

Module 2. Work Settings, Teamwork, and Professionalism

Goals

The goals of this module are to introduce participants to:

- The various long-term care settings;
- The use of care plans and the role of “observe, record, report” in their work;
- The importance of teamwork in assisting and supporting consumers; and
- What it means to conduct oneself “professionally” as a Personal Care Aide.

Time

3 hours and 40 minutes (includes 30 minutes for break and warm-up or closing)

Activities	Methods	Time
2.1 Introduction to Work Settings	Interactive presentation, small-group work, and large-group discussion	1 hour & 20 minutes
2.2 Teamwork and Team Building	Large-group exercise and discussion, interactive presentation, small-group work and discussion, large-group discussion	50 minutes
2.3 Professionalism	Role play, small-group work, group reports and discussion, large-group discussion	1 hour

Supplies

- Flip chart, markers, and tape
- Paper and pencils
- Manila envelopes
- Scissors
- Role play props – large coat for “direct-care worker,” shawl or large sweater for “consumer,” uniform to wear over your clothing, shoulder bag for supplies
- Instructor’s Guide: Cooperative Squares
- Instructor’s Guide: Members of the Consumer’s Team

Handouts

- Handout 2.1 Understanding Home Care
- Handout 2.2 Understanding Nursing Homes
- Handout 2.3 Understanding Adult Day Services
- Handout 2.4 Understanding Personal Care Homes and Assisted Living
- Handout 2.5 Understanding Consumer-Directed Care
- Handout 2.6 How to Read a Care Plan

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- Handout 2.7 Observe, Record, & Report
- Handout 2.8 Members of the Consumer's Team
- Handout 2.9 Professionalism – Doing a Good Job
- Handout 2.10 Getting Ready for Work
- Handout 2.11 Work Schedule and Contact Information
- Handout 2.12 Your First Meeting with a Consumer

Advance Preparation

Review all training and presentation materials for this module.

Copy all handouts for participants.

Activity 2.1: Introduction to Work Settings

Prepare flip chart pages for “Learning Agenda” (step 1), “Work Settings” (step 3) and “Observe, Record, and Report” (step 12).

Activity 2.2 Teamwork and Team Building

For this activity participants will be divided into groups of three. From the number of participants, figure out how many groups there will be. Then make one copy of the *Instructor's Guide: “Cooperative Squares,”* for each group. Cut each puzzle into pieces, following the lines. Put the pieces of each puzzle in a separate manila envelope. After all the puzzle pieces are in their envelopes, take one piece out of each envelope and put it in a different envelope. When you are done, all the envelopes will have the same number of pieces, but all of them will have one piece that belongs to another puzzle.

Prepare flip chart pages for “Cooperative Squares (step 2) and “Members of the Consumer's Team” (step 12 – two pages).

Activity 2.3 Professionalism

Prepare a flip chart page with the definition of professionalism (step 1). Prepare four flip chart pages with the small group assignments for step 5.

Gather “props” for the role play – clothing for “Rose,” the unprofessional direct-care worker, and Mrs. Smith.

ACTIVITY 2.1 Introduction to Work Settings

1 hour & 20 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

- Describe some of the similarities and differences between the different settings for long-term care -- home care, nursing homes, adult day facilities, assisted living (including personal care homes) -- and for the consumer-directed model.
- Describe the needs of consumers in those settings.
- Explain the purpose of the service or care plan.
- Explain the role of the direct-care worker to observe, record, and report changes in the consumer's condition, environment, and relationships.

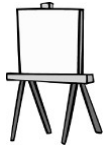
Key Content

- ❖ Consumers of long-term care services are found in several settings—in their own homes (home care), in nursing homes, in personal care homes and assisted living centers, and in adult day facilities. In those settings, the direct-care worker is hired and supervised by an agency or facility. A different model of service delivery is consumer direction, in which the consumer does the hiring and supervision. This could happen in the consumer's home or in a personal care home.
- ❖ Although the principles of caregiving are virtually the same in all settings, each one has particular characteristics—the consumer and the worker have different titles in different settings; different services are provided in different settings; coordination between co-workers and supervisors is different in different settings; and the nature of the relationship between consumers and workers can be different in different settings.
- ❖ Service or care plans are vital in the job of a direct-care worker. The care plan is a document that specifically explains what the direct-care worker is expected to do to assist the consumer. In home care, they are often the only basis for regular communication between a supervisor and a direct-care worker.
- ❖ Since the direct-care worker usually spends more time with the consumer than any other member of the care team, he or she is the “eyes and ears” of the care team. One of the direct-care worker's most important responsibilities is to carefully observe any changes in the consumer's condition or environment, write down their observations in clear and objective language (“record”), and pass that information on to the appropriate person (“report”). Recording and reporting may be different in different work settings, but the principles and the skills of observation are the same.

Activity Steps

Interactive presentation (10 minutes)

1. Introduce the activity by reviewing the prepared flip chart of the “Learning Agenda.”



LEARNING AGENDA
MODULE 2: Work Settings,
Teamwork, and Professionalism

- Describe the different work settings for long-term care
- Explain the use of care plans
- Explain how to observe, record, and report
- Describe teamwork (4 C’s and an R)
- List who is on the consumer’s team
- Describe how to work “professionally”



2. Review the first two bullets in “Key Content.” List the five work settings on one flip chart page (with assisted living and personal care homes as one setting). Split participants into five groups, and assign one of the settings to each group.
3. Explain that each group will work for about 10 minutes. They will discuss the following questions and prepare to share their answers (and questions) with the rest of the group. Recommend that someone volunteer to take notes for their presentation, particularly their questions. Post the prepared flip chart page with group instructions; answer any questions they have about the instructions.



WORK SETTINGS -- Share what you already know:

- Who are the consumers? What type of care is provided?
- Do you know anyone who has worked in this setting? What was it like?
- Do you know anyone who has lived in this setting? What was it like?
- What else do you need to know before working there? List your questions on the flip chart.

⇒ **Teaching Tip**

Having the group input at this point may seem odd, since they may not yet know much about the settings. However, it serves an important purpose that is fundamental to adult learner-centered training. Most people who decide to come for training as a direct-care worker have based their decision on what they have already heard about the work – either from friends or family, or their own experience doing this work in other places. They already have lots of ideas of what it will be like, and many of those ideas will be inaccurate. It is important to identify those ideas early in the training, correct any misconceptions, and affirm the correct information.

The instructor's time for presentation will be brief—about five minutes per work setting—but it will build on what participants already know and it will address their immediate questions or misconceptions. Therefore, the focus of this activity is, primarily, to assess participants' awareness of and knowledge about the different work settings, and, secondarily, to begin to fill the knowledge gaps. The handouts will provide basic information about each work setting, and you will continually add to the trainees' knowledge throughout the training, especially in the modules that describe a consumer in each of these settings.

Small-group work (10 minutes)

4. Allow 10 minutes for group work.

⇒ **Teaching Tip**

Quickly visit each group to make sure they understand their assignment. Since this is their first group work, you will want to keep checking on the groups to help them stay on task. Give them “time-checks” every two minutes to move on to the next question/bullet.

The discussion in each group will probably be dominated by one or two individuals. Remind the groups that the purpose of group work is to give everyone a chance to talk.

Discussion (45 minutes)

5. Starting with the group that discussed home care, ask them to briefly share what they already know about home care, and about the experiences of anyone they know who has worked in home care or been a home care consumer. Then ask what more they would want to know before working there.

⇒ **Teaching Tip**

Participants are usually reluctant to speak at length in the early stages of the training. At the same time, you may find that the stories about someone they know who was a consumer or a co-worker in each setting can get quite lengthy. To keep on time, the group reports should not be more than 3 minutes. Help the groups to focus on the key points: *Was it a positive or negative experience? What made it good? What made it bad?*

6. Thank the group for their efforts. Then distribute and review Handout 2.1, “Understanding Home Care.” Note how the information fits with what they already know – or sounds different. Answer their questions about the work setting through the discussion of the handout, or provide additional information, if available. If their questions cannot be answered at this time, write them on a flip chart page called “Parking Lot,” to be answered during the training course.
7. Continue the process with each of the work settings – hearing the group report and then distributing and discussing the handout. Spend about nine minutes per setting. Note that they will be learning more about each setting in the modules that focus on individual consumers.

Interactive presentation (15 minutes)

8. Remind participants about the “activities of daily living” (ADLs) introduced in Module 1, and ask them to name all five. Note that each consumer has his or her own unique needs in terms of which ADLs they need assistance with and what kind of assistance. In order to let Personal Care Aides know what they are expected to do—and, equally important, NOT do—all the work settings use some version of a service or care plan.
9. Distribute and review Handout 2.6, “How to Read a Care Plan.” Explain that the care plan -- sometimes called a service plan -- is a form of communication from the agency to the direct-care worker, and that it assigns the tasks that the direct-care worker is expected to do. The care plan is initially created by a medical professional, who is responsible for managing the care for each consumer. The care plan does not get changed or written on by the direct-care worker. It is the first thing a direct-care worker should check when starting to work with a new consumer, to find out what specific tasks he or she needs to do with the consumer.
10. Note that care plans may look different for different organizations or different work settings, but the information will be basically the same. In the later modules, they will use care plans that have been filled out for the profiled consumer, and will see how the care plan is an essential tool in guiding their work.
11. Explain that, in the next activity, participants will learn about some of the other staff who work with consumers in different settings as part of a team. It is important to note now that the direct-care worker usually spends more time with the consumer than any other member of the care team. Thus, he or she is the “eyes and ears” of the care team. Personal Care Aides are trained to identify and report potential problems, so that the consumer can get medical attention or other assistance, if needed.
12. Post and review the prepared flip chart sheet on “Observe, Record, and Report.” Explain that one of the direct-care worker’s most important responsibilities is to carefully observe any changes in the consumer’s condition or environment. Ask participants to give examples of what kinds of changes they might observe.



OBSERVE, RECORD, REPORT

OBSERVE:

- Changes in consumer's condition, environment, or relationships

RECORD:

- Using clear, objective language
- Format provided by agency

REPORT:

- To appropriate person for each work setting

13. Distribute and review Handout 2.7, “Observe, Record, and Report.” Note that they will be learning more about what to observe and how to record throughout this training.

⇒ **Teaching Tip**

On Handout 2.7, the answer for “Practice Being Objective” is “d.”

ACTIVITY 2.2 Teamwork and Team Building

50 minutes

Learning Outcomes

By the end of this activity, participants will be able to:

- Describe the benefits of working as a team.
- List positive behaviors that are helpful to teams.
- Identify the members of the care team in various long-term care work settings.
- Describe the role and explain the importance of the direct-care worker as a member of the team in a person-centered care.

Key Content

- ❖ Wherever trainees provide care—whether in the consumer’s home, in a personal care/assisted living home setting, in adult day care, or in the nursing home —there is a group or “team” of individuals responsible for the consumer’s care.
- ❖ When a team works well together, it can provide far better, more comprehensive care to a consumer than individuals working separately. Elements of teamwork include good communication, cooperation, clarity, having a common goal, and respect for each other.
- ❖ Of all the team members, the direct-care worker is often the person who spends the most time with and becomes the closest to the consumer. The direct-care worker often knows the consumer’s likes and dislikes, personality or style, preferred ways of doing things, and the consumer’s background or life stories.
- ❖ Throughout this training, participants will be developing skills for working as members of a team. They will do this through the many small-group activities that emphasize learning from each other and working together to complete a task or achieve a common goal.

Activity Steps

Large-group exercise (15 minutes)

1. Explain that, regardless of the work setting, teamwork is essential in assisting and supporting long-term care consumers. To introduce the topic, participants will play a game called “Cooperative Squares,” that will help them to practice the process of team building. Divide participants into groups of 3; each group should have a flat surface (table or desk) to work on. Create some distance between the groups.

2. Explain that each group will get an envelope with cut-up pieces of paper that fit into a square. Post and review the prepared flip chart page with the instructions, “Cooperative Squares.”

⇒ **Teaching Tip**

During “Advance Preparation,” you already determined how many groups you will have. There will be one puzzle – or “square” -- for each group. Replace the “X” on the flip chart page with the number of groups. It is important to note that the groups are not finished until all the squares, or puzzles, are completed.



COOPERATIVE SQUARES

- The goal -- Create “X” squares of equal size in 5 minutes
- No verbal communication at all.
- Anyone can give a puzzle piece to any person.
- No one can take a puzzle piece from any person.

3. Hand out the envelopes with the puzzle pieces to each group and say, “Go.”

⇒ **Teaching Tips**

- The point of this exercise is that participants not only have to work within their small group to put their puzzle together, but they have to work with all the other groups to find their missing piece. Cooperation comes in when the groups realize that they have to give up their “odd” piece to another group in order to achieve the goal for the whole group.
- Watch the behaviors of the small groups, noting how they initially work with each other and how long it takes them to move from their small groups and begin to work in a large group. Watch the dynamics of the large group as they help each other to complete all the squares. Make sure the activity remains non-verbal.
- The trainees can get very frustrated during this game. It is important

to watch for both the positive and negative behavior and help the trainees to process their experience after the game.

3. After all the squares have been completed – or after five minutes, whichever comes first – ask:

- *How did that game feel?*
- *How did you finally accomplish your task?*
- *How did it feel when you all came together finally?*
- *What was frustrating about it?*

Large-group discussion (5 minutes)

4. Acknowledge the behaviors that you observed – both “team-like” and not. Talk about how important cooperation and teamwork are, but acknowledge that it is not easy. Explain that in this field of work, people are expected to work together cooperatively, for the benefit of the consumer.

5. Debrief the activity by asking participants:
What did you learn about team work from this activity?

⇒ **Teaching Tip**

Responses should include:

- *You need to communicate clearly and effectively to get the job done*
- *Group work is not easy – it takes effort and cooperation*
- *You must all know your goal and agree on it*
- *You must respect all members, and*
- *Everyone makes a difference in a well-functioning team*

6. Summarize participants’ comments. Then post and review the prepared flip chart page.¹



TEAM-BUILDING:
4 C’S AND AN R

- **Common goal**
- **Communication**
- **Cooperation**
- **Clarity**
- **RESPECT**

¹Adapted from the Institute for Caregiver Education’s 4C’s approach to team development.

Interactive presentation (10 minutes)

7. Note that working on a team often involves having a common goal, something to work towards. Explain that in all the settings participants will learn about during this training there is a team in place. This team consists of several members with different roles, depending on the setting, and every team has one essential MVP (most valuable player)—the consumer. Ask participants: *What do you think is the common goal in providing long-term care services for an individual?* [Responses may include: to keep the consumer as healthy as possible, to make the consumer happier, to help the consumer live independently, etc.]
8. Post the two prepared flip chart pages for “Members of the Consumer’s Team.” Quickly review the list of workers, asking for input from participants about what some of the titles mean--e.g. occupational therapist, dietitian. (They will get a description of each position in Handout 2.8. More detailed descriptions are provided for the instructor in the *Instructor’s Guide, Members of the Consumer’s Team.*)



**MEMBERS OF THE
CONSUMER’S TEAM**

Direct contact

Consumer
Direct-care worker
Nurse
Doctor
Social worker
Recreational therapist
Occupational therapist
Physical therapist
Speech therapist
Chaplain or clergy
Van driver
The consumer’s family

**MEMBERS OF THE
CONSUMER’S TEAM**

No direct contact (usually)

Administrator
Dietitian
Food service worker
Pharmacist
Housekeeping staff
Maintenance workers

Small-group work (5 minutes)

9. Ask participants to go into the same work-setting groups from Activity 2.1. Ask them to list all the people or positions who they think might be part of the consumer’s “team” in their setting.

Discussion (15 minutes)

10. Ask each group to report their list. After each group reports, ask other participants if they have any additions or questions about that group’s list. Correct as needed. Be sure that they include the consumer’s family as appropriate.

11. Ask: *Which position do you think has the most contact with the consumer?* [Answer: the direct-care worker!] Explain the key role the direct-care worker plays for the consumer and the team, repeating the themes from “Observe, Record, Report” about the importance of the direct-care worker’s observations.
12. Summarize by explaining that each member of the team contributes to the overall quality of a consumer’s care. An effective team communicates with each other; respects each other’s talents, abilities and input; recognizes and appreciates the value of each team member’s efforts; encourages participation; and maintains focus on the goal. Such a team will succeed in supporting a person in living a quality life. Further, as Personal Care Aides, they will have key roles on their teams as the ones with the most familiarity with the consumer and the most awareness of the consumer’s needs and preferences.
13. Distribute Handout 2.8, “Members of the Consumer’s Team,” for the participants to read later and keep in their binders.



ACTIVITY 2.3 Professionalism

1 hour

Learning Outcomes

By the end of this activity, participants will be able to:

- Define professionalism in direct-care work.
- Explain the importance of timeliness and appearance in direct-care work.
- Demonstrate how to effectively introduce themselves in a professional manner.

Key Content

- ❖ For many people, direct-care work is their first paid work experience. This module explores work readiness, timeliness, and professional demeanor so that participants feel better prepared for the work experience itself.
- ❖ “Professionalism” means working in a professional manner, or doing a good job at whatever one does. The way a worker looks, talks, and acts can show respect for the consumer and show pride in themselves and their work. Another aspect of professionalism is being on time and being ready to start work from the moment the worker arrives.

Activity Steps

Interactive presentation (5 minutes)

1. Explain that professionalism may be an unfamiliar term. Ask what it means to participants. After a few responses, post and review the prepared flip chart page.



PROFESSIONALISM: **Doing a Good Job**

- Show pride in yourself and your work, AND show respect for the consumer.
- You can do this in the ways you look, talk, and act; AND
- Being on time and being ready to start work from the moment you arrive.

Role play and discussion (10 minutes)

2. Explain that you will do a role play, to give a focus for discussing what “professionalism” means and why it is important in direct care. In this situation, you [the trainer] will play “Rose,” a new direct-care worker, providing home care for “Mrs. Smith.” Ask for a volunteer to play Mrs. Smith. Then set the scene by reading aloud:

Rose is going to the consumer’s house for the first time. The consumer’s name is Mrs. Smith. Rose has been assigned to work with her for two hours a day on Mondays, Wednesdays, and Fridays (from 8:00 - 10:00 am). Although this is her first day of work, and she’s thirty minutes late, Rose thinks she knows exactly what to do! Mrs. Smith sits in a chair the whole time and says nothing.

3. Arrange chairs to set the “stage” for the role play (including the door that you open and let the cat out), get “Mrs. Smith” seated, put on your “uniform,” and begin the role play.

⇒ **Teaching Tips**

In this role play you want to convey Rose as doing everything completely WRONG. Some ideas:

- Wear a raggedy shirt, or an overcoat inside out (make your appearance look haggard).
- Look at your watch and state loudly, “Well, they shouldn’t mind that I’m a half-hour late; it’s not like she’s going anywhere.”
- Walk right past the consumer after she opens the door.
- Without saying hello, start looking frantically for “the service plan,” saying loudly, “where’s the service plan, where’s the service plan? I can’t do my job if I don’t have a service plan!”
- Take Mrs. Smith’s pulse without introducing yourself.
- Have your cell phone ring, and it’s your daughter and she needs a ride to school.

4. End the role play, and then ask participants:
 - *How do you think Mrs. Smith might feel right now?*
 - *Do you think Rose acted professionally? Why or why not?*
 - *What might Rose have done differently to be more professional?*

Small-group work (10 minutes)

5. Explain that participants will now focus on four specific areas of professionalism – their appearance, being on time, being ready to work when they arrive, and taking care of home and personal issues so they are not distracted at work. Divide participants into four groups and give each group one of the prepared flip chart pages and a marker. Ask each group to

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write down everything that comes to mind in their assigned area, with one person serving as the recorder for the group. Ask them to be prepared to report to the rest of the group.



Personal things to take care of, so I'm not distracted at work

What should I do the day/night before to help me get there on time?

What to wear/What not to wear?

What do I need to know, so I'm ready to work when I get there?

Large-group exercise: Group reports and discussion (15 minutes)

6. Ask each group's reporter to post their flip chart page and read it aloud to the large group. After each group's report, ask if anyone has questions, comments, or would like to add something to the list.

⇒ Teaching Tip

There may be some overlap between the group reports. For example, planning for child care could be both a "personal thing to arrange for" and "what to do the day/night before." If it is reported by both groups, simply note that both are correct.

7. Thank the groups for their work. Distribute Handout 2.10, "Getting Ready for Work." Quickly review the points as a summary of the discussion, noting ideas that were not brought up in the group discussion. Note that all of the preparation steps are part of being

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professional. Although the preparation steps may change on different days or for different people, it is important to know what is involved in getting ready for a workday.

8. Distribute Handout 2.11, “My Schedule and Contact Information,” and discuss how to use this to organize for work.

Discussion (10 minutes)

9. Note that, as the group discussed earlier, one thing Rose forgot to do when she got to Mrs. Smith’s house was to introduce herself. Ask participants:

When you introduce yourself to someone you are meeting in a work relationship, what information should you include? What is important to do/keep in mind?

10. After a few responses, distribute and review Handout 2.12, “Your First Meeting with a Consumer.”

Role-play and discussion (10 minutes)

11. Explain that you will now “re-do” the role play with Rose and Mrs. Smith, and show professionalism this time. Ask for another volunteer to be Mrs. Smith. Ask participants to call out what you should do this time to be professional. As they call it out, act it out. Prompt participants to give you instructions in the right order (see Teaching Tips).

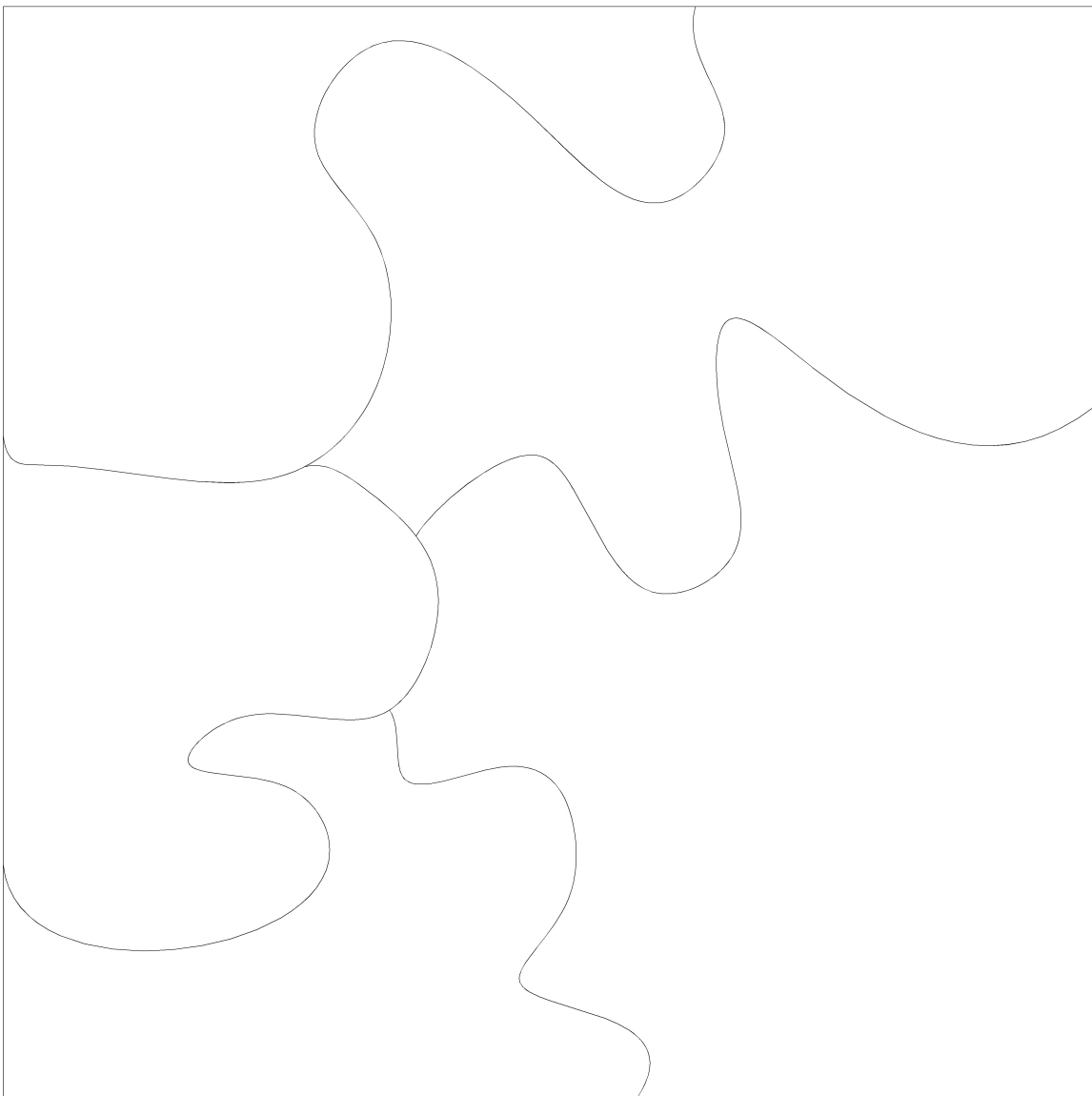
⇒ Teaching Tips

This time you want to demonstrate doing things RIGHT. Basic steps will include:

- Wearing a uniform
- Wearing a name tag
- Look at your watch and saying, “I’m sure glad I took the early bus to get me here on time!”
- Say hello, introduce yourself. Mention your agency and your reason to be there. Ask if you are talking with Mrs. Smith.
- Wait for Mrs. Smith to invite you in.
- Ask where you can put your bag.
- Ask if you can use the bathroom to wash your hands before you get started.
- Ask Mrs. Smith where she keeps her care plan and if you can see it.
- Explain that you’d like to start by taking her pulse, if she doesn’t mind. Ask her where she would like you to do that, and to make herself comfortable.

12. To summarize this activity, review the points of the flip chart page with the definition of professionalism and ask participants why they think it is important in direct-care work.

Instructor's Guide: "Cooperative Squares" Activity 2.2, Step 3



Instructor's Guide: Members of the Consumer's Team

Activity 2.2, Step 8

Consumers – Consumers (and/or their representatives) are the most important members of the team! Consumers should be involved in making decisions about their care and be encouraged to express their feelings and desires. Due to cognitive impairments, sometimes consumers are limited in their ability to make decisions but all efforts should be made to include the consumer to the greatest extent possible.

Direct Contact

(Long Term Living) Personal Care Aides -- Personal Care Workers, Home Health Aides, and Certified Nursing Assistants – Personal Care Aides (DCWs) spend more time with consumers than other members of the health care team; they are the “eyes and ears” of the team. Other team members will rely on the DCW to report changes in the consumer’s condition or behavior.

Nurses – There are two kinds of nurses:

- **Registered Nurse (RN)** – Registered nurses are licensed professionals responsible for providing skilled nursing care and developing care plans for consumers. The nurse assigns tasks and supervises the DCW’s daily care of the consumer.
- **Licensed Practical Nurse (LPN)** – Licensed practical nurses are licensed professionals who are usually in charge of giving medications and performing treatments. LPNs may also supervise DCWs under the supervision of an RN.

Doctors – Doctors (physicians), are licensed professional who diagnose disease or disability and prescribe treatments. In home health care, the physician “prescribes” these services based on the consumer’s medical condition.

Social Workers – Social workers are professionals who help consumers with complex social problems (relationships with others, family issues, financial problems, housing issues, etc.), provide counseling and emotional support, and may also make appointments and arrange services or transportation. In home health care, the social worker typically acts as the hospital ‘discharge planner’ and consults with the consumer about the range of medical and non-medical services required in the home. The initial plan of care is completed by the social worker who contacts the licensed home health agency selected by the consumer.

Recreational Therapists – Recreational therapists provide social and recreational activities for the consumers. They work in nursing homes, adult day care facilities, and assisted living centers.

Occupational Therapists (OTs) – Occupational therapists are licensed professionals who help consumers perform daily living tasks and adjust to their disabilities. OTs may work with consumers in all settings.

Physical Therapists (PTs) – Physical therapists are licensed professionals who administer therapy and exercise to muscles, bones and joints to improve function. PTs may work with consumers in all settings.

Speech Therapists – Speech therapists are licensed professionals who help consumers speak, when a physical disability has made it difficult.

Chaplains or Clergy – Chaplains address consumers' religious needs and provide emotional support.

Van Drivers – In some settings, especially consumer-directed and Adult Day Services, the van driver is a very important member of the team. The van driver can spend considerable time with consumers and may have good information about their physical capacities. The van driver also often interacts with the consumer's family or others that live with the consumer.

Consumer's Family – The consumer's family often contributes to the planning of the care as part of the team. When the consumer has significant cognitive, mental and/or physical limitations, a family member may be the designated 'surrogate/representative' who makes decisions on the consumer's behalf.

Indirect Contact

Administrators – In a nursing facility, the administrator is legally responsible for the care that is provided and oversees all activities.

Dietitians – Dietitians are licensed professionals who create special diets for consumers with special needs in order to help people learn to maintain or improve their health and to manage disease.

Food Service Personnel – Food service personnel prepare and deliver meals. In some nursing homes, food service workers also assist with meals.

Pharmacists– Pharmacists are licensed professionals who fill prescriptions and provide medications as ordered by the physician.

Housekeeping Personnel – Housekeeping personnel keep the environment clean and safe. In some nursing homes, housekeeping workers are encouraged to use this time to build relationships with consumers as they do their tasks.

Maintenance Workers – Maintenance personnel provide upkeep to the building and perform repair work.

Module 2 Handouts

Work Settings, Teamwork, and Professionalism

Activity 2.1: Introduction to Work Settings

Handout 2.1
Understanding Home Care

Handout 2.2
Understanding Nursing Homes

Handout 2.3
Understanding Adult Day Services

Handout 2.4
Understanding Personal Care Homes & Assisted Living

Handout 2.5
Understanding Consumer-Directed Care

Handout 2.6
How to Read a Care Plan

Activity 2.2: Teamwork and Team Building

Handout 2.7
Observe, Record, & Report

Handout 2.8
Members of the Consumer's Team

Activity 2.3: Professionalism

Handout 2.9

Professionalism: Doing a Good Job

Handout 2.10

Getting Ready for Work

Handout 2.11

Work Schedule and Contact Information

Handout 2.12

Your First Meeting with a Consumer

Handout 2.1—Understanding Home Care

Page 1 of 2

What is home care?

Home care means taking care of people in their home. Usually the direct-care worker works for a home care agency. The agency assigns the worker to one or more consumers.

What are the workers called?

Workers in home care are called home attendants, home care aides, home health aides, personal attendants, personal care aide, or direct support professionals.

Who are the consumers of home care?

The consumers may be people who are:

- Sick or hurt, but getting better
- Sick or disabled for the rest of their lives
- Elderly and needing assistance
- Dying (services provided by licensed health agency offering hospice services)

Handout 2.1—Understanding Home Care

Page 2 of 2

Why do consumers get home care?

Consumers get home care because:

- They want to stay at home.
- Their family and friends cannot give them all the care they need.

What types of care do direct-care workers give in the home?

Direct-care workers may give:

- Comfort and companionship
- Assistance with activities of daily living
- Assistance with cleaning, shopping and getting to appointments
- Health-related care (depending on their training)

What are the hours for direct-care workers in the home?

The work hours depend on the consumer's needs. Often the work is part-time, though some personal attendants are "live-ins" who may work and live at the consumer's home.

Handout 2.2—Understanding Nursing Homes

Page 1 of 2

What is a nursing home?

A nursing home is a place where people can live and get a full range of services: health care, personal care, meals, and activities.

What are the workers called?

Workers in nursing homes are called nurse aides (sometimes “certified nurse aides” or CNAs) or nursing assistants.

Who lives in a nursing home?

People who live in a nursing home are called “residents.” There are 2 types:

- Short-term residents are there just until they are well enough to go back home.
- Long-term residents have moved in, with no plans to leave.

Why do residents enter a nursing home?

They need more care than they can get at home, but not enough care to need to be in a hospital. They may be hurt, sick, or old.

Handout 2.2—Understanding Nursing Homes

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What types of care do direct-care workers give in nursing homes?

Direct care workers may give:

- Comfort and companionship
- Assistance with activities of daily living
- Health-related care

What are the hours for direct-care workers in nursing homes?

Most nursing homes have 3 shifts – day (7 to 3), evening (3 to 11), and night (11 to 7). Workers may be full time or part time. They usually take turns working on weekends and holidays.

Handout 2.3—Understanding Adult Day Services

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What are adult day services?

Adult day services are social activities, health services, and personal care supports. These services are provided at a special place called an adult day center.

Staff make sure consumers are safe during the day when family caregivers are not home.

Who uses adult day services?

Consumers may be people who are:

- Old
- Sick
- Physically injured
- Brain injured

What types of care do direct-care workers give in adult day services?

Direct-care workers may give:

- Comfort and company
- Help with daily tasks
- Personal care

What are the hours for direct-care workers in adult day services?

Hours are usually day-time. They may be full-time or part-time.

Handout 2.4—Understanding Personal Care Homes and Assisted Living

Page 1 of 1

What are personal care homes and assisted living?

Personal care home and assisted living are both places where people can live and get some services.

Who lives in a personal care home or assisted living?

Most residents:

- Can do most personal care and tasks of daily living by themselves
- Can get around by walking or using a cane
- Have had a big change in their health
- Lived at home until now
- Are old

What types of care do direct-care workers give in personal care homes and assisted living?

Direct care workers may give:

- Assistance with cleaning
- Comfort and company
- Help with daily tasks
- Personal care

What are the hours for direct-care workers in personal care homes and assisted living?

There are usually shifts, like in nursing homes. Hours may be full-time or part-time.

Handout 2.5—Understanding Consumer-Directed Care

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What is consumer-directed care?

In consumer-directed care, consumers live at home and are in charge of their own care. The consumer hires and supervises the direct-care worker either independently or through a support organization such as a Center for Independent Living (CIL).

Who are the consumers of consumer-directed care?

The consumers usually:

- Are able to manage their own care
- Are adults who have recently been disabled
- Are adults who have had a disability from birth
- Have trouble doing daily tasks

What types of support do direct-care workers give in consumer-directed care?

The types of support depend on the consumer.

Consumers may ask you to assist with:

- Personal care
- Daily tasks
- Going to work, appointments, or community activities

What are the hours for direct-care workers in consumer-directed care?

The hours depend on the consumer.

Handout 2.6—How to Read a Care Plan

Page 1 of 2

The care plan (or service plan) describes all the tasks that a direct-care worker is expected to do with the consumer. If a task is NOT on the care plan, the worker is not supposed to do it.

Care plans look different, for different agencies and different work settings. But all care plans should have the following information.

- The consumer's name (and in home care, the address)
- Signature of the consumer or someone representing them
- The agency providing care or services, the person who wrote the care plan, and that person's signature
- The type of worker that is required for each task
- The date that the plan was written and the date when care should start

Types of tasks – including how often they should be done and any special instructions

- Personal care – e.g., bathing, dressing, using the toilet
- Activities or exercises – e.g., how to get around, transfers needed
- Care of the home and non-personal care -- e.g., cleaning,

shopping, going with consumer to appointments

Handout 2.6—How to Read a Care Plan

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- “Treatments” – health-related tasks -- e.g., assisting in changing bandages, measuring food “input” and waste “output,” reminding about medications
- Food-related instructions – e.g., diet, meal preparation, or assisting with eating

Handout 2.7—Observe, Record, and Report

Page 1 of 3

Direct-care workers spend more time with consumers than any other health care worker. That makes them the “eyes and ears” of the care team. Things that the direct-care worker notices about the consumer could improve their lives – or even save their lives!

Direct-care workers should keep notes of when they do the tasks that are listed on the care plan. They also should note what they observe while doing those tasks, and while spending time with the consumer.

This important part of the worker’s job is called “Observe, Record, and Report” – or ORR, for short. These tips will help you to do this job well.

What should I observe?

- Changes in the consumer’s condition – physical, mental, emotional
- Changes in the environment, or setting, that could affect the consumer’s health
- Changes in relationships with family and friends that could affect the consumer’s health

Changes in the consumer’s condition – look for:

- Signs of physical discomfort
- Changes in what the consumer can do
- Changes in behavior
- Changes in physical appearance

Handout 2.7—Observe, Record, and Report

Page 2 of 3

Changes in the consumer’s environment – look for:

- Potential safety hazards
- Health hazards

Changes in relationships with family and friends – look for:

- Family or friends who used to visit regularly and don’t anymore
- Family or friends who suddenly start visiting regularly

How do I “record” it?

Different agencies will have different forms that they want you to use for recording.

What should I write?

Be “objective.” That means, don’t try to figure out why something is happening – write only what you observe or what happens.

- Write only what you see
- Write only what you hear
- Write only what you do
- Date all of your observations
- Sign your name

Handout 2.7—Observe, Record, and Report

Page 3 of 3

Practice being “objective.”

Mrs. Hernandez, your consumer, is very cranky today. She yells at you, and says, “Don’t ever come here again!” What should you write on your report?

- a) Mrs. Hernandez’s condition is getting worse.
- b) Mrs. Hernandez does not like me.
- c) Mrs. Hernandez was cranky today.
- d) Mrs. Hernandez yelled at me, and said I should not come back.

Who do I “report” my observations to?

It may be your supervisor, a service coordinator, or a nurse. Each agency will have different guidelines. They will tell you who to report to when you start working.

Handout 2.8—Members of the Consumer’s Team

Page 1 of 4

Members of the Care Team

Taking care of consumers is a team effort. The people who make up that team are different in different work settings. Here are descriptions of different types of workers that will be involved in different settings. Some people see and talk with the consumer (direct contact). Other people do not, but their work still affects the consumer.

Consumer

The consumer is the most important member of the team. In most cases, consumers say what they want and help plan their care. When consumers have trouble thinking, they cannot make many choices. But they should still be heard.

People with direct contact with the consumer

Direct-Care Worker

The direct-care worker spends more time with the consumer than any other member of the team. They keep an eye on the consumer. Other team members rely on the direct-care worker to tell them about any changes they see.

Handout 2.8—Members of the Consumer's Team

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Nurse

There are 2 kinds of nurses: RNs and LPNs.

- The Registered Nurse is called an RN for short. RNs offer the consumer skilled nursing care and make the care plan. They give the direct-care worker tasks and supervise them.
- The Licensed Practical Nurse is called an LPN for short. The LPN is often in charge of treating the consumer and giving them medicine, and may supervise direct-care workers.

Doctor

The doctor figures out what's wrong with the consumer's health. The doctor says what should be done to help them get better.

Social Worker

The social worker helps the consumer with issues like money, housing, and getting along with other people. The social worker may also talk with the consumer about feelings.

Recreational Therapist, or Rec Therapist for Short

The rec therapist offers the consumer fun things to do. This can include going to music programs, making crafts, or going on outings.

Occupational Therapist, or OT for Short

The OT assists the consumer to do daily tasks. The OT helps the consumer work around their limitations.

Handout 2.8—Members of the Consumer’s Team

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Physical Therapist, or PT for Short

The PT assists the consumer to move their muscles, bones, and joints to make them work better.

Speech Therapist

The speech therapist assists the consumer to speak clearly.

Chaplains or Clergy

Chaplains or clergy gives the consumer religious help and talk to them about life challenges.

Van Driver

The van driver takes the consumer where they need to go. The driver may spend a lot of time with the consumer and their family.

The Consumer’s Family

The consumer’s family often helps plan and give the care.

People who may not have direct contact with the consumer, but whose jobs affect the consumer

Administrator

The administrator is in charge of the nursing home.

Dietitian

The dietitian plans what the consumer should eat and drink to be as healthy as possible.

Handout 2.8—Members of the Consumer’s Team

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Food Service Workers

Food service workers make and deliver meals. In some nursing homes, food service workers assist with meals also.

Pharmacist

The pharmacist provides the medicines ordered by the doctor.

Housekeeping Workers

Housekeeping workers keep the world around the consumer safe and clean. In some nursing homes, housekeeping workers are encouraged to use this time to build relationships with consumers as they do their tasks.

Maintenance Workers

Maintenance workers keep the building in good shape.

Handout 2.9—Professionalism: Doing a Good Job

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Professionalism means working in a professional way, or always doing your best work.

As a professional, you show pride in yourself and your work. And you also show respect for the consumer.

- You can do this in the ways you look, talk, and act; AND
- Being on time and being ready to start work from the moment you arrive.

Handout 2.10—Getting Ready for Work

Page 1 of 2

Getting Ready for Work

Here are some important things to remember about being prepared to do your best work:

What things could I wear?

- Wear clean clothes.
- Wear clothes and shoes that are easy and safe to work in.
- Wear a name badge that is easy to see and read.
- Follow the rules of your agency (e.g., uniforms might be required, white clothes or shoes, etc.)

What things should I not wear?

- Do not wear clothes that are too tight or show too much skin.
- Do not wear something that you mind getting dirty.
- Do not wear clothes with holes or wrinkles.
- Do not wear large earrings, rings and bracelets

What should I do the day or night before, to help me get to work on time?

- Check the weather for the next day.
- Plan what to wear. Iron your clothes, if needed.
- Pack the things you will need.
- Make sure there is gas in the car, or you have money for the bus or train.

- Take the route to work, to see how long it takes.
- Set your alarm clock.

Handout 2.10—Getting Ready for Work

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What do I need to know, so I'm ready to work when I get there?

- Your schedule – days and times
- Where you need to go and how to get there
- What to do if you will be late
- The name of your consumer
- The name and contact number of your supervisor
- Who you are supposed to see when you get to work (in addition to the consumer, if anyone)
- What kinds of assistance you will be providing

Personal things to take care of, so I'm not distracted at work:

- Plan child care, if needed. Have a back-up plan.
- Let people know they can't reach you when you're at work, except for emergencies.
- Don't answer your cell phone at work, unless it's an emergency.
- Reschedule any appointments that conflict with work time.
- Get a good night's sleep.

Handout 2.11—Work Schedule and Contact Information

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Here is the kind of information that you will need to keep track of your schedule. The contact information will be useful to you. You may also want to give it to your children's school or day-care providers, in case of emergency.

Start Date
Days of the Week (that I work)
Hours

Work Address
Name of my contact person at work
Number where I can be reached in family emergencies

Things I need to bring with me

Other notes

Handout 2.12—Your First Meeting with a Consumer

Page 1 of 1

Your first meeting with a consumer is important for establishing a good working relationship. Here are some important things to remember.

- Introduce yourself -- use your first and last name.
- Always wear a name badge in plain view and with large print.
- Refer to the consumer as “Mr./Mrs. Smith” unless they request that you call them by their first name or nickname. Do not use slang terms such as “sweetie” or “dear.”
- Use a friendly tone of voice. But also stay focused on your job -- this will help show your professionalism.
- Get the consumer’s permission before beginning a task. Explain what you are going to do.

Special tips for home care:

- Say what agency you are from and why you are there. If you are greeted at the door by a family member, introduce yourself to the family member and then repeat your introduction when you meet the consumer.
- Wait to be invited into the home. Wait to be invited to sit and talk.

- Ask for permission to use the bathroom to wash your hands.