the rinse water.
- ! Prop up your patient by placing pillows under the shoulders. Let his/her head hang back over the pillows, at the edge of the bed if possible, so that water can flow directly into the drainage pail.
- ! Use the small towel to cover your patient's eyes so that they are protected.
- ! Place the basin under your patient's head. Use the pitcher to pour water over the hair, guiding it into the pail.
- ! Rub shampoo into your patient's hair and gently massage and lather the scalp and hair.
- ! Rinse the hair and scalp until clean.
- ! Empty the basin into the bucket whenever necessary.
- ! Dry the hair with a towel.
- ! Spread a dry towel on the pillow or bedding to absorb moisture. Comb hair. Use a hair dryer to dry and set hair if so desired.

Questions

Write on a separate piece of paper the answers to the questions below:

1. How often should an ill person's hair be brushed?
 - a) Once a day.
 - b) Three times a day.
 - c) Twice a day.
 - d) Four times a day.

2. When giving a wet shampoo to someone in bed, it is important to:
 - a) tuck a cape under the person's shoulders.
 - b) let the back of the cape hang over the edge of the bed to form a trough for the rinse water
 - c) to use a large amount of hair shampoo
 - d) massage the scalp vigorously

Answers

1. c) 2. b)

MODULE 10 - BEDMAKING, EXERCISES AND POSITIONING

A. PREAMBLE

A bed is a small world if you have to stay there for very long. Being confined to bed and removed from day to day activities is not pleasant. However, there are ways and means of helping a person confined to bed to pass the time as comfortably as possible. Positioning and exercising are essentials for the person who has to stay in bed. It helps one to maintain a positive attitude toward the surroundings, overcome depression, and recover quickly.

In this module, students will learn how to help bedridden people with exercising and changes in positioning. They will also learn how to prevent pressure sores.

To prepare for the teaching of this module the instructor should read it through as well as chapter ten of the handbook, and preview the video **Comforting Thoughts**. A physiotherapist may also be used as a guest speaker to teach the skills involved in range of motion and deep breathing exercises. In this situation, an outline of the content to be covered including the learning objectives to be reached by the students should be prepared for the guest speaker.

The instructor should also have on hand, all supplies and equipment necessary for skill practice. Duplicate copies of questions that assess student learning should be made as well. The instructor may wish to outline on a flip chart/blackboard the main points of all lecture material to be taught in this module.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Demonstrate how to make an occupied bed.
2. Demonstrate how to assist someone to perform range of motion exercises for the head and neck, arms and legs.
3. Identify five reasons for exercising someone confined to bed.
4. Demonstrate how to assist someone with deep breathing exercises.
5. Demonstrate how to position someone in bed using four different positions for support and comfort.
6. Identify six ways to prevent pressure sores.

C. OUTLINE OF CONTENT

! Bedmaking

- making an unoccupied bed
- making an occupied bed

! Exercising

- exercising the head and neck
- exercising the arms
- exercising the legs
- exercising the lungs

! **Positioning**

- upright position
- back-lying position
- side-lying position
- stomach-lying position

! **Preventing Pressure Sores**

SAMPLE LESSON PLAN

MODULE 10 - BEDMAKING, EXERCISES AND POSITIONING

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce module. ! Outline objectives.	Flip chart/ blackboard	5 min.
Lecture	! Introduce video by identifying points to be noted by students.	Video Comforting Thoughts	15 min. (optional)
Demonstration	! Ask for two student volunteers; one will act as patient and the other will demonstrate the following skills: - making an occupied bed; - repositioning technique; - range of motion and deep breathing exercises. ! Instructor to read out the steps of each procedure and the caregiver will carry out the instructions.	Bed Pillows (5) Bedboard Bed linen Two chairs Tissues Paperbag Hand and hip rolls	20 min.
Return Demonstration	! This session will require two skill practice stations (1) Making an occupied bed Positioning Preventing bed sores (2) Range of motion exercises Deep breathing exercises	Refer to Instructor Activity - Return Demonstration	30 min.
Summary Review and Module Evaluation	! Review main points of lecture portions of module ! Fill in knowledge gaps identified by student responses to questions completed at each skill practice station ! Assign reading for next class	Flip chart/ blackboard	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 10

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! review the objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module; and
- ! describe the learning activities in which students are expected to participate (demonstration).

2. BEDMAKING, POSITIONING AND EXERCISING

Objective #1:	Demonstrate how to make an occupied bed.
Objective #2:	Demonstrate how to assist someone to perform range of motion exercises for the head and neck, arm and legs.
Objective #4:	Demonstrate how to assist someone with deep breathing exercises.
Objective #5:	Demonstrate how to position someone in bed using four different positions for support and comfort.

Instructor Activity - Lecture (Optional)

To introduce the video **Comforting Thoughts**, state that students will first learn the purposes of positioning and exercises. They will then see a demonstration of how to turn someone in bed. Pressure sore development is presented including ways to prevent its development. The segment will conclude with a demonstration of how to make an occupied bed.

Students should be encouraged to note specifically the various tasks involved in exercising, repositioning and the important functions that such procedures achieve.

Instructor Activity - Demonstration

The instructor should select two students one to act as a patient and the other to act as a caregiver. Begin the demonstration with the four changes in positioning first, since the side-lying position is one needed to make an occupied bed.

Ensure that enough pillows and a foot board are available to stabilize the patient in each position demonstrated. Have the remaining students gather around the bed and follow the progress of the demonstrations using their own handbooks. Begin by stating what is needed to support the patient in a specific position and reminding the students that proper body mechanics should be employed when repositioning occurs.

Repeat the steps outlined in the sections of the handbook the upright position, the back-lying position, the side-lying position, and the stomach-lying position. Be sure to emphasize that repositioning helps to prevent pressure sores.

To demonstrate how to make an occupied bed, repeat the steps outlined in the section **Making an Occupied Bed**.

Ensure that a chair is positioned at the end of the bed and that another one is available to protect the patient from falling out of the side of the the bed. During the demonstration, emphasis should be placed on the need to:

- assess whether or not the bedridden person can lie flat during the bedmaking process;
- avoid shaking out pillow cases and sheets before placing them on the bed; and
- roll soiled linen away from the body and carefully place in laundry bag.

The instructor may then review the importance and purposes of deep breathing exercises. Emphasize that the bed ridden are vulnerable to chest infection because of the build up of secretions in the lungs caused by inactivity.

If a physiotherapist or a community health nurse is not present during the demonstration, emphasize that these exercises should be monitored by either health professional on a regular basis. Emphasize that the caregiver should stand beside not directly in front of the face of the patient during these exercises.

The instructor should then read out the steps given in the handbook for exercising and the caregiver carries them out. The procedures may be found in section **Exercising the Lungs**.

To demonstrate range of motion exercises, review the definition of **full range**. Emphasize the following:

- the exercises should be monitored by a physiotherapist/community health nurse on a regular basis; and
- if discomfort/pain is experienced, the exercises should be stopped and the discomfort/pain reported to a health professional.

Instructor Activity - Return Demonstration

Two skill practice stations are required for the student return demonstrations.

The equipment required for **station one** is listed below.

Students will practise range of motion and deep breathing exercises at this station.

- bed.
- pillow.
- tissues and paper bag.
- task cards outlining the procedures for range of motion and deep breathing exercises, the learning objectives to be achieved and review questions to be answered by the students (**See ANNEX A**).

At the **second skill practice station**, students will practise repositioning techniques and bedmaking.

The equipment required is as follows:

- chairs (2);
- four pillows;
- laundry bag;
- bed linen;
- hand and hip rolls;
- foot board; and

- task card outlining the steps of the procedures along with the learning objectives to be achieved and review questions to be answered by the students (**See ANNEX B**).

The instructor should circulate between both stations to ensure correct performance of each technique.

Observations to be made are listed below.

Deep Breathing Exercises:

- the patient is sitting in the upright position with a pillow to support his/her back;
- the caregiver places a hand on either side of the patient's lower rib cage; and
- the caregiver stands at the side of the patient in order to avoid direct inhalation of patient's expelled air; tissues and paper bag are within reach of the patient.

Range of Motion Exercises:

- the caregiver offers encouragement and support as each exercise is performed; and
- the caregiver asks the patient if pain is experienced while doing the exercise.

Side-lying Position:

- the caregiver should bend both knees when turning the patient;
- three pillows should be used properly to stabilize the patient on his/her side; and
- the caregiver asks patient if he/she is comfortable.

Back-Lying Position:

- the patient's body is in a straight line.

Stomach-Lying Position:

- pillows are properly positioned under abdomen and lower legs.

Making an Occupied Bed:

- the caregiver uses one sheet to cover patient while changing the bed;
- the patient is positioned to one side and the caregiver loosens the bottom linen along the unoccupied side of the bed first;
- the soiled linen is placed in laundry bag when it is removed from the bed;
- the caregiver provides assistance to help the patient turn onto the clean side of the bed;
- the top linen is secured allowing for a foot pleat.

Student Activities - Return Demonstration

Students should be divided into two groups, one to start at skill practice station one and the other to start at skill practice station two. After completing the activities at one station students are to proceed to the next one. Students should be requested to hand in their answer sheets for the questions listed on the task cards at each station.

3. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activity - Lecture

The instructor should review the main points of the lecture portions of the module. The instructor should also identify the weaknesses in student performance of specific skills and reinforce correct behaviours.

Student learning may also be assessed by reviewing student responses to the questions on the task cards and filling in the knowledge gaps as required.

TASK CARD FOR SKILL PRACTICE STATION ONE

- | | |
|---------------|---|
| Objective #2: | To demonstrate how to assist someone to perform range of motion exercises for the head and neck, arms and legs. |
| Objective #3: | To identify five reasons for exercising patients confined to bed. |
| Objective #4: | To demonstrate how to assist someone to perform deep breathing exercises. |

Student Instructions

Review all of the exercises detailed below with your patient before starting the exercises. Beginning first with the head and neck exercises read out the steps of the exercises slowly one step at a time. When the patient has gone through all of the steps of the exercise once, proceed to the next exercise. Remember to provide encouragement as your patient masters each exercise. Remember to ask the patient if pain and discomfort are being experienced. Remember to obtain authorization from a physiotherapist or community health nurse before commencing these exercises with your patient.

Exercising the Head and Neck

- ! Tilt your head back, with the chin upwards.
- ! Tilt your head forward, with the chin on the chest.
- ! Tilt your head from side to side, with the ear toward the shoulder.
- ! Turn your head from side to side, and look left and then right.
- ! Turn your head in a circle, moving from right to left, then from left to right.

Exercising the Arms

- ! Raise one or both arms above the head.
- ! Stretch one or both arms outward from the sides of the body and rotate them.
- ! While the arms are extended, flex and extend the fingers.
- ! While the arms are extended, rotate the wrists.

Exercising the Legs

- ! Bend the knees slightly, then extend the legs as far as they can go.
- ! Rotate the ankles left, then right, or inward and outward.
- ! Flex and extend the toes of each foot.

Exercising the Lungs

- ! Help your patient to sit up. Provide a pillow for back support.
- ! Place your hands on either side of your patient's lower ribs.
- ! Your patient should inhale through the nose so that you can feel the ribs push out.
- ! Have your patient hold his or her breath for three seconds.
- ! Your patient should then exhale through the mouth and nose until you can feel the ribs draw in as the air is expelled.
- ! Your patient should repeat this exercise two or three times, and afterward try to cough up mucus if any is present.
- ! If your patient has an incision that becomes painful during deep breathing, ask him or her to hold a pillow against the incision to splint it.

Questions

Please complete the questions below, by writing your answers on your piece of paper. Please submit your answers to the Instructor. .

1. Indicate whether a statement is true or false by placing a **T** (true) or an **F** (false) on your piece of paper.
 - a) The caregiver's hands should be placed on the upper ribs of a patient who is performing deep breathing exercises.
 - b) If a patient does not cough up mucus following deep breathing exercises, then the exercises were improperly performed.
 - c) If the patient experiences pain when performing range of motion exercises they should be stopped immediately.
 - d) Range of motion exercises promote the body's circulation.
 - e) Deep breathing and range of motion exercises should be ordered/supervised by a health professional.

Answers

1.
 - a) F
 - b) F
 - c) T
 - d) T
 - e) T

TASK CARD FOR SKILL PRACTICE STATION TWO

- Objective #1: To demonstrate how to make an occupied bed.
- Objective #5: To demonstrate how to position someone in bed using four different positions for support and comfort.
- Objective #6: To identify six ways to prevent pressures sores.

Student Instructions

Using the pillows, hip rolls, and hand rolls provided, position the patient in the four positions described below. Start with the upright position and proceed according to the order of the positions described. Be sure to ask the patient if he/she is comfortable when the position is stabilized with the pillows and/or hand/hip rolls.

The Upright Position

- ! Assist your patient to sit up.
- ! Support your patient's back with pillows (maximum four) or with a back rest and one or two pillows.
- ! Support your patient's arms and hands with pillows and hand rolls.

The Back-Lying Position

- ! Your patient lies on his/her back, with the head supported by one or two pillows. Ensure that the head, shoulders, and hips are in a straight line.
- ! The knees may be slightly bent.
- ! Your patient's feet should be slightly apart. They should be supported by a footboard (a pillow roll may be substituted) so that they form a right angle with the legs at the ankle joint.
- ! The arms lie next to the body, with the forearms bent toward the body.
- ! The thumb of each hand is turned toward the palm, and the fingers are in a grasping position. For a long-term patient, hand rolls may be used to prevent contracture.
- ! Hip rolls may be used for long-term patients to prevent the hips from turning outward.

The Side-Lying Position

- ! Stand on the side of the bed to which your patient is to be turned.
- ! Place your patient's far arm across the chest, and bend the far leg. Ensure that your patient's near arm is away from the body, so that your patient does not roll on it.
- ! Stand opposite your patient's waist, with one foot a step in front of the other and your knees slightly bent.
- ! With one hand on your patient's far shoulder and other hand on the far hip, shift your weight from

your forward leg to your rear leg as the patient is being turned.

- ! Flex your patient's upper knee, straightening the lower leg to provide a wide base of support and to "anchor" your patient in bed. Use a pillow to support the upper leg.
- ! Use another pillow to support your patient's upper arm. This helps to expand the chest and make breathing easier.
- ! Make sure your patient's feet rest at right angles.
- ! Additional pillows may be used to support the back.

Stomach-Lying (prone) Position

- ! Your patient lies on his stomach, with the head turned to one side.
- ! If needed, place a small pillow under the abdomen at the level of the diaphragm, in order to give support to the spine and, in the case of a female patient, to take weight off the breasts.
- ! Place a pillow under your patient's lower legs to elevate the toes off the bed and to permit slight flexion of the knees.

An Occupied Bed

Using the sheets and pillow cases provided, make an occupied bed:

- ! Assemble clean linens and arrange a chair at the foot of the bed.
- ! If your patient can tolerate it, he or she should lie flat. with only one pillow.
- ! Loosen all bed clothes.
- ! Remove the bedspread, blankets, and extra pillows. Leave your patient covered with the top sheet while you unmake the bottom of the bed.
- ! Turn the patient on one side, and keep him or her covered with the top sheet. If bedrails are not available, a chair may be used as a rail to protect the patient from falling off the bed.
- ! Move to the other side of the bed. Roll the soiled bottom sheet toward the centre of the bed. Smooth the mattress cover.
- ! Lay the clean sheet, folded lengthwise, on the bed with the folded side toward the centre of the bed.
- ! A fitted bottom sheet is the most convenient to use. If the sheet is not fitted, tuck it under the head of the mattress and make a mitred corner.
- ! To make a mitred corner:
 - pick up the side edge of the sheet so that the sheet hangs in a triangle from your hand, down the side of the bed;
 - rest the upper portion of the triangle on the mattress;

- tuck in the lower portion of the sheet under the mattress;
 - hold the sheet in place against the side of mattress with one hand. Drop the triangle portion over your hand; and
 - tuck this upper portion under the mattress.
- ! Tuck the side of the sheet under the mattress, working from head to foot; make another mitred corner at the foot of the bed if the sheet is long enough.
- ! Turn your patient onto the clean sheet by rolling him/her over the rolled sheet in the middle of the bed; be careful not to let your patient roll off the bed.
- ! Move to the other side of the bed; remove the soiled bottom sheet; smooth the mattress cover.
- ! Have your patient hold the clean top sheet while you slip the old sheet out from underneath.
- ! Place the blankets and bed spread on the bed.
- ! Allow room for your patient's feet by making a pleat in the bedding, as described earlier.

The Pillowcase

- ! Turn a clean pillowcase inside out over your hand.
- ! Grasp the pillow with a hand while holding onto the inside-out case.
- ! Continue to hold onto the pillow while drawing the case over it with the other hand.

Questions

After practising all of the skills at this station, please complete the questions below by writing your answers on a piece of paper. Submit your answer sheet to the instructor before proceeding to the next skill practice station.

Complete the questions below and submit them to the instructor before proceeding to the next station.

In the section below, write your answers on a piece of paper. There may be more than one correct answer to a question.

1. Which of these people are well supported in the **side-lying position**?
 - a) Woman lying with pillows under her head and neck, her upper arm and elbow, along her back, and under her upper leg and foot. Her feet rest at right angles.
 - b) Woman lying with pillows under her head and neck, along her back, and under her upper leg and foot. Her feet are dropping.
 - c) Woman lying with pillows under her head and neck, along her back, and under her lower leg and foot. Her feet are dropping.
2. Which of these people are well supported in the **stomach-lying position**?
 - a) Man lying flat on his stomach, head turned to one side.

- b) Man lying flat on his stomach, head turned to one side, a small pillow under his abdomen at the level of the diaphragm and another pillow under his lower legs to elevate the toes off the bed.
 - c) Man lying flat on his stomach, his head turned to one side and a pillow under his knees.
3. Which of the following areas are most likely to suffer from pressure sores?
- a) Bottom of spine.
 - b) Toes.
 - c) Fingers.
 - d) Stomach.
4. Pressure sores are caused by:
- a) poor circulation.
 - b) pressure.
 - c) dampness.
 - d) too much sun.
 - e) not enough sleep.
5. Pressure sores can be prevented by:
- a) frequent washing and drying.
 - b) frequent changes in position.
 - c) massage.
 - d) good diet.
 - e) enough sleep.
6. After you have made one side of the bed, you then:
- a) change the bedspread.
 - b) move the patient to the clean side of the bed.
 - c) tuck in the blankets at the bottom of the bed.

Answers

- 1. a)
- 2. b)
- 3. a)
- 4. a)
- 5. b)
- 6. b)

MODULE 11 - MEDICATIONS

A. PREAMBLE

The mark of an advanced civilization is the increasing life span of its people. This is brought about by prompt diagnosis and the correct treatment of disease. Treatment often involves the use of medications. In order for medications to be effective we need to know how to handle and administer them. Some drugs lose their strength or potency over time. The expiry date on the label should be checked before administering them. Medications, when given **as directed**, can restore health rapidly.

In this module we will discuss the administration of medications in various forms, such as eye drops, nose drops, enemas, ointments, etc. To prepare for the teaching of this module, the instructor should read chapter 11 of the handbook, and preview the video **Give as Directed**.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify and describe **The Five Rights of Giving Medication**.
2. Demonstrate the techniques for giving oral medication to a patient in tablet or liquid form.
3. Demonstrate the technique for giving ear drops to a patient (adult).
4. Identify the technique for giving eye drops to a patient.
5. Describe the technique for giving nose drops.
6. Describe the technique for applying an ointment.
7. Describe the technique for giving an enema.
8. Describe the steps for giving a suppository.

C. OUTLINE OF CONTENT

! The Five Rights of Giving Medication

! Administering Various Kinds of Medications

- tablets
- liquids
- ear drops
- nose drops
- nasal sprays
- eye drops
- ointments
- rectal medications

! Points to Remember

SAMPLE LESSON PLAN

MODULE 11 - MEDICATIONS

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce the module. ! Outline the objectives.	Flip chart/ blackboard	5 min.
Lecture/ Demonstration	! Review The Five Rights of Giving Medication . ! Distribute medication containers with appropriately completed labels (including expiry dates to reinforce The Five Rights). ! Introduce the video by telling students to note the following: - The Five Rights of Giving Medication - how to give an oral medication - the difference in technique when giving ear drops to child and an adult. - how to store medication safely ! Select two students one to act as the patient and the other as the caregiver. ! Instructor reads out the steps of the procedure for giving an oral medication while the caregiver carries them out.	Appropriately labeled medication containers Video Give As Directed Refer to Instructor Activity - Return Demonstration	10 min. 10 min.
Lecture/ Demonstration	! Emphasize The Five Rights of Giving Medication , handwashing, ensuring that medication has been taken and proper recording.		5 min.
Break			10 min. (optional)

<p>Return Demonstration</p>	<p>! Two skill practice stations are required.</p> <p>1) Oral Medications</p> <p>2) Ear Drops</p>	<p>Refer to Instructor Activity - Return Demonstration</p>	<p>20 min.</p>
<p>Brainstorming Session/ Lecture</p>	<p>! Divide class into small groups of three or four.</p> <p>! Ask students to appoint a group recorder and identify the Five Rights of Giving Medication and the steps for giving a suppository/ enema, eye drops. nose drops and applying an ointment.</p> <p>! Have each recorder read out group responses eliminating duplication.</p> <p>! Record responses on a flip chart/blackboard filling in knowledge gaps as required.</p>	<p>Flip chart/ blackboard</p>	<p>20 min. (optional)</p>
<p>Summary Review and Module Evaluation</p>	<p>! Hand out copies of the review questions in ANNEX C. Advise students that they have 10 minutes to complete them.</p> <p>! Correct responses may be presented at the next class.</p> <p>! Assign reading for next class.</p>	<p>Questions ANNEX C</p>	<p>10 min.</p>

TEACHING/LEARNING STRATEGIES FOR MODULE 11

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module by making the following points:

- ! identify the objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module; and
- ! describe the learning activities in which students are expected to participate (demonstrations, brainstorming).

2. THE FIVE RIGHTS OF GIVING MEDICATION

- | | |
|---------------|---|
| Objective #1: | Identify and describe The Five Rights of Giving Medication. |
| Objective #2: | To demonstrate the technique for giving tablet medication to a patient. |

Instructor Activity - Lecture/Demonstration

Introduce this segment of the module by making the distinction between over the counter drugs and prescription drugs. Indicate that the combination of different types of over the counter drugs or the combination of over the counter drugs and prescription drugs may have serious consequences.

Emphasize the importance of knowing how to take medications correctly. These points may be found in the introductory paragraphs of chapter 11.

The Five Rights of Giving Medication are outlined in section one of the chapter. To reinforce the points in this section, the instructor can distribute to the class containers with labels for prescription drugs.

Ask students to read out the information on their labels which illustrates the main points as they are presented.

Students should be advised of the need to contact a pharmacist or a health professional if the patient experiences any difficulty taking a drug.

Tablets or capsules, for example, should never be crushed unless authorized by the doctor/pharmacist, since crushing leads to release of the drug all at once.

The instructor may then introduce the video by telling the students that it will begin with a description of **The Five Rights of Giving Medication**. Students will next see demonstrations for giving oral and topical medication. Be sure to specify the different topical medications.

The video will then review how to store medications safely. Students should be aware that bathrooms, because of the humidity factor, are no longer acceptable areas in which to store medication.

The video will end with the administration of a rectal suppository and an enema.

Students should pay particular attention to the following points in the video since these will be required in the demonstrations and in the brainstorming session:

- The Five Rights of Giving Medication;
- when and how to give an enema and suppository;
- how to store medications safely; and
- the difference in technique when administering ear drops to a child and an adult.

3. ADMINISTERING VARIOUS KINDS OF MEDICATIONS

Objective #2: To demonstrate the technique for giving liquid medication to a patient.

Objective #3: To demonstrate the technique for giving ear drops to an adult.

Instructor Activity - Return Demonstration

Two skill practice stations are required.

At **skill practice station one**, the equipment listed below is required.

- Table.
- Handwashing supplies.
- Glass of water.
- Medication bottle labelled correctly containing coloured water.
- Medication cups.
- Pieces of paper (patient chart form) and a pencil.
- Task card containing learning objective and the steps of the procedure.

At **skill practice station two**, the equipment listed below is required.

- A bed or a couch.
- Handwashing supplies.
- Bottle with graduated dropper (labelled correctly) containing water.
- Pieces of paper (patient chart form) and a pencil.
- Task card with learning objective and steps of the procedure.

The instructor should circulate between skill practice stations one and two to ensure correct skill performance.

Student performance should include the tasks listed below.

When administering a liquid medication:

- washes hands before administering the medication (this may be simulated);
- mixes the medication well by turning the bottle top to bottom several times;
- holds the bottle at eye level (label side up) to pour the medication;
- reads the label on the container three times before giving the liquid medication; and
- records the date, time, drug name and dosage of the medication given on the chart form.

When administering ear drops:

- washes hands before administering the ear drops (this may be simulated);
- warms the bottle by rolling it between the palms of both hands;
- expels the air from the dropper before drawing up the required amount of medication;
- reads the label three times before administering the medication;
- pulls the ear lobe upward and backward to instill the drops into the ear canal; and
- records the date, time, drug name and dosage of the medication given on the appropriate chart form.

Student Activities - Return Demonstration

Students are to proceed through the stations one at a time beginning at skill practice station one. Students must demonstrate the skills correctly at these stations including the information to be recorded.

If students are to be used as volunteer patients, the oral medication need not be swallowed nor the ear drops instilled into the ear canal. These tasks should be simulated by the caregiver.

4. POINTS TO REMEMBER

Instructor Activity - Brainstorming Session/Lecture (optional)

Review the purpose of the brainstorming session clearly displayed on a flip chart/blackboard. Indicate that students are required to describe in list form **The Five Rights of Giving Medication**, the steps for giving a suppository and an enema and how to store medications safely. Divide the class into small groups of three or four. Have each group appoint a recorder to record the main points of the brainstorming session. Circulate among the groups to ensure they stay within the topic. At the 15 minute mark inform the groups that they have five minutes to prepare their responses.

As each recorder reads out their responses write them on a flip chart/blackboard and eliminate the repetition. Fill in knowledge gaps as required.

Review the main points of all lecture material. A summary of these points may be found in the section Points to Remember. Be sure to emphasize the need to check with the doctor before crushing tablets if swallowing difficulties are encountered by the patient.

5. SUMMARY REVIEW AND MODULE EVALUATION

Instructor Activity - Lecture

Review common errors in student performance at skill practice station one and two. Emphasize the underlying reasons for performing the right technique.

Hand out copies of the **SUMMARY REVIEW QUESTIONS** in **ANNEX C**.

Student responses are to be submitted to the instructor prior to correction. The instructor may return corrected student responses at the next class.

Assign reading for next class.

TASK CARD FOR SKILL PRACTICE STATION ONE

Objective #2: To demonstrate the technique for giving a oral medication in liquid form.

The doctor has also ordered Maltivol-12, 15 mL three times daily before meals for Mrs. Smith. Give Mrs. Smith her medication following the steps listed below.

- ! Wash your hands.
- ! Read the label to make sure you are using the right medication.
- ! Mix the medicine well by turning the bottle top-to-bottom several times.
- ! Use a marked glass (graduated medicine cup) to make sure that you measure an exact dose.
- ! Read the label again before pouring.
- ! Holding the bottle at eye level, pour the liquid into the glass. Hold the bottle with its label side up, so that any dripping will not mark the label.
- ! Put the top back on the bottle and read the label a third time before putting the bottle away.
- ! Make sure that Mrs. Smith swallows all the medication.
- ! Wash your hands again.
- ! Record the date, time, drug name, and dosage given on the appropriate chart form.

TASK CARD FOR SKILL PRACTICE STATION TWO

Objective #3: To demonstrate the technique for giving ear drops to an adult.

The doctor has ordered two drops of Neo-Medrol ear drops for an infection in Mr. Smith's right ear. Insert two drops of this medication into the external ear canal of the right ear using the steps listed below.

- ! Wash your hands.
- ! Read the label.
- ! Take the bottle and warm it by rolling it between the palms of your hands.
- ! Help Mr. Smith to lie on his left side.
- ! Read the bottle's label again.
- ! Remove the dropper and squeeze the rubber bulb until all of the air has been released.
- ! Immerse the tip of the dropper into the medication.
- ! Slowly release the pressure on the bulb, allowing the medication to draw up into the dropper until it is filled.
- ! Read the label a third time before giving the ear drops. Pull Mr. Smith's ear lobe slightly upward and backward and squeeze two drops of medication into his ear canal.
- ! Be careful not to touch the external ear canal with the dropper.
- ! Advise Mr. Smith to remain lying on that side for three or four minutes.
- ! Wash your hands.
- ! Record the date, time, drug name, and dosage given on the appropriate chart form.

SUMMARY REVIEW QUESTIONS

- Objective #4: Describe the technique for giving eye drops to a patient.
- Objective #5: Describe the technique for giving nose drops.
- Objective #6: Describe the technique for applying an ointment.
- Objective #7: Describe the technique for giving an enema.
- Objective #8: Describe the steps for giving a suppository.

1. Listed below are the steps required to instill eye drops into the eye of a patient. Place them in proper order by numbering them 1 to 13.

- _____ Wipe the eyelid and cheek dry with facial tissue.
- _____ Wash your hands.
- _____ Clean the eyelid using a swab moistened with tap water. Wipe from the inner corner outward.
- _____ Gently draw the lower lid downward and ask your patient to look upward.
- _____ Read the label.
- _____ Expel the air from the dropper and draw up the right amount of --- so1ution into the dropper.
- _____ Stand beside your patient and a little to one side. Re-read the label.
- _____ Drop the medication slowly into the eyelid without letting the dropper touch the eyelid or eyeball. Re-read the label.
- _____ Wash your hands.
- _____ Record the date, time, drug name and dosage given on the appropriate chart form.
- _____ Tell your patient to close his eyes slowly to distribute the drops over the eyeball.

2. Indicate whether the following statements are true or false by placing a **T** (true) or an **F** (false) beside each statement.

- a) When eye drops are instilled into the eye, the patient may experience a stinging sensation.
- b) When instilling eye drops, the dropper should be positioned on the lower eyelid.
- c) To give nose drops the dropper should be ;inserted into the nostril.
- d) The patient should be lying flat on his back without a pillow when nose drops are to be given.

Fill in the blanks using the words provided.

- e) Before giving nose drops, you should _____ the label to ensure the _____ medication.

wash
right
read

- f) The patient should lie flat for _____ following the insertion of nose drops.

30 seconds
60 seconds

3. To apply an ointment onto the skin, you should:

- a) squeeze the ointment directly onto the skin from the tube.
- b) squeeze the ointment onto your fingers and rub onto the skin.
- c) squeeze the ointment onto a tongue depressor and then apply to the skin.

4. When applying an ointment you should wash your hands:

- a) before the application.
- b) after the application.
- c) before and after the application.

5. Mrs. X is complaining of constipation. The doctor has ordered milk of magnesia but Mrs. X doesn't like the taste. Instead she decides to give herself one of her husband's suppositories.

Which of the following **Five Rights of Giving Medication** is Mrs. X ignoring?

- a) The right medication.
- b) The right person.
- c) The right time.
- d) The right amount.
- e) The right method.

6. Rectal suppositories should be inserted into the rectum approximately:

- a) ½ inch.
- b) 1 inch.
- c) 3 inches.
- d) 1 ½ inches.

7. When giving a rectal suppository to a patient in bed, the patient should be on his:

- a) right side with the upper leg flexed over the lower leg.
- b) left side with the upper leg flexed over the lower leg.
- c) left side with both legs extended.
- d) right side with both legs extended.

8. The doctor has ordered a disposable enema for Mrs. X's constipation.

Describe the procedure for giving such an enema by ordering the tasks below from 1 to 8.

- _____ Wash your hands.
- _____ Wash your hands.
- _____ Insert the nozzle into the rectum about three inches.
- _____ Slowly squeeze the enema solution into the patient's rectum.
- _____ Warm the enema solution by rolling the container in your hands.
- _____ Record the date, time, and the results of the enema.
- _____ Remove the protective covering from the nozzle.
- _____ Place the bed pan and toilet tissue within easy reach of the patient.

Answers

1. Wash your hands.

Read the label.

Stand beside your patient and a little to one side.

Clean the eyelid using a swab moistened with tap water. Wipe from the inner corner outward.

Re-read the label.

Expel the air from the dropper and draw up the right amount of solution into the dropper.

Re-read the label.

Gently draw the lower lid downward and ask your patient to look upward.

Drop the medication slowly into the eyelid without letting the dropper touch the eyelid or eyeball.

Tell your patient to close his eyes slowly to distribute the drops over the eyeball.

Wipe the eyelid and cheek dry with facial tissue.

Wash your hands.

Record the date, time, drug name and dosage given on the appropriate chart form.

2. a) T
b) F
c) F
d) T
e) read, right
f) 60 seconds

- 3. (c)
 - 4. (c)
 - 8.
 - 5. (b)
 - 6. (b)
 - 7. (b)
- Wash your hands.

Warm the enema solution by rolling the container in your hands.

Remove the protective covering from the nozzle.

Insert the nozzle into the rectum about three inches.

Slowly squeeze the enema solution into the patient's rectum.

Place the bed pan and toilet tissue within easy reach of the patient.

Wash your hands.

Record the date, time, and the results of the enema.

MODULE 12 - TREATMENTS

A. PREAMBLE

Illness and accidents are a fact of life. While we try to avoid them we must know how to deal with them when they do occur. If you care for someone who is ill or injured you will need to know how to change dressings, reduce pain and swelling, and treat cuts and bruises.

In this module, students will learn how to apply heat and cold, how to change dressings, and how to care for someone with a cast for a broken bone. Read this module and chapter 12 of the handbook, and view the videos **Look, Listen and Count** and **One Step More** in preparation for this class. In addition, the instructor may wish to prepare in advance the main points of the lecture portions of this module and duplicate the task cards for each of the skill practice stations.

B. OBJECTIVES

At the completion of this module the student should be able to:

1. Identify the six uses for applying heat to an area of the body.
2. Demonstrate how to fill a hot water bottle safely.
3. Demonstrate how to prepare and apply a hot compress.
4. Describe the precautions to be used when applying heat in the form of an electric heating pad.
5. Describe an improvised method for giving steam inhalation to a small child.
6. Describe the purpose of an ice bag and a cold compress.
7. Identify the effects of cold applications to areas of the body.
8. Demonstrate the technique of giving a sponge bath and describe its purpose.
9. Demonstrate how to change a simple sterile dressing and apply a spiral bandage.
10. Describe the care of the cast including the different types of casts which may be applied.

C. OUTLINE OF CONTENT

! Use of Heat

- hot-water bottles
- electric heating pads
- hot compresses
- hot soaks
- steam inhalation

! Use of Cold

- ice bags
- cold compresses
- cold-steam
- inhalation

! Sponge Baths

! Dressings

! Securing Dressings

- elasticized net bandages
- roller bandages

! Care of the Cast

- arm casts
- leg casts
- body casts
- spica casts

SAMPLE LESSON PLAN

MODULE 12 - TREATMENTS

Teaching Method	Teaching/Learning Activities	Training Aids	Time (Approx.)
Lecture	! Introduce the module. ! Outline the objectives.	Flip chart/ blackboard	5 min.
Lecture/ Demonstration	! Introduce videos describing what skills students will see. ! Identify the points that students are to note in the video.	Videos: One More Step; Look, Listen and Count	20 min.
Return Demonstration	! Set up four skill practice stations to allow students to practice how to: - fill a hot-water bottle; - apply a hot compress; - give a sponge bath; and - change a dressing and apply a spiral bandage.	Refer to Instructor Activity - Return Demonstration	25 min.
Lecture	! Review main points of the care of a cast. ! Identify the types of casts. ! Identify how to check a casted limb for adequacy of circulation and other complications.	Flip chart/ blackboard	5 min.
Summary Review and Module Evaluation	! Review main points of lecture material. ! Review common errors from skill practice sessions. ! Review gaps in student knowledge obtained from their responses to questions on task cards. ! Hand out Home Assignment , describing what is expected from students.	Flip chart/ blackboard Home Assignment	5 min.

TEACHING/LEARNING STRATEGIES FOR MODULE 12

1. INTRODUCTION OF MODULE

Instructor Activity - Lecture

The instructor should introduce the module making the following points:

- ! review the objectives of the module which have been previously written on the flip chart/blackboard;
- ! state the length of time that will be required to teach the module; and
- ! describe the learning activities in which students will participate (demonstration and **Home Assignment**).

2. USE OF HEAT AND COLD, SPONGE BATHS, DRESSINGS AND SECURING DRESSINGS

Objective #2:	Demonstrate how to fill a hot-water bottle safely.
Objective #3:	Demonstrate how to prepare and apply a hot compress.
Objective #6:	Describe the purposes of an ice bag and a cold compress.
Objective #8:	Demonstrate the technique of giving a sponge bath and describe its purpose.
Objective #9:	Demonstrate how to change a simple sterile dressing and apply a spiral bandage.

Instructor Activity - Lecture/Demonstration

Introduce the first video by stating that the segment will begin with the procedures for applying simple dressings and will proceed with a discussion and demonstration of hot and cold applications. Advise the students to pay particular attention to the following points since these will be required in the return demonstration:

- the number of times and when hands are washed when a dressing is changed;
- how to open a commercially packaged dressing; and
- the correct method of changing a wound dressing.

The instructor should inform the class that they will see an ointment and a cleaning solution applied to the wound. They should be made aware that both are medications and therefore should be used in accordance with the directions obtained from a health professional. They should also note the precautions used when applying heat and cold since these will be included in the **Home Assignment**.

Introduce the second video, by stating that the segment will begin with the purposes of a sponge bath. Students should note the following:

- the temperature of the sponging water;

- what areas of the body to sponge; and
- duration of sponge.

Instructor Activity - Return Demonstration

Four skill practice stations are required. At **skill practice station one** the instructor should have available:

- a hot-water bottle;
- pouring jug with water (it is not necessary to use hot water);
- towel in which to wrap hot water bottle; and
- task card which contains the learning objectives, the steps of the procedure and appropriate multiple choice questions to assess student learning (**See ANNEX A**).

Skill practice station two will require:

- table;
- face cloths;
- salt and water solution;
- measuring cup;
- tongs;
- two pots, one to boil the solution and one to boil the compress supplies (the actual boiling procedure may be simulated); and
- task card with learning objectives, steps of the procedure and questions to assess student learning (**See ANNEX B**).

Skill practice station three will require:

- face cloths;
- a bowl of lukewarm water to perform the sponge;
- a plastic sheet to protect the bedding;
- a manikin doll on which to perform the procedure (if not available, the procedure may be simulated using a student from the class);
- towels, bed linen and a bed; and
- a task card which contains the learning objectives, the procedural steps and a list of questions to assess student learning (**See ANNEX C**).

Skill practice station four will require:

- tongs;

- sterile dressings;
- ointment;
- tape;
- cleaning solution;
- sterile swabs;
- scissors;
- tissues, paper towels;
- pot filled with water to sterilize equipment;
- knife;
- paper bag;
- spiral bandage with fastening clip; and
- task card containing learning objectives, steps of the procedures and multiple choice questions to assess student learning (**See ANNEX D**).

The instructor should circulate between the stations to ensure correctness of student performance. Student practice should include the tasks listed below.

When filling a hot-water bottle, the student:

- checks the hot-water bottle twice for leaks before applying it to the skin; and
- wraps the hot-water bottle in a towel before applying it to the skin.

When applying a hot compress, the student:

- checks with a health professional to determine if the application requires sterile technique and if a bandage is to be applied following the application;
- tests the temperature of the salt solution using the inner area of the wrist; and
- removes the steam from the compress by shaking it with the tongs;
- applies another compress when the first one is cold;
- covers the application area with a sterile gauze dressing before applying compresses (if sterile technique is required); and
- discards each compress into a paper bag after application.

When performing a sponge bath, the student:

- indicates that the patient's temperature, pulse and respirations should be recorded before starting the sponge;

- keeps unsparged body areas covered during the sponge;
- observes the patient for signs of shivering;
- places face cloths over groin, axilla, neck and forehead areas;
- indicates that the patient's temperature, pulse and respirations should be recorded at the end of the procedure.

When changing a simple sterile dressing the student:

- covers the tongs, knife, small dish with water and boils these items for ten minutes (boiling may be simulated);
- washes hands before draining water from pot used to sterilize tongs, knife and bowl;
- picks up tongs by the handles ensuring that the ends remain sterile;
- washes hands after removal of soiled dressing (this may be simulated);
- cleans the wound using a swab, working from the wound outward;
- places the cap of the ointment on a clean tissue with the inside facing up;
- discards the first drop of ointment before applying the required amount onto the sterile knife;
- washes hands after application has been completed and soiled items have been discarded; and
- observes and records the condition of the wound.

When securing a dressing on the forearm with a spiral bandage, the student:

- applies the bandage evenly and firmly using a figure eight pattern;
- observes the circulation of the affected area before, during, and after the bandaging procedure; and
- fastens the spiral bandage in place with a bandage clip.

Student Activities - Return Demonstration

The students should be divided into four small groups, one for each skill practice station. One of the students should act as the patient. one as the caregiver and one other may call out the steps of the procedure.

Other students may act as observers. When all students have demonstrated the procedure and completed the questions at the skill practice station. the group may move to the next station.

Students should write the answers to the questions from the task cards on a separate piece of paper and hand them in to the instructor.

3. CARE OF THE CAST

Objective #8: Describe the care of the cast including the different types of casts which may be applied.

Instructor Activity - Lecture

The instructor should review the different types of casts as well as the reasons for casting. The process for drying a cast should also be included. These points may be found in chapter 12 under **Care of the Cast**.

Emphasize the importance of checking for adequacy of circulation as a means of preventing nerve and tissue damage. Point out the role of daily activities and exercise in promoting circulation to the damaged limb and to unaffected limbs.

4. SUMMARY REVIEW AID MODULE EVALUATION

Objective #1: Identify the six uses for applying heat to an area of the body.

Objective #4: Describe the precautions to be used when applying heat in the form of an electric heating pad.

Objective #5: Describe an improvised method for giving steam inhalation to a small child.

Objective #7: Identify the effects of cold applications to areas of the body.

Instructor Activity - Lecture

Review main points of all lecture material. Point out the common errors in student performance at the skill practice station, reinforcing the need for correct performance.

Review student responses to the questions at each skill practice station, filling in knowledge gaps as required.

Describe what is to be done in the **Home Assignment** suggesting resources that may be used by students (**See ANNEX E**).

TASK CARD FOR SKILL PRACTICE STATION ONE

Objective #2: To demonstrate how to fill a hot- water bottle safely.

Student Instructions

The doctor has ordered a hot-water bottle for Mrs. X. It is to be applied to her left knee when she experiences pain. It is to be applied for a period of 30 minutes. .

Fill this hot-water bottle using the following steps:

- " Check the hot-water bottle for leaks by filling it with water, screwing the top tightly shut and holding it upside down.
- " Pour boiling water into pitcher and add cold water until temperature of water is bearable to the hand (this may be simulated).
- " Rest the hot water bottle in the sink and fill it to two thirds full (another appropriate surface may be used).
- " Hold the neck of the hot-water bottle firmly with one hand and expel the air out of the hot-water bottle with the other hand.
- " Screw on the top of the hot-water bottle when water can be seen in the neck of the hot-water bottle.
- " Hold the bottle upside down and shake it to test it for leaks.
- " Cover the hot-water bottle with the towel provided and apply to Mrs X's left knee.
- " Ask Mrs. X if the temperature and position of the hot-water bottle is comfortable.

Questions

Please answer the questions listed below on a piece of paper and hand them in to the instructor.

1. Indicate on your piece of paper whether the statements below are true or false. Place a T (True)and F (False) beside each letter to indicate your answer. For example:

1. a) T b) T

- a) Before applying a hot-water bottle it should be checked twice.
- b) A hot-water bottle should be filled right to the top to expell the air.
- c) A hot-water bottle should be covered with a towel before application.

2. Write the words that you select on your piece of paper.

The purpose of an ice bag or a cold compress is to _____ bleeding, to _____ pain and to _____ swelling.

increase, relieve, control, reduce.

Answers

1. a) T b) F c) T
2. control, relieve. reduce

TASK CARD FOR SKILL PRACTICE STATION TWO

Objective #3: To demonstrate how to prepare and apply a hot compress.

Student Instructions

Apply hot compresses to Peter's forearm. The area is infected but not open and is not draining. No dressing is required after the compresses have been applied. The compressing solution to be used is salt in water. The solution is to contain 1 teaspoon (tsp) of salt to 2 cups of water.

To apply the compresses, perform the tasks listed below.

- " Boil tongs, four cup measuring cup and two face cloths in water for ten minutes (pre-packaged gauze dressings may be substituted; boiling may also be simulated);
- " Mix 1 teaspoon of salt with 2 cups of water and boil for five minutes (boiling may be simulated);
- " Allow the solution to cool until a drop tested on the inner aspect of the wrist feels comfortable;
- " Dip the face cloths into the salt solution;
- " Remove one of the compresses from the measuring cup and squeeze out the excess water by twisting it with the tongs. Shake each compress out to remove the steam;
- " Apply the compress to the infected area gently ensuring that it is not too hot; and
- " Remove the compress when it is no longer warm and apply another.

Questions

Select the correct answer to the questions below, write them on a separate piece of paper and hand your response sheet in to the instructor.

1. A hot compress should be left on an area:
 - a) for twenty minutes.
 - b) for ten minutes.
 - c) for 5 minutes.
 - d) until it cools down.

2. To make 4 cups of a salt and water solution, you should add:
 - a) 1 teaspoon of salt.
 - b) 1/2 teaspoon of salt.
 - c) 2 teaspoons of salt.

3. You should boil a salt and water mixture for
 - a) 2 minutes.
 - b) 1 minute.
 - c) 5 minutes.

Answers

1. d)
2. c)
3. c)

TASK CARD FOR SKILL PRACTICE STATION THREE

Objective #8: To demonstrate the technique of giving a sponge bath and describe its purpose.

Student Instructions

Young Billy has a fever and the doctor has ordered a sponge bath. Give Billy a sponge bath by performing the following tasks described below.

- " Record Billy's temperature before starting the sponge bath
- " Place a plastic sheet (a garbage bag may be substituted) and a towel under him to protect the linen.
- " Place several face cloths (at least 4) in a basin filled with lukewarm water.
- " Bathe Billy using long even strokes beginning with the upper portion of his body.
- " After sponging an area cover it with a towel or sheet to avoid sudden chilling.
- " Wring out several face cloths and place them on areas where the blood vessels are close to the skin (e.g. groins, forehead). Change frequently for up to twenty minutes, if no chill occurs.
- " Sponge Billy's back again.
- " At the end of the sponge, dry Billy thoroughly.
- " Take and record Billy's temperature.

Questions

Complete the questions listed below on a separate piece of paper and hand your answers in to the instructor.

1. A sponge bath is given:
 - a) to reduce fever.
 - b) to clean the body.
 - c) both of the above.
2. The water used in a sponge bath should be:
 - a) cold.
 - b) hot.
 - c) lukewarm.
3. Wet face cloths should be applied to areas of the body where blood vessels are close to the surface of the skin. These areas are:
 - a) the knees.
 - b) the groins.

- c) the back.
4. Billy has had two sponge baths in the last hour and his temperature has not dropped. You should:
- a) repeat the sponge bath.
 - b) call Billy's doctor for guidance.
 - c) encourage Billy to drink more fluids.

Answers

- 1. a)
- 2. c)
- 3. b)
- 4. b)

TASK CARD FOR SKILL PRACTICE STATION FOUR

Objective #7: Demonstrate how to change a simple sterile dressing and apply a spiral bandage.

Using the supplies at hand, change this dressing and apply a spiral bandage using the figure eight pattern. To change this dressing, you should perform the steps listed below.

- " Boil the small dish, tongs and knife in a large pot for ten minutes with the water covering the items (boiling may be simulated).
- " Wash your hands.
- " Drain the pot of boiling water.
- " Using the tongs, remove the dish from the pot and pour the prescribed cleaning solution into the dish.
- " Remove the soiled dressing by its corners and discard it into the paper bag.
- " Wash your hands.
- " Using the tongs and the sterile swabs, swab the wound with the cleaning solution working from the wound outward. Use one swab only once and discard into paper bag.
- " Open the ointment and lay the cap on a tissue inside up.
- " Discard the first drop of ointment on a tissue.
- " Using the tongs, squeeze the prescribed amount of ointment onto the knife.
- " Open the package of sterile dressings and remove one dressing from the package using the tongs.
- " Spread the ointment (on the knife) onto the dressing and place the dressing over the wound.
- " Fasten the dressing with tape cut into strips.
- " Apply the spiral bandage using a figure eight pattern and secure it with a bandage clip. Be sure to begin the figure eight pattern below the wound.
- " Discard all soiled items.
- " Wash your hands.

Questions

Complete the questions below on a separate piece of paper and hand your answers in to the instructor.

1. Fill in the blanks with the words provided.

Dressings are applied in order to _____ infection, _____ drainage from the wound, _____ the wound from further injury and they provide _____.

support, prevent, absorb, protect.

2. A sterile dressing should be changed:

- a) once a day.
- b) twice a day.
- c) when it becomes wet or dirty.

3. When applying an ointment to a wound you should follow the directions on the container exactly:

- a) because an ointment is a medication and should be applied in accordance with the recommended dose.
- b) to avoid waste.
- c) to reduce the risk of the ointment seeping out from under the dressing.

Answers

- 1. prevent, absorb, protect, support
- 2. c)
- 3. a)

Home Assignment

Complete the following questions at home. You may use the handbook or other reference material. This assignment is to be handed in at the next class. Be sure to put your name at the top of every page of your completed assignment.

1. What are six uses of applying heat to an area of the body?
2. Describe the effects of cold applications to areas of the body.
3. Describe the precautions to be used when applying heat in the form of an electric heating pad.
4. Describe how to improvise when a small child is to be given a treatment of steam inhalation.