

The Home Carer's Manual

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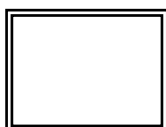
The Home Carer's Manual

Contents

Index.	Page 2
Learning outcomes.	Page 3
Fundamental standards.	Pages 3 - 4
Introduction.	Page 5
Unit One.	Pages 6 - 10
<i>The role of the home care worker.</i>	
Complete Unit One exercises.	Pages 7 / 10
Unit Two.	Pages 11 - 13
<i>Professional boundaries.</i>	
Complete Unit Two exercises.	Pages 11 / 13
Unit Three.	Pages 14 - 17
<i>Risk assessments and how they support you.</i>	
Complete Unit Three exercises.	Pages 14 / 16 / 17
Unit Four.	Pages 18 - 21
<i>The importance of communication.</i>	
Complete Unit Four exercises.	Pages 19 / 20 / 21
Unit Five.	Pages 22 - 24
<i>Care planning.</i>	
Complete Unit Five exercises.	Pages 23 / 24
Unit Six.	Pages 25 - 27
Travel safety.	
Complete Unit Six exercises.	Pages 26 / 27
Unit Seven.	Pages 28 - 32
<i>Dealing with violence and aggression.</i>	
Complete Unit Seven exercises.	Pages 31 / 32
Unit Eight.	Pages 33 - 35
What do we mean by Information Governance?	
Complete Unit Eight exercises.	Pages 33 / 34
Conclusion.	Page 36

N.B: We are aware that official practice is to use the terms “service users” or “people using this service” to describe those receiving care. We prefer the term “client” and use it throughout our training package.

Key:



worksheet



The Home Carer's Manual

Learning outcomes.

- Understand the role of the home care worker.
- Understand why professional boundaries are important.
- Identify the need for risk assessments in your work role.
- Recognise the need for communication in your work role.
- Identify the importance of care planning.
- Be aware of the need for safety during travel at work.
- Be aware of ways of dealing with violence and aggression.

Fundamental standards.

The fundamental standards are the standards by which CQC will inspect social care. The standards are based on the regulations from the Health and Social Care Act and CQC have changed the focus for the purposes of inspection.

The fundamental standards are those standards that no care setting must fall below.

The standards are based on five areas as follows:

Safe.	People are protected from abuse and avoidable harm.
Effective.	People's care, treatment and support show quality of life and promote good outcomes, and providers should show evidence to prove it.
Caring.	Care should be person centred involving dignity and respect, and compassion.
Responsive.	Following correct working procedures as agreed by your workplace and as set out in the client's care plan.
Well led.	Management leadership and governance should ensure all of the above happens. Staff training should be recognised and openness and fairness be apparent.



The Home Carer's Manual

The fundamental standards are as follows:

- Person centred care.** Ensuring that those receiving the care are at the centre of all decisions.
- Dignity and respect.** Providing the client with dignity and respect in all aspects of their care.
- Need for consent.** Asking the client's permission before carrying out tasks that affect them.
- Safe care and treatment.** Following correct working procedures as agreed by your workplace and the client's care plan.
- Safeguarding service users from abuse.** Following agreed working and safeguarding procedures and being aware of signs and symptoms.
- Meeting nutritional needs.** Being aware of dietary needs, working with the care plan, ensuring clients have the right equipment and conditions to eat.
- Cleanliness, safety and suitability of premises and equipment.** Carrying out required checks of premises and equipment, implementing cleaning rotas and carrying out safety checks.
- Receiving and acting on complaints.** Having a complaints policy and procedure in place that is accessible to all and act in accordance with the policy when dealing with complaints.
- Good governance.** Ensuring that all aspects of the workplace is overseen and policies and procedures are implemented and monitored regularly.
- Staffing.** Fit and proper persons employed.
Fit and proper person requirement for Directors is followed.
- Duty of candour.** Relevant information must be volunteered to all persons who have or may have been harmed by the provision of services, whether or not the information has been requested and whether or not a complaint or a report about that provision has been made.

Our Redcrier manuals will provide your staff with training to support attainment of the fundamental standards.



The Home Carer's Manual

Introduction.

We are aware that there are many instances where working in an individual's home differs from working in a residential care environment. This manual covers some of these differences, however this is a general guide and it is important to be aware that every domiciliary care / home care service may operate slightly differently. Make sure you read, and follow, your own workplace policies and procedures at all times. Because lone working is often a big part of homecare services, it is a common thread throughout this manual.

What is lone working?

Lone working can be defined as working by yourself without close or direct supervision. This may occur, where someone is working outside normal working hours e.g. evenings, nights and weekends, when visiting someone in their own home, or collecting or delivering shopping / prescriptions etc. These are only a few examples. There will be many other areas where lone working will take place.

Lone workers are entitled to safe working conditions in the same way as everybody. Their employer should ensure that this happens. Employers should ensure that their insurance covers lone working. Throughout this manual we will identify issues you may encounter in your lone working environment, and look at ways that they can be managed to ensure your working environment remains safe.



Unit One

The role of the home care worker.

Home care, or domiciliary care as it is often called, is the help and support given to people who may be frail or have long term care needs. Home care usually involves personal care, or household tasks, and often takes place in the individual's own home enabling them to live as independently as possible in their own community.

The government identifies that this support should enable people to:

- Live as independently as possible.
- Have as much control over their lives as possible.
- Maintain as much dignity and respect as possible.
- Participate in society as an equal.
- Have the best possible quality of life.

The care worker aims to develop and promote the independence of the individual by encouraging them to do as much for themselves as possible; enabling them to be involved in social activities in their own community.

Home care can be provided to adults, young people, and children, and may be funded either by local authorities or privately.

Duties performed by home care workers may include:

Personal care such as bathing, dressing, feeding and toileting.

Household tasks e.g. laundry, preparing meals, cleaning, maintaining a healthy and safe environment and maintaining heating.

Other tasks may include shopping, collecting prescriptions and taking the client to appointments or social activities.

This is not an exhaustive list. There may be other tasks that you undertake in your role and you may carry out different tasks for different clients you visit. This is because each client has different needs and we aim to work in a person centred way with each one. This requires you to look at them as an individual and provide support in a way that meets their needs.

Before you are assigned a new client, they will have been visited by a member of the organisation you work for to assess what their needs are, what jobs will be done, and to carry out risk assessments on the environment and the tasks required.



The Home Carer's Manual

This information will be compiled in a document often called a Care Plan, and this will be the document you work from for that client. See unit 5 for more information on care plans. Each individual client will have their own care plan. A care plan is a confidential document and should only be shared with relevant people. You should make yourself familiar with your workplace confidentiality policy.

Identify your duties as a home care worker?

Legislation and responsibilities.

When we work within a care organisation, either working alone or with others, it is important that we are aware of not only our employer's responsibilities but also our own responsibilities to keep ourselves safe. The Social Care Act 2008 provides the framework within which all care providers, including home care, must work. There are several pieces of legislation that we need to be aware of wherever we work:

Health and Safety at Work Act 1974.

Employer's responsibilities.

The employer has a duty of care to ensure the health, safety and welfare of their employees whilst they are at work.

Employee's responsibilities.

They should take reasonable care for their own health and safety, and of other persons who may be affected by their acts or omissions at work.

They should co-operate with the employer, so far as is necessary, to enable the employer, or any other person, to comply with a duty or requirement imposed by health and safety law.



The Management of Health and Safety at work Regulations 1999.

Employer's responsibilities.

The regulations state that every employer shall make a suitable and sufficient assessment of:

- The risks to the health and safety of his employees to which they are exposed whilst they are at work.
- The risks to the health and safety of persons not in his employment, arising out of or in connection with the work, work procedures or systems.

First Aid Regulations 1981.

These regulations state that the employer must make adequate first aid provision for all employees. In the workplace this means providing sufficient first aid kits, first aiders and a means of reporting and recording accidents or incidents. For the lone worker this means providing a first aid kit, this may be a one person travel kit to keep in their car or bag. They also need forms for recording incidents, a person to report accidents / incidents to and emergency phone numbers easily accessible on a mobile phone, if phone access is not available in or close to their place of work. It is good practice for the worker to have completed an Emergency First Aid at Work (EFAW) course so they can deal with emergencies, if appropriate. Check your policies and procedures for your responsibilities in dealing with emergencies.

The Provision and Use of Work Equipment Regulations PUWER 1998.

These regulations cover the use of all equipment used at work from staplers to kettles, toasters and hoists. Your employer should risk assess any equipment you will be expected to use and provide necessary training where needed. Your employer should make sure the equipment has been regularly maintained and inspected as necessary. When you are working in an individual's home you will need to ensure you carry out regular checks on any equipment you use and report any faults or concerns as set out in your workplace policies and procedures.

Lifting Operations and Lifting Equipment Regulations LOLER 1998.

While all of your work equipment is covered by PUWER 1998, any lifting equipment is also covered by LOLER 1998 e.g. hoists, bath hoists, stair lifts and mini bus tailgates. Your employer should check that they are:

- Strong and stable for the job.
- Marked to indicate safe working load.
- Used safely.
- Examined and inspected by competent people.



You will need to regularly check any lifting equipment you are using and report any faults or concerns as per your workplace policies and procedures. It is good practice to check equipment before every use, particularly if the equipment was used by someone else before you.

Control of Substances Hazardous to Health COSHH 1999.

Your employer should risk assess any hazardous substances you may come into contact with and put control measures in place. This will show you how the substances should be used / dealt with, what personal protective equipment should be worn and how to deal with any spillages on surfaces or skin.

This information should be available to you to help you to keep yourself safe.

The following hazardous substances are the most likely you will come into contact with:

- Cleaning materials.
- Bodily fluids.
- Medications.
- Spilt fluids.
- Hot liquids.

If you are working in an individual's home your employer should agree with the client which cleaning chemicals can be used and you should be provided with appropriate Personal Protective Equipment. It is recognised that you may come into contact with many different chemicals such as washing powders and washing up liquids. If you are going into lots of different individual's homes it is your responsibility to make your employer aware if you have any allergies with certain substances so that your contact with them can be removed or reduced and suitable personal protective equipment (PPE) provided where necessary.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations RIDDOR (1995).

Your employer is responsible for reporting the following under RIDDOR 1995:

- Accidental deaths.
- Injury resulting in absence from work of over seven days.
- Member of the public being taken to hospital directly from the workplace (this could include a client). If the injury, or death, occurs in the injured person's home during the work activity, then the person in control of the work activity (e.g. your employer) is responsible for reporting it, so you must inform your line manager of any incidents in order that they can ensure it is recorded / reported as required.
- Any type of injury / dangerous occurrence or disease as specified by RIDDOR 1995.

For a full list of reportable incidents and details of how and when to report go to www.hse.gov.uk/riddor.



PPE (Personal Protective Equipment).

For your health and safety, your employer should provide PPE such as gloves, and aprons etc where needed. The responsibility is then on you to wear them as required. If they are provided and you choose not to use them and as a result your health or safety suffers, the responsibility is yours.

All of these pieces of legislation underpin your work and help your employer to put in place appropriate policies and procedures to keep you safe. It is therefore important to adhere to these policies and procedures to maintain your and others safety.

Why are policies and procedures important?

What PPE has your employer provided to you?

Unit Two

Professional boundaries.

It is never acceptable to take advantage of a person you are supporting. When the aim of your role is to get to know someone, build up trust and offer help and support, it is easy to see how boundaries can become blurred.

An example of this could be working in a client's home, particularly where you are working on a one to one basis. The client feels comfortable in their own surroundings and you have been a regular person in their life and in some cases may be the only person they see regularly. They may tell you things they wouldn't in a more formal work situation. They can easily come to rely on you as a friend as well as a carer. It is important that you remember that you are the professional and it is your responsibility to ensure the boundaries are in place and be aware when there is the potential for those boundaries to be crossed.

You should regularly ask yourself the following questions:

Is your relationship with the client focused on promoting their independence and well being?

Would you feel able to share all of your actions towards the client with your manager?

Has the client ever behaved in a way that suggests they may have misunderstood your professional relations?

Asking yourself questions such as these, and being honest about the answers, will help you to see if you are maintaining those boundaries and enable you to reinforce them if necessary. It is important that you are open about your actions as this will help your colleagues and / or manager to point out where those actions may be misunderstood. Sometimes it is difficult to see when you are in the situation yourself, but it may be very clear to somebody outside. You should not be afraid to ask for support or advice.

Why do we need professional boundaries?

The following examples show where boundaries have been crossed.

1. You and your client call each other friends and interact outside of the facility where you work.
2. Valuable gifts are exchanged between you and the client.
3. You reveal personal information that is not relevant to your client's case.
4. You find yourself discussing the client and his or her case during social interactions with your family and friends.
5. You are having discussions with the client about other care workers or staff members in your organisation.
6. You find yourself offering your client assistance with transportation outside of your role.

None of the above scenarios are part of your job role and so may change the nature of your relationship with your client. They may start to see you as a friend and expect more of you or become reliant on you. This will have an impact on them when you move on or are unable to continue to provide the service.

Consequences of crossed boundaries.

If you see your client as a friend or they see you as one, it may be harder to support them appropriately and separate your work role from the friendship.

You may find yourself discussing information about you, or your work, not relevant to the client or giving them your views or opinions when they are making decisions. This is not appropriate within your work role.

It may be harder to promote their independence when they are relying on you to be there for them.

How can we avoid crossing boundaries?

When you are first introduced to the client they should already have been told what your role is. You should reinforce this when you do the first visit to set the boundaries from the beginning. Stick to the tasks as identified in their careplan.

- Be friendly and cheerful, but stick to safe topics of conversation such as what the clients did the day before, the weather, what the client has watched on TV or what they have had to eat.
- Listen a lot and say little except when communication is required e.g. when working with the client.
- Stay focused on your role.

If you are asked to do something that is not included within your role, explain to the client it is not within your role. Feed it back to your workplace as identified in your policies and procedures so that it can be dealt with in the appropriate way.



Deborah is a care worker assigned to support an adult client who has long term health problems. In her role as a care worker she has become more involved with the client, discussing her own personal views and experiences. She asked the client if she could see them outside of work and gave them her own personal mobile number and email address. She has not told her manager. The relationship involves meeting at the clients home, going on outings, exchanging gifts and discussing common interests.

1. Why is this behaviour inappropriate?
2. Should Deborah inform her manager and why?
3. How could this behaviour affect the client?
4. How could this behaviour affect Deborah's judgement?

Supervision.

Your workplace should organise regular supervision sessions for you to discuss your work and any concerns you have. Use this time to explore and resolve any potential boundary issues before they cause trauma to either you and / or the client.

Unit Three

Risk assessments and how they support you.

The home care worker may have additional potential risks as they are on their own. The following potential risks should be noted:

- Being accosted by people on the street or on public transport during darkness.
- The need to park or walk in unlit streets or isolated areas.
- Theft.
- Accidents arising from equipment used with clients.
- Manual handling issues with no immediate help available.
- Slips, trips or hazards.
- Potential of challenging behaviour from clients, family or members of the public.

All of these potential risks, as well as the usual risks associated with working need to be addressed and are done so by carrying out risk assessments. Formal risk assessments are the responsibility of the employer and should not be left to the employee to do.

Looking at the areas identified in this worksheet, give two examples of possible concerns you might have for each one. Remember that your concerns may be different from those of a colleague in the same situation.

Working alone with a client in their home.

- 1.
- 2.

Travelling to work alone in the evening / night.

- 1.
- 2.

Working alone at weekends.

- 1.
- 2.

The Management of Health and Safety at Work Regulations state that your employer has a responsibility to risk assess your environment, and the activities you will be undertaking. This is

to ensure that where potential hazards, or risks, are identified appropriate measures can be put in place to reduce them. The employer is responsible for carrying out these risk assessments. Your responsibility is then to adhere to the measures put in place to ensure you are protecting your own safety and to highlight any additional risks and / or concerns, so that your employer can address them for you.

What your employer must do.

- Make a suitable and sufficient assessment of the risk to the health and safety of their staff, and others who may be affected.
- Identify any measures needed as far as is reasonably practicable.
- Review the assessment if there is reason to believe that it is no longer valid.
- Where there are five or more employees keep written records of the findings of the assessment and any groups of employees particularly at risk, e.g. home care workers who work on their own.
- Have arrangements for the effective planning, organisation, control, monitoring and review of the measures identified.
- Establish procedures to be followed in the event of serious and imminent danger.
- Provide health and safety information, instruction, and training for all employees.

The risk assessments should cover the following areas.

- Travelling to and from the home of the service user in isolated areas by car, public transport, or on foot; particularly at night.
- The working environment including outside the client's home.
- Control of hazardous substances.
- Dealing with violent incidents or challenging behaviour.
- Dealing with pets, pests and infestation.
- The handling of cash.
- Procedures for administering and assisting clients with their medication.
- Procedures for reporting and recording accidents, incidents, new risks, faulty equipment or other concerns.

Hazards you may encounter in your normal work routine.

- No one to answer your out of office hours queries.
- Being taken ill during work time.
- No time for rest periods.
- The risk of being accosted by people on the street in quiet areas, during darkness or on public transport.
- Potential violence from any source e.g. client, their relatives, members of the public, aggressive pets.
- Nowhere to park except in unlit or isolated areas.
- Chemical accidents whilst cleaning.



The Home Carer's Manual

- Accidents from equipment belonging to, or used with, the client.
- Car accidents or breakdowns.
- Hazardous driving conditions.
- Theft.
- Handling other peoples cash e.g. for their shopping or collecting pensions.
- Collecting medicines (including controlled drugs) from the chemist.
- Contact with infectious diseases.
- Lifting and handling issues.

Choose three of the hazards identified above and identify what you and your employer have done to minimise the risk.

<i>Hazard</i>	<i>Your employer</i>	<i>You</i>

Additional measures that can be put in place for lone workers.

Where you are working outside of office hours your employer should provide you with a named contact to call if you get into difficulties e.g. being unable to carry out your duties because of illness, being involved in an incident, or having queries you can't deal with.

Sufficient time should be built into your day to allow for rest periods and to take refreshments.

Many workplaces will have a system for checking in with someone at various times during the day to ensure you are safe. This may mean phoning the office, or your supervisor, at set times. Some organisations use a buddy system. You will be teamed up with somebody working in the same area and you then meet up with them at one or more set times during the day. These systems work well, ensuring your employer is aware of your movements and therefore your safety.

The Home Carer's Manual

You will probably have access to a mobile phone. This will help you to summon help if you feel threatened, or your car breaks down, and you are not near a landline.

You may be supplied with a personal attack alarm. They usually emit a loud noise drawing attention to the attacker.

ID cards.

ID cards are particularly important where work is undertaken with vulnerable people and where access to a clients home is required. Social workers, assisted living and support workers, nannies and childminders, tradesmen too, such as builders, electricians, plumbers and handymen often use identity cards. It is the first thing that most of us look for when someone knocks on our door or enters our workplace. ID cards help to improve security, they allow clients to easily identify you and your company providing reassurance that they are allowing access to their home to some one they know.

All of these devices, and systems, are useful tools and you may have one or more available to you.

All risk assessments and measures identified should be available to you, so you are aware of what has been put in place and can comply with them. Where required you should have access to training and regular supervision to review working arrangements.

What is your responsibility regarding risk assessments?

Unit Four

The importance of communication.

In all aspects of life communication is important. Whether it is talking to friends and family, tradesmen, work colleagues, customers or managers. Communication can be both verbal and non verbal.

Communication usually takes the form of speech, or is written. Non verbal communication can be facial expressions, eye contact, gestures, posture or tone of voice.

Training in communication improves the quality of social interaction between staff and clients, and can also lead to improvements in the client's quality of life and wellbeing.

Without communication we would find it difficult to:

- Listen effectively to someone talking about a sensitive topic or difficult experience.
- Break bad news as sensitively as possible.
- Communicate with a person who has communication difficulties, such as those arising from conditions like dementia, Parkinson's disease, or following a stroke.

It is especially important that staff working in a home care environment have good communication skills because a high proportion of people who need support have problems that can cause difficulty with communication.

Examples of poor communication include:

- Not greeting the person before carrying out care duties.
- Not obtaining the person's permission before starting care duties.
- Not involving the person in their care procedures, particularly during manoeuvres.

Understanding the other person's needs.

Communication can be done in many ways and it is important that we understand the needs and preferences of the person we are communicating with. Is there a language barrier that we need to address or is the person hard of hearing or sight impaired? It may be necessary to use signs and body language more or put more emphasis on tone of voice for the visually impaired. We adapt our language to different situations too. When talking to work colleagues we may use technical terms or abbreviations. However this may not be appropriate when talking to clients or family. If the client does not understand the language we are using then they may get the wrong message or become frustrated / upset.

To overcome barriers to communication we need to find out what the barrier is. We may know in advance if it is to do with language and / or culture. We can find out about different cultures on websites, or through local information services, supporting that culture. Be aware that cultures exist everywhere. Where language is the issue, we may be able to seek the help of an interpreter, or use signs, and pictures, to communicate. Remember not to use jargon (technical terms) or acronyms without explaining what they mean first unless you know the person will understand. An acronym is a series of letters representing a phrase as in 'TBC' = to be confirmed.

When giving messages, why do you need to be clear about the meaning of the message?

Confidentiality.

Confidentiality is the keeping of information received that cannot be discussed or sent to third parties without the consent of the person whom the information is about. It may be in the best interests of the person e.g. if they are at risk of harm. The information should then only be shared on a need to know basis.

If confidential information is shared with others it may cause harm to the owner of that information, or others connected with that information. This harm may take the form of mental anguish, financial loss, loss of liberty, or possible loss of life. It is therefore important that we maintain confidentiality in all of our conversations unless we have permission from the sender of the information to share it with others. We may, however, feel it is in the best interests of the sender to share it with others. We should make the sender aware of this before the start of the communication.

An example where confidentiality is important may be your access to key codes to get into buildings. Make sure you do not inadvertently let someone see the code or allow another person into an area when you are entering or leaving.

What to think about when communicating with a client.

- Be clear about the meaning of your message so that it is understood by the client.
- Keep it brief and to the point, make your point only once to avoid confusion.
- Make sure your audience has understood what you are saying, by checking body language or asking them.
- Think about the words you are using - will the client understand? Do technical terms need an explanation?
- Think about what you know about the client: e.g. do they have poor hearing and need non verbal prompts?
- Ensure that conversations do not become about you. Keep the focus on the client to maintain professional boundaries.

What is confidentiality?

Consider the following statements.

- I understand that some conversations require confidentiality and can identify them.
- I speak confidently and can make myself understood.
- I actively listen to what others have to say.
- I can summarise what people say and communicate it back to them.
- I can identify when non verbal communications are needed.
- I consider the needs of my audience before communicating.
- I speak clearly in one to one situations and people understand what I say.
- I speak clearly in group situations and people understand what I say.

The Home Carer's Manual

From the statements above choose three areas you would like to improve on and complete the table below.

<i>Area to improve</i>	<i>How I can improve</i>

Next time you are communicating with someone use your strengths, and practice improving on your weaknesses.

Unit Five

Care planning.

A care plan sets out the tasks an individual needs support with and how much support is needed including any equipment required. The care plan should be a working document that changes as the person's needs change. There is no standard template for a care plan as they can be used for different situations:

1. A person going into hospital may have a care plan to manage their stay in hospital.
2. A person with a disability may have a care plan to manage their disability.
3. A person who needs help with day to day tasks may have a care plan to support them getting up, or bathing, or eating.

What are the benefits of care planning to the client?

- Ensures that care is personalised to the individual person.
- People stay healthier for longer because their needs are being met.
- Helps to promote independence; identifies what the person can do for themselves as well as areas they need support with.

What are the benefits of a care plan to you the worker?

- Gives you information about the client and how best to communicate with them.
- Identifies the needs of the client.
- Identifies the tasks for you to carry out.
- Shows the procedures required to care for the client.

Care planning involves:

- **Gathering information** including the views of all concerned such as the client, family / carers, and any healthcare professionals.
- **Reviewing** the needs of the client.
- **Discussions** to decide what's important.
- **Planning** how the client's needs will be addressed, who will address them and when.
- **Risk assessments** - making care as safe as possible.
- **Needs** relating to race and culture, economic disadvantage, gender, age, religion / spirituality, disability or sexuality.

Where possible clients should be involved in writing, or even writing their own care plan with support. Anything put into the care plan is confidential and should only be shared with relevant people.



The Home Carer's Manual

When writing anything in a care plan you should think, am I writing fact? All records need to be factual as well as being clear and understandable. Facts normally list:

1. They are based outside of the mind.
2. Don't involve feelings.
3. Can be proved.

Opinions are usually based on feelings and cannot always be proved.

Why is it important to only write fact in a care plan?

Tips for writing the care plan. Imagine:

- If you were not there would another worker be able to identify what to do?
- Trying to work out what to do in an emergency if it's not in the care plan.
- Trying to follow another worker's care plan that is too broad to be of use to the client and other staff.

Any new tasks that you carry out must be:

- With the informed consent of the client.
- Clearly requested on the care plan.
- With the agreement of the care or support workers line manager.

Home care workers may be expected to help clients to get into and out of bed, into and out of the bath, give support when using the toilet or managing the stairs and generally moving around their home. A poor working environment, badly planned work methods and inadequate training increase the risk of injuries to workers when carrying out these tasks.

Before you commence work in a client's home, your manager should carry out risk assessments for the tasks you will be carrying out to ensure your safety. These will be documented in the care plan.



The Home Carer's Manual

Your role as care worker is to carry out the tasks identified, as well as to identify where the needs of the client have changed and are no longer being met by the plans / tasks in place. Any changes should be notified to your manager so that a review of services can take place. In most cases you will be involved in this review as you will understand how they affect the client, and what needs to change.

The daily log.

At the end of each of your visits you will probably need to complete a report of your visit, often called a daily log, but may have other names. This needs to be completed giving an account of your visit and the daily log forms part of the care plan. It will be looked at when reviewing the care the client is receiving. The account must be factual and give accurate information and should be completed before leaving the client's home.

What is a care plan?

Unit Six

Travel safety.

One of the big safety issues for home care workers is travelling between appointments. The most frequent modes of transport being on foot, by bus, or by car. These journeys are often taken early in the morning or in the evening. There are also other factors to take into consideration such as travelling to quiet rural areas and poorly illuminated streets.

Driving safety measures.

Your employer will need to know your car is roadworthy. They may need details of the MOT, road tax, service records, insurance documents and whether you have adequate breakdown cover.

You should:

- Regularly check the functionality of lights and indicators.
- Maintain fuel levels to avoid having to refuel after dark.
- Know where fuel stations are in the area you work.
- Regularly check water, oil and tyre pressures, and tyre tread levels and general tyre condition.
- Not encourage road rage by responding to aggressive behaviour.
- If you don't have access to a satellite navigation system you should at least have clear directions to get to your appointment and carry a map in the car.
- Ensure no valuables are left on show when leaving the car.
- Lock your car doors when driving between visits.
- Have your car keys ready before leaving your visit.
- Consider whether it would be safer to stop until the condition passes if you are driving in hazardous weather. Don't drive through thick snow, consider other forms of transport.
- When parking in car parks consider where the entrance and exit is and the pay machine then think about where you park.
- Always make your manager aware of any incidents or concerns you may have.

If you are involved in any accident or breakdown and are able to do so, call the emergency services and let your manager, or office, know so they can reschedule your visits. Stay in your car with doors locked if safe to do so unless the Highway Code recommends otherwise. Highway Code sections 274 to 287 will give you more information.

Walking.

- When walking, avoid wearing headphones or talking on your mobile phone. This may prevent you from hearing danger and makes you less alert to your surroundings.
- Walk towards oncoming traffic to avoid kerb crawlers.



The Home Carer's Manual

- When visiting new locations, pay attention to entrances and exits, only enter if the person you are going to see is there. If the door has to be locked make sure the key is accessible to you so you can get out. Check your organisation's policies and procedures to ensure that you know the correct procedure in this instance.

Public transport.

- Always be alert when travelling on public transport.
- Know the bus / train times, this will prevent you having to wait around for long periods of time.
- If possible catch the bus from somewhere well lit.
- Trust your instincts about who you sit near, if you feel uncomfortable then move.
- If someone attacks or touches you SHOUT. In many cases this will frighten them off.
- Keep your mobile phone out of sight.
- Don't display or talk about personal details.

Give an example of how you can keep safe on public transport.

Emergencies.

Your workplace procedures should tell you:

- How to call for help in an emergency.
- When to call for help.
- Who to call.
- How to contact them.
- Whether code words are used. Some workplaces use code words that you can use to let your employer / supervisor know you are in trouble without alerting your attacker etc.

Reporting accidents, incidents and near misses.

Always record any accidents, incidents or near misses including the date, where it happened, what happened, who was there, any injuries and how it was dealt with. Reports should be used to review current safety measures to see if they are still valid, or whether changes need to be made.

After accidents or incidents there should be opportunities in place to discuss what happened and help the worker to look at the circumstances objectively and identify measures that may help to prevent further similar incidents. The discussion may also include whether the worker would benefit from further training and how they feel about continuing to work alone. For some people rebuilding confidence is a slow process and during that time they may be more vulnerable.

What is your workplace policy for dealing with emergencies?

Why is it important to record accidents and incidents?

Unit Seven

Dealing with violence and aggression.

Violence at work is not something you expect to come across but we should all be equipped to deal with it if necessary.

When we are faced with violence or aggression, it is easy for us to either show fear which makes us more vulnerable or to become aggressive ourselves which can make the situation worse. Instead we should try to follow the three steps below:

- Remain calm.
- Build bridges.
- Take control.

To be able to communicate positively with someone, it is essential to appear calm. This will take the heat out of the situation if the other person is being aggressive. Just accept what is being said at this point and do not respond other than showing empathy with the aggressor.

How do we show calmness when in reality, we are feeling tense?

- Breathe steadily and relax tension in your muscles.
- Think about your verbal and particularly your non verbal communication.
- Keep your voice steady and calm, speak gently and slowly.
- Show that you are listening and attentive, use nods to signal you are listening.
- Make eye contact regularly, but not constantly as this may appear threatening.
- Position yourself slightly to the side, to avoid eyeball to eyeball contact and on the same level, so you are not looking down on them.
- Remember that folded arms, hands on hips and waving fingers or arms can be seen as aggressive or defensive.
- Give the person space, don't crowd them.

While you are showing this calmness, encourage them to talk and explain why they are angry by giving them prompts both verbal and non verbal. Use open questions to encourage them to talk. This will help to get their frustration out of their system. Make sure you listen to them as the information may be useful. Make sure they know you are listening by nodding or showing empathy. Be aware of their concerns. Let them talk until they feel you have heard what they are saying. While this is going on make sure you watch them for any changes. The changes you may see are:

- Lowering of voice to normal.
- Relaxing of facial muscles.
- Steady breathing.

- Change in language used.
- Postural changes (more relaxed stance).

All of these changes show that the aggressor is becoming calmer and more approachable. Remember to resist arguing, especially if you are the centre of the aggression. Now they are calmer you can begin to communicate on a positive level.

- Explain to them what you have understood as being the problem and seek confirmation e.g. ask: *"I believe you are angry because..... Is that correct?"*
- Clarify what they require. Encourage them to sit down and explain further.
- Show you understand their feelings and ask any questions, explaining why you need to ask them. Encourage them to relate to you letting them know you want to find a solution.

Working towards a solution.

If the issue can be broken down into smaller issues, this will make it easier to identify what needs to be done. Look at each issue and decide which can be resolved quickly and easily. Set targets for when they need to be done, and by whom. If you can resolve something quickly, and easily, this will show progress and create a positive atmosphere. If some issues take longer set target dates for when they will be resolved, and agree them with the aggressor.

Remember:

- You must have your say too. Be clear, concise and remain calm.
- Admit failings if appropriate and put forward suggestions to put them right.
- Avoid using jargon, be clear.
- Where it is not possible to do what they are asking, offer alternatives.
- Where you need time to discuss it with others, give a timescale for getting back to them.

This technique will not work with everyone or in every situation. Sometimes the aggressive person is beyond control. They may be:

- Unwell.
- Drunk.
- Under the influence of drugs.

If you become the focus of the other person's anger, or you feel yourself becoming angry, distance yourself immediately. It is not enough to expect your employer to do all of the work in keeping you safe. You must take some responsibility for your own safety and well being at work.

What can you do to help keep yourself safe?

Keep your distance from the other person and always keep your escape route open. Do not allow yourself to become cornered, or boxed into a situation. Don't stand directly in front of them (always stand to one side) and avoid using any sudden movements.

Avoid trying to carry out tasks which will require you to use your hands. Ability to perform these tasks is adversely affected by "threat pressure" and failure to accomplish them may be interpreted as a sign of weakness by the other individual.

Don't put your hands in your pockets or fold your arms or cross your legs in a way which might restrict their immediate use.

Don't look away at any time, even for a fraction of a second. Most attacks are launched when the victim isn't looking. Remaining alert and focused on the threat at all times can really help to prevent an attack from starting.

If you have any concerns about the aggressor, leave the building and call for help. Try not to show fear, or anxiety. Remember that they are natural emotions and are the body's way of triggering a response: the fight or flight response. The response is triggered by a rush of the adrenalin hormone. Use this as a warning and react to the situation positively to keep yourself safe.

Prioritise your 'emotional security'.

We are all different but we all share a basic need to feel safe and secure in order to stay healthy and well. The extent to which we feel the need to be secure varies between individuals as does what makes us feel safe and unsafe.

Some people cope better than others in certain kinds of situations. Some people get alarmed quicker and some worry more than others.

You will know whether or not you are the kind of person who stays unaffected by verbal abuse and calm and composed in threatening situations. Maybe you positively welcome and thrive on the responsibility of handling them. If you are not, you will need to focus on fulfilling "your need to feel safe." The enjoyment of your job, the quality of your work performance, and ultimately your health, will suffer if you don't feel safe.

Feeling upset and worry caused by violence and stress at work can lead to unhappiness at work and at home. It can put a real strain on family and friendships, so be aware of your stress and worry levels.



The Home Carer's Manual

Be aware of any behaviour changes in the person you are visiting.

Distance yourself from any angry or aggressive person. Do not meet aggression with aggression as it may escalate out of control. Instead try to diffuse the situation. If you feel uncomfortable, remove yourself from the situation e.g. make an excuse to get paperwork or equipment from the car. When you are free to do so phone your office / manager for advice.

If it is decided you are not going back into the client follow your policies and procedures for dealing with this situation. This may involve phoning the client and telling them you have been called back to the office and someone will call them shortly. Check your policies and procedures for the correct way to deal with it in your workplace.

Give two examples of how we can appear calm even though we may be feeling tense.

Give two examples that show the aggressor is becoming calmer.

The Home Carer's Manual

Give two examples of how you can keep yourself safe when under threat.

Unit Eight

What do we mean by Information Governance?

In your role as a care worker it is important that you have access to relevant information about the clients you are working with, usually in their care plan. It is important that the information is kept confidential and is stored securely when not in use so that it is only accessible to those who need to know. How this happens and is monitored, along with all other sensitive information in your workplace, is called Information Governance.

Explain how information is kept securely but is still accessible in your workplace.

In the Health and Social Care Act 2012, CQC were given legal responsibilities to monitor and improve the Information Governance of registered care providers. Currently this is monitored through KLOES (Key Lines of Enquiry) These are also used to monitor all other aspects of your workplace during a CQC inspection.

KLOES are Key Lines of Enquiry. They set out a series of questions used to identify good practice and where there are areas for improvement. The KLOES are set out under five key headings:

- Safe.
- Effective.
- Caring.
- Responsive.
- Well led.

Information Governance is covered under each of these headings as follows:

Safe.

Looks at keeping people safe through the use of effective and reliable systems and procedures. This includes care plans, which should be accurate and up to date, reporting of incidents and gaining consent before providing care.

Effective.

This covers communication and sharing of information between teams involved with the client and how this is monitored.

Caring.

Includes protecting clients confidentiality when delivering care. For instance not discussing the care of one client while delivering care to another or leaving the care plan notes so that they are accessible to anyone.

Responsive to people's needs.

Covers sharing clients information appropriately to ensure continuity of care.

Well led.

This covers how information is stored and used within your workplace and how this is monitored to ensure improvements are made.

Explain, in your own words, why Information Governance is important.

Your role in Information Governance.

Everybody in the workplace has a role to play in ensuring information is created used and stored appropriately.

CQC have identified 3 principles to guide Information Governance.

Availability.

Data must be available when and where it is needed. It must be made accessible swiftly and securely for staff as well as within and between organisations.

Integrity.

The data must be valid and trustworthy, relevant, up to date, and protected from loss, damage, and unauthorised alteration.

Confidentiality.

Personal identifiable data must be handled and used safely.

We will use these three principles to identify your role:

Availability.

For you to carry out your role in providing care and support to your clients, you will require information about their needs and wishes. This may include likes / dislikes, dietary information, special equipment and / or procedures, medication etc. This type of information is usually part of the Care Plan. All of this is personal and / or sensitive information. Your workplace will need to make it available to you and your role will be to ensure you handle it and return it as per your workplace procedures. In some workplaces you may have access to it on a smart phone or tablet with passwords and encryption, in others it may be a paper document stored in a locked cabinet.

Integrity.

All data that is used and stored must be kept up to date and be accurate. Everybody who uses the information has responsibility for ensuring that this happens. Even if you are not yet responsible for writing in the Care Plan, you must inform the relevant person if you have concerns about the accuracy or have noticed changes to the client that are not recorded. Inaccurate information could result in mistakes. You must follow your work place procedures for making changes to any documentation.

Confidentiality.

Data must be used appropriately and only shared with relevant people. Consent must be obtained before sharing data and you must remember the limitations of your job role when using data. It is important to remember that everybody has a right to confidentiality. Discussing clients or their information outside of work could result in disciplinary action.

Conclusion.

The role of the home care worker can be very rewarding. You are making a positive difference to the quality of life of those who are less able to achieve it themselves. It is a professional role, that enables you to develop a range of skills and experiences that can be used in a variety of jobs. Many of these skills, such as being able to communicate on different levels, understanding a person as an individual and dealing with conflicts, can also be used in other areas of your life. This manual has hopefully given you a foundation to build on. It will support you in meeting some of the criteria of the Care Certificate and enable you to support your clients in a person centred way.

We have a number of other manuals that can support you in developing your role as identified below:

- Basic Emergency Aid.
- Care Certificate.
- Care Planning.
- Communication.
- Dementia Awareness.
- Dignity and Respect.
- Equality, Diversity and Inclusion.
- Fire Safety and Awareness.
- Food Hygiene and Safety.
- Health and Safety.
- Infection Control.
- Learning Disability Awareness.
- Mental Capacity Act 2005 - DoLS Awareness.
- Person Centered Approaches.
- Record Keeping.
- Safe Handling of Medicines.
- Safeguarding Adults.

Other manuals are available. Please see our website for more / new publications.

