



Health & Social Care Diploma Level 3 Units 13-16

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Unit 13: Move and Position Individuals in Accordance with Their Care Plan (K/616/4159)

Assisting and moving people legally and appropriately

Part of your role as a care worker is to give people as much support as necessary to get up in the morning, maintain personal cleanliness, use the toilet and move from room to room, or outside the building as they want to. Many of the people you support may be able to do this without physical help; others may require varying amounts of assistance.

Legislation and good practice guidelines exist to protect both you and the people you support from the risks associated with manual handling manoeuvres. This is important for you because carer workers are at greater risk of injury than most other workers (www.hse.gov.uk/statistics); and it is important for the people you support who may experience physical and psychological harm if handling practices are poor.

The welfare and rights of people with care needs are protected by the Care Quality Commission. In their guidance for meeting the requirements of the Health & Social Care Act 2012 (Regulated Activities) regulations 2014 the CQC state the following:

Care and treatment must be provided in a safe way for service users..... the things which a registered person must do to comply include:

- Assessing the risks to the health and safety of service users of receiving the care and treatment
- Doing all that is reasonably practicable to mitigate any such risks
- Ensuring that persons providing care or treatment to service users have the qualifications, competence, skills and experience to do so safely
- Ensuring that the equipment used by the service provider is safe for such use and is used in a safe way (regulation 12) (CQC, 2012)

To meet these requirements, we must carry out appropriate risk assessments of manual handling operations. We also need to put in place control measures to reduce risk, keep up to date with current guidance for safe practice and know how to work in a person-centred way that complies with legislation including:

Although there will always be times when individuals require assistance to move or need to be moved by hoist or other mechanical aids, it is vital that you support clients to maintain their physical independence for as long as possible.

When care workers are required to assist or move clients they are carrying out 'manual handling operations' as defined by the Manual Handling Operations Regulations 2002 (MHOR).

According to the regulations 'manual handling operations' mean any transporting or supporting of a load (including the lifting, putting down, pushing, pulling, carrying or moving thereof) by hand or by bodily force. ('load' includes any person or any animal) www.legislation.gov.uk

Write down an example of when you might do each of the following while assisting or moving someone:

- Lift:
- Put down:
- Push:
- Pull:
- Carry:

By referring to people as 'loads' the terms of the regulations can have a dehumanising effect. Treating people as inanimate objects is of course unacceptable and could amount to emotional and physical abuse.

Manual Handling Operations Regulations 2002

MHOR apply to all hazardous manual handling operations; manoeuvres may be hazardous for various reasons including size, weight or nature of load to be moved; number of times that the operation must be carried out; environment within which the load is to be moved. (Almost all assisting and moving of people will be hazardous).

To meet the requirements of the regulations employers have 3 main duties:

1. Avoid – if the task doesn't have to be done it shouldn't be; if it can be mechanised this should be done.
2. Assess – carry out a formal risk assessment of any hazardous task (see unit 3)
3. Reduce- use the findings of risk assessments to plan safe systems of work and introduce control measures

In addition they must also communicate important safety information to staff and take into account the varying physical capabilities of different employees.

When you carry out handling tasks you should first of all follow the same 3 step process as your employer – avoid, assess, reduce – and then, if the task is necessary and within your capabilities, follow your employer's safe system of work.

The Effects of Poor Manual Handling

Although we tend to focus on back injuries as the likely result of poor manual handling we can of course do harm to almost any part of our body if we don't take care. For example:

- Toes and fingers can be crushed
- Joints may be dislocated
- Bones get broken
- Skin bruises and tears
- Ligaments can be overstretched

Injuries may be caused by one off events such as trying to catch a falling person, or they may develop over time as a result of poor posture or bad practice. Employers' risk assessments must identify hazards associated with long term damage as well as those which make accidents more likely.

Poor manual handling of any kind can result in accidents and occupational illnesses with acute, chronic or even terminal results. The effects of poor posture, bad practice and accidents can last days, months or even years and the costs to individuals, employers and society as a whole are high.

Potential effects on people being supported

As we have seen people who need assistance to move are vulnerable to both physical and psychological harm; this may include:

- cuts / bruises from rough handling
- joint injuries from drag lifts
- loss of abilities if care staff assist too much
- pressure sores if they are not moved often enough
- broken limbs if they fall or are dropped
- fear of being handled if they have previously been treated roughly
- loss of self-esteem if they have been treated without dignity or respect
- embarrassment if they feel exposed or their privacy is not respected
- loss of self-worth / sense of self if they are treated as objects not people.

Manual handling tasks carry a significant risk of injury for all involved if they are not adequately controlled. You have a duty to make sure that you protect yourself and others from harm and take steps to look after your body to keep it fit and healthy.

The Spine

Your spine performs vital functions; it:

- Supports your body
- Allows you to perform a range of movements including the ability to use your hands while standing upright
- Protects your spinal cord

Support – your spine balances the weight of your head and enables you to stand and walk on two legs; the way it is built out of several small bones stacked in a column allows it to be strong but flexible. The lumbar region of your back (shown below) supports most weight and is, therefore, particularly vulnerable to injury.

At birth your spine was 'c' shaped; it was your development from turning and lifting your head through crawling to walking that gave your spine its present form. Most people's spines develop

natural curves in a relaxed 's' shape; your back is at its strongest when it is held in this natural position without twists, bends or tension.

Movement – Your spine is made up of 33 separate bony vertebrae which are connected by muscles and ligaments and separated by fluid filled discs. This structure enables you to bend down, reach up, lift loads, twist, turn and do a thousand other manoeuvres that you probably take completely for granted. (Unless you suffer from chronic back pain!)

The discs between each of your moveable vertebrae act as shock absorbers preventing the bones from rubbing together and reducing the impact when you walk, run or jump. So called 'slipped discs' occur when they become worn or torn and are no longer able to cushion or protect.

Protection – Running through your vertebrae is your spinal cord, this is the route your brain uses to communicate with the rest of your body. The cord is made of nerve cells which relay instructions to all parts of your body and carry sensory information back to the brain.

These nerves are vulnerable to damage and need the hard shell that the spine provides. Harm caused to the spinal cord can have life altering affects and may even be fatal.

Back Problems

Back problems are so common that 80% of us will experience back pain at some time in our lives however, your back is probably less vulnerable to injury than you think as serious problems are relatively rare. Most back pain is caused by damage to muscles and soft tissues which will recover in time.

Historically the treatment for back pain was bed rest; modern scientific research has overturned attitudes and it is now known that the majority of people would do best to try and carry on as normally as possible; using painkillers when necessary, doing moderate exercise and avoiding heavy lifting.

Protecting Yourself

Your back, like the rest of your body, will work best if it is treated well, exercised and given the right nutrients. The following are all things you can do to look after yours:

- Eat a balanced diet
- Lose weight if necessary to reduce the strain on your back and your joints
- Exercise regularly and safely (swimming and walking are good)
- Take regular breaks from whatever you do so that you are not stuck in the same position for hours
- Use a supportive mattress

Some back problems are disabling, others become so because they are not dealt with effectively; any more than 2 days bed rest will significantly increase recovery time. Muscles will be weakened through lack of use when they need to be being strengthened, and without regular stretching and movement joints become stiff and sore.

Write 300 words on manoeuvres that you do in your day to day position and how you can hurt yourself & clients

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Informal Risk Assessments

When you are about to carry out a task you must do an informal risk assessment to ensure that you do it as safely as possible. Unlike your employers' assessment yours probably won't need to be recorded and will not follow the same five step format.

Before you start you must make sure that you are aware of your employer's agreed way of carrying out the task in hand. That is the safe system of work that your employer has developed from their risk assessment; this should tell you whether more than one person will be required, if equipment will be necessary and so on.

Remember your legal duties under the Manual Handling Operations Regulations 2002 are 'Avoid, Assess, Reduce', so your first question when faced with the task of moving something is, 'is this necessary?' If, for example, someone could move without assistance if provided with guidance and aids (handrails, walking frames) then you wouldn't need to physically help them. It may also be possible to find a less hazardous way of doing a task;

When you assess manual handling, tasks use the word TILE(E) to help you to remember the factors you need to consider.

Task

- Does it have to be done frequently?
- Does it involve twisting or stopping?
- Does it involve handling at arm's length?

Individual (you)

- Am I capable, competent and confident that I can do this?
- Do I have the training and experience to do it safely?
- How am I feeling today, am I fully fit?
- Am I dressed appropriately (comfortable clothing, not too loose or too tight; sensible shoes)

Load (inanimate)

- How big is it?
- Is it easy to hold?
- How heavy?
- Does it have sharp edges?
- Is it unstable?

Load (person)

- Check individuals care plan
- What are their capabilities?
- Can they cooperate / understand directions etc?
- Are they weight bearing / mobile?
- What's their state of health generally?
- How are they feeling right now?
- Can they consent to what I am asking them to do?
- Do they have walking aids? Do they know how to use them?

If you believe the person's physical capabilities or mental capacity have changed ask your manager for advice before assisting them or moving them. You may cause serious injury if they are less able to participate in the manoeuvre than 'normal'; if they were injured and you had not voiced your concerns you could be prosecuted.

Environment

- Is there space?
- What's the flooring like?
- Have I got to go through doors / up stairs? How difficult will this be?
- Are there bits of furniture in the way?
- Will there be people about?

- Is the lighting adequate?

Equipment

It may seem like this is too much to think about when you might be doing manual handling tasks throughout the day. However, it's likely that you already do most of this you just don't do it as a conscious process. We risk assess almost constantly to keep ourselves safe doing everyday things like crossing roads and driving. Once you have been taught the green cross code, or passed your driving test, you assess without having to go through things step by step (I stand at the kerb and observe the traffic; mirror, signal manoeuvre.). The truth is though that if you were really not thinking you would significantly increase your risk of causing an accident as you would step out or pull out without due care and attention.

When you approach a task, you must focus on what you are doing; forget about what you're going to have for dinner or what you've got to do next and concentrate. Look at what's in front of you and use TILE(E) to make sure that you consider all potential hazards; if you do the same things every day it's easy to become complacent and you may miss an unexpected hazard which will make your usual working methods unsafe.

Preparing the Environment

Your assessment of the environment may have identified potential hazards. In order for you to work safely these must be removed or controlled before you do anything. When you are assisting someone to move issues such as changes in floor level and distance between leaning places can cause problems. Plan your route carefully to suit the person's needs and capabilities and make sure that you communicate clearly with them before and during the manoeuvre.

Ideally rooms will be kept clear of small pieces of furniture and loose rugs but, if the person you support likes to have these around, you may need to clear space to move or take a route around the obstructions.

The Principles of Efficient Movement

To work efficiently your body needs to be relaxed and comfortable and you should move in a way that generates maximum power from minimum effort. If something doesn't feel right it probably isn't; if you find manoeuvres awkward think carefully about how you are moving and whether you are following the principles. To carry out handling tasks in the safest way possible you need to know how the human body works best. Unlike the old technique based approach, the principles of efficient movement allow a far more human and flexible response to handling tasks.

The principles of efficient movement may also be applied to the people, you support helping to increase their independence when possible and to reduce their chance of injury when they are being assisted.

Creating a Dynamic, Stable Base

A stable base is essential to reduce your risk of falling, and, if you want to move freely your base also needs to be 'dynamic'. Stability can be created by placing your feet about hip distance apart with one foot slightly in front of the other. Pointing your foot in the direction of movement will allow your muscles to work most effectively.

You should move smoothly without jerking and allow your body weight to assist motion reducing the amount of physical effort involved.

When you move your body your centre of gravity shifts, and you become unstable; you then move your feet to regain balance and restabilise yourself; if you move your centre of gravity outside the base made by your feet you will need to put a great deal of effort into remaining upright.

If you need to be off balance during a manoeuvre limit the amount of time you spend in this position and the amount of weight you are supporting at the time.

Knees and Hips

Any tension in your body increases your risk of injury; your body is safest when it is relaxed and comfortable. Flexing your hips and knees will allow you to move in a natural way without putting stress or tension on your joints and muscles.

Flexing or softening your knees and hips will allow you to reach down to move or lift things up without being unbalanced. Squatting or kneeling put pressure on your joints and can be difficult and uncomfortable to hold; if these positions cannot be avoided do not try to move heavy loads or to spend longer than a few seconds like this.

Spine

All backs are different but they aren't usually straight; most people's spines form a kind of lazy 's' shape when they adopt a good posture. When carrying out tasks you should try to maintain the natural curves of your spine to reduce its vulnerability to harm.

Most people will have experienced aches and pains when doing things like ironing or driving for long periods of time. This is because we tend to adopt an unnaturally 'top heavy' position with rounded shoulders; this causes discomfort and significantly increases our risk of injury.

One of the most dangerous things you can do is to attempt to lift something while bending and twisting – this puts a great deal of pressure on your vulnerable lower back and should always be avoided.

Head and chin

Your head and chin should be comfortably balanced in a way which allows you to maintain your spine's natural curves.

Arms and hands

Arms are levers and they need to be kept as close to your sides as possible to reduce strain; you will find it difficult to carry loads at arm's length for more than a short time. If you have to stretch to move something try and limit the amount of time you are in this position and avoid trying to move heavy weights like this.

Hands should be relaxed and open if possible, making a fist increases tension in your hands and arms. Do not grip things if you don't need to; palm contact can be safe and effective and also reduces your likelihood of causing harm if you are assisting a client.

Breathing

Through effective breathing techniques you can control and strengthen your body and help it to relax. Of course, we don't have to think about breathing, it happens automatically but, we might actually

benefit from an increased oxygen supply. The more physical effort you need to put in, the more oxygen your body will want. Taking good deep breaths when you are doing strenuous work will be good for you.

A deep breath in before a lift or move can also help to protect you as it adds support to your abdominal muscles and the front of your spine.

Teamwork

When carrying out manual handling manoeuvres good teamwork helps to promote safety and client wellbeing; clear communication is vital to ensure that everybody works together in a controlled manner.

One person should take the role of leader to reduce the likelihood of confusion and to effectively control the move. Whoever is leading the manoeuvre should take responsibility for the following:

1. Finding out what the person would like to do (e.g. go to the dining room); how this will be achieved (i.e. how much help will be needed, will equipment be involved) and what their role will be.
2. Getting the individuals consent if possible- if they lack the capacity to do this their behaviour should be observed to decide whether they want to move or not and, if a decision is made to do so, they must be monitored throughout for signs of distress, pain or resistance
3. Explaining fully what is going to happen and the role of each person- the manoeuvre should then be broken down into stages and carried out a bit at a time to allow everyone to keep up
4. Controlling the manoeuvre ensuring that everyone moves together by using an instruction similar to ready, steady, move. (1,2,3 causes problems as some people go on 3 and some after)
5. Making sure everyone is comfortable and prepared before carrying out the next part of the manoeuvre

Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)

All work equipment is covered by PUWER; equipment designed for lifting will also be covered by LOLER.

To comply with LOLER employers must:

- Choose equipment that is strong and stable enough for its intended purpose
- Provide employees with adequate training, information, instruction and supervision to use equipment safely
- Maintain equipment in safe working order
- Ensure that equipment meets appropriate British and European standards (often indicated by CE mark)
- Ensure equipment is marked with its safe working load
- Check equipment daily and keep it properly maintained
- Have it checked by a competent individual every 6 months
- Put in place safe working procedures for employees to follow

As an employee you must only use equipment when you are confident and competent to do so. You must follow safe procedures and carry out assessments before you use it to ensure that it is safe to do so. Equipment should be visually checked before you use it and you must report any faults you find.

You must not use equipment if you notice any signs of damage or if you are unsure whether its checks and maintenance have been kept up to date.

To meet your legal requirements and, more importantly to maintain safety **always**

check the following prior to using equipment:

- It is CE marked if necessary
- Labels are clearly readable
- LOLER checks are up to date where necessary
- There are no tears, signs of fraying or missing parts
- Batteries are charged
- All parts work e.g. hoist wheels
- The equipment is right for the person – check the care plan
- You know what you are doing and you work with a colleague when necessary
- You are not exceeding the safe working load of the equipment

Applying Safe Practices

Before assisting or moving anyone remember – if they can move independently encourage them to do so. If they can't carry out a risk assessment (TILE(E); obtain the person's consent and apply the principles of efficient movement to both yourself and the person you are assisting to reduce risk of harm.

Take time to prepare before you do anything – make the area safe, have we got the equipment we need? Have we checked the care plan?

Walking with Assistance

You should position yourself to the side of the person and slightly behind them to allow them to set the pace and lead. Place the palm of your nearest hand on their lower back and encourage them to rest their forearm in your free hand (do not grip it).

Your role in this manoeuvre is to give the person a feeling of security and to help them maintain balance; they should not be putting any weight on you and you should not be supporting them in this way if there is a high risk they will fall.

People must be encouraged to use any walking aids they have, if they are unsure how to use them make sure that they get appropriate instruction. If they are using a stick stand on the opposite side, if they have a frame stand behind them and slightly to one side so that you can see where you are going.

Like any other equipment, visually check sticks, frames etc. for signs of wear and tear and report any problems.

Chair to Standing

Check that the person is wearing appropriate footwear correctly and that their feet are slightly apart and firmly planted on the floor (stable base); check for hazards around the chair and ensure that the person understands what they are about to do.

Ask the person to move their bottom to the front of the chair or assist them to do this

– it is very difficult to stand from a normal seated position.

Position yourself on one side of the person's chair with a colleague on the opposite side if necessary; place the open palm of your nearest hand(s) in a comfortable position on the person's lower back. If the chair has armrests ask them to place their hands on them ready to push up, alternatively allow the client to rest their forearm(s) in your free hand(s). If the person's is using the armrests place the open palm of your free hand(s) in front of their shoulders.

Use the instruction ready, steady, stand to direct the manoeuvre; on 'stand' the person should push up and forward while you (and your colleague) support and stabilise but do not lift or carry. You (and colleague) will take a small step forward as the person moves to standing; you should end up with the person standing steadily and you (and colleague) standing to the side and slightly behind them. You should be positioned to assist walking once the person feels ready.

Giving Assistance in Bed

If you are repositioning people in bed or helping them to get up you should work with a colleague to maintain safety. The bed should be adjusted to a comfortable and safe working height but if this is not possible your employer's risk assessment must have identified this.

Manoeuvres can be made easier by the use of slide sheets which reduce friction and allow for smooth movement with minimal effort. The person should have their own sheets and you should check them prior to use, look for frayed stitching, tears or worn labels and ensure that the sheets are clean and dry.

Some slide sheets are tubular, others come as two separate flat sheets; whichever you use ensure that you position them in a way which is comfortable for the person and that they are long enough to reach from the top of the person's head to their heels. If they are too short you will need two sets otherwise the exposed areas of the person's body which are in contact with the bed will be at risk of friction burns.

Moving someone up or down their bed using a slide sheet

Place slide sheets under the person immediately prior to moving them and carefully remove them as soon as you have finished.

Position yourself at one side of the bed with your colleague on the other; you should stand by the person's waist to work safely. To move the person's up the bed you should both take hold of the edge of the top sheet by the client's hips and shoulders. Ask them to tuck their arms in or cross them over their body.

Flex your knees and balance your weight over the knee nearest the bottom of the bed; point your other foot towards the top of the bed. Using the instruction ready, steady, slide move your weight

from one knee to the other while firmly pulling the slide sheet until the person reaches the desired position. Do not lift. Gently remove slide sheets upwards so that you do not pull the person back down. Use pillows to make them comfortable.

Using a slide sheet to turn someone

Position yourself and the slide sheets as above so you are facing your colleague across the bed. Encourage the person to look towards your colleague, get them to reach across with their arm and cross their nearest leg over the other.

Hold the edge of the top sheet level with the person's hips and shoulders, on the instruction ready, steady, turn pull the sheet firmly up and towards you. The person will roll and your colleague will steady them and prevent them falling from the bed. When they are in the correct position gently remove the sheets.

Falls

Many people are injured every year attempting to catch people who are falling. You need to know what your employer's policy is regarding falling person so that you know whether to **always** allow people to fall or whether you can use any of the methods suggested below.

When a client is falling, and you are not within reach, guidelines state you must let them fall. (RCN guidelines 2005)

When they are falling, and you are near but not assisting them, to walk you should allow them to fall but you may move obstructions or protect their head to reduce the chance of injury.

If you are assisting someone to walk and they start to fall you may use the lowering methods shown below assuming that:

1. When they start to fall you are behind and slightly to one side
2. They are falling backward or directly downward.
3. There are no obstructions or dangerous objects.
4. The person is not much larger than you and they are not resisting
5. you have been trained to use these techniques

Caring for a person who has fallen

- a. Carry out a risk assessment and assess for injury
- b. If emergency services are required call 999
- c. If it is not an emergency give appropriate first aid and keep the person warm and comfortable until they are ready to get up
- d. Encourage the person to get up by themselves introducing supports such as footstools, chairs to help
- e. If the person cannot get themselves up use suitable equipment e.g. a hoist

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Unit 14: Support Individuals with Specific Communication Needs (A/616/4179)

Communication and Support

We all need to communicate, be it with family, friends or in a job. It is how we form and build relationships which is what we need to do in order to develop and engage in all parts of society. However, although the majority find this an easy and natural thing to do, for others like those with ASD it can be challenging. Having effective communication requires listening as well as talking. Being polite, considerate and clear about what you are talking about. In order to interact in conversation with someone with ASD you need to change the way you communicate with them, i.e. what and how you say it, as well as your expectations in the answers they provide. Being aware of the difficulties individuals have with communication such as; they may not automatically pay attention to you when you start speaking, they may struggle to process what is being said, they struggle with open ended questions, If they don't understand they won't necessarily ask for help, they take things literally, they react badly when I say no, they may hit out if they don't want to do what is being asked.

When communicating with an individual the following tips can be helpful in ensuring that the communication is constructive and understood on both sides.

- Make communication as simple as possible.
- Speak slowly and clearly, although not too slow to be condescending.
- Be patient for a response.
- Don't rush them, be gentle and encouraging.
- Don't force them to look at you when they or you speak.
- Encourage them to speak about things they want to and show an interest.
- Allow time for them to think about things.
- Look out for and be aware of non-verbal signs.

Non-verbal communication

The problems which those on the Autistic Spectrum have with communication means they have difficulty initiating conversation, replying to people's conversation or interacting with others to be

sociable. This can mean that people without ASD struggle to communicate and interact with them. This can sometimes lead people to have a negative opinion towards Autistic people. A common trait with Individuals on the spectrum is that they can have a poor use of language or sometimes a lack of speech altogether, therefore other means of communication need to be introduced.

It can sometimes seem that the individual doesn't hear what you say to them, won't respond or seems uninterested to attempts to communicate with them.

They can use others way to communicate which can include:

Gestures/Crying/looking at the object they want/guiding your hand to the object they want/reaching/looking or staring at the object they want/using images/expressing challenging behaviour/repeating other people's words and sentences (echolalia)

Enabling communication

Whilst it may be tempting to try and do all the communication for somebody with ASD, i.e. it may be quicker, it is less stressful for them and more helpful for the person receiving the information, this is often not the best plan. By doing all the communication the individual starts to rely on somebody else to 'do the talking' for them, what really needs to happen is that they strengthen their skills in conventional communication in order that they become as effective as possible at communicating, this will then give them wider access to social, academic and other opportunities within life.

By supporting communication, it encourages the individual's confidence in doing so autonomously.

There are several ideas which can support communication:

Let them lead – rather than you directing activities let them take the lead. This will improve their attention and promote independence in the early stages – If the individual has only just started to talk then use single words when starting to communicate and use repetition to increase recognition.

Allow time for Communication – Don't jump in and do everything for the individual, this reduces opportunities for communication. Consider their abilities and how much they are able to do before offering help.

If possible, allow them time to do things themselves.

- Let them see your face – this allows them to see the variety of facial that can be used in communication. Always be mindful however that reading your facial expressions at the same time as verbal communication can be too overwhelming for some which could set off negative behaviours.
- Imitation – whilst some advocate imitation and a means to encourage communication it can also set of negative behaviours through confusion.
- Gestures and visual prompts – these can help the individual relate words to activities e.g. when you smile, say the word or when you say “ shut the door” actually do it.
- Other types of visual supports can be photographs, pictures or cue cards.
- Music and role play - some people feel more confident and are more able to communicate when then sing. Think of the many cases which have made headlines of people with stutters

losing them when they sing, this can have a similar effect for some people with communication difficulties. Role play is good way to template social interaction including when it can go wrong.

- Feedback – It is always important to give praise for attempts to understand and communicate, this provides encouragement to do so again.
- Encourage communication – Try and design opportunities for communication and interaction to take place this could involve a whole range of things, it could be putting a plate of their favourite biscuits out of their reach so they have to ask for or maybe asking a question which would require a sentence answer e.g “ what would you like to do now?”
- Encourage interaction – look for opportunities to join in activities with the individual, e.g find matching pieces in a puzzle for them. By doing so they learn that interaction with somebody else can be enjoyable.

☒ **General good practice:**

Staff working with individuals with ASD should have skills in maintaining and encouraging communication. They should encourage and “create opportunities for interaction, engagement and involvement and spend time with people for no purpose other than interaction and engagement”*. By doing so this will help them gain confidence and independence and maximise relations and interaction.

It is also good practice to encourage individuals to make their own decisions which will help them feel more in control of their own lives *CQC Brief Guide BG007: Good communication standards for people with a learning disability or autism v2

☒ **Improving communication for individuals**

In order to improve communication for individuals the first step is to establish the individual’s capabilities, what they can and cannot do. By working and observing the individual it allows you to not only understand their abilities but also what their learning style is in order to establish what types of communication and support they will need. Just because two individuals have been diagnosed with the same type of autism, it doesn’t mean that the same support method will be effective for them both. Each one will have their own individual challenges, whilst one may understand what they see better than what they hear the other may not, so it is important communication support is established on a 1:1 basis.

Dependent on the individual’s challenges a variety of alternative communications could be used which could include signing, gestures, use of symbols, written communication and Voice Output Communication Aids (VOCAs) which can come in several forms, primarily either supporting speaking (augmentative) or to replace speaking (alternative).

Communication In Dementia:

Definition 1 in its reference to ‘frequency and duration’ identifies that some behaviours become challenging if they are repeated or persistent; Emerson also says that the harm done may be social; the person may be further excluded from ‘normal’ life by barriers to accessing ‘ordinary community facilities’. Definition 2, which is solely concerned with the field of dementia care, highlights that challenging behaviour may be a means of communication.

Types of Challenging Behaviour

There are many different types of behaviour that meet the requirements of the definitions above to be recognised as challenging, they include:

- Hitting, kicking, pinching, biting and other physically aggressive acts
- Shouting, swearing and verbal insults or aggression
- Wandering (another controversial term to be discussed later)
- Repetitive questioning
- Inappropriate sexual expression
- Self harming
- Hoarding
- Non-compliance with care
- Urinating in inappropriate places
- Smearing faeces

This is by no means an exhaustive list but it demonstrates the variety of behaviours that may be described as challenging. Some of these such as hitting are obviously physically harmful; others have less obvious negative effects. Someone without experience of dementia might wonder why repetitive questioning was potentially harmful while a man whose wife asked him the same thing hundreds of times a day might recognise how much this increased his likelihood of shouting at her and his need for time away from her.

Difficulty communicating

Memory loss, impaired language skills, sensory impairments and loss of physical abilities can all affect people's ability to communicate. This can lead to misunderstandings when speech is misheard or misinterpreted or frustration when the person cannot get their needs or feelings across.

There is a great deal of fear associated with a diagnosis of dementia; it's vital that you have a positive outlook and believe that good care can lead to improved outcomes. People with dementia can experience good quality of life and can be happy and fulfilled.

There is a common misconception that people with dementia have in some way ceased to be themselves; certain common symptoms challenge our understanding of personhood:

- Communication difficulties – if they are unable to make their feelings known it can be hard for people around to empathise or to understand what their experience of dementia might be
- Difficulty understanding – the person with dementia may find it hard to follow normal conversation or to interpret events which occur around them; this can cause them to act in ways which seem inappropriate, to withdraw into themselves or to experience anxiety
- Memory loss – chronic memory loss can mean that the person fails to recognise their loved ones, is unable to recall recent events and can no longer carry out simple tasks because they can't remember how to do them. These problems and the fact that the person may to some degree regress to a time in the past that they can remember can lead us to compare caring for a person with dementia with caring for a child. This identification of „childlike“ qualities in the person with dementia can be dangerous as it prevents us from seeing them as the adults they are and treating them with the respect they deserve

Use the space below to write down some barriers to communication
e.g. people use different languages

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Communication and Support

Barriers to communication cause misunderstandings and frustration; we have all experienced problems at one time or another, dementia makes communication more challenging because of the way it can affect people’s physical and mental abilities.

Processing information – people with dementia may have difficulty understanding information or keeping up with conversation. Memory loss and reduced mental speed can mean that they are unable to take in more than one idea or instruction at a time. If people speak quickly or give several instructions at once this can lead to confusion and frustration.

The person talking may become annoyed that they are not receiving appropriate responses, while the person with dementia becomes increasingly confused and irritated that the person speaking to them is not giving them a chance to understand and respond.

Forgetting words – chronic forgetfulness is common to all types of dementia; all of us forget words sometimes, for people with dementia the loss is permanent, and it becomes increasingly difficult to pass on information, express emotion or ask for things.

If simple words are forgotten people need to find other ways of saying what they want; they may use long winded descriptions or become more reliant on gestures and other non-verbal forms of communication.

Sensory problems – don’t forget that people with dementia may also be affected by other physical problems which make communication more difficult, including sight and hearing difficulties. It’s important to make sure that Children or Young People have regular medical check-

Write 500 words on how you deal with communication with different clients and how you change your communication techniques.

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Unit 15: Cleaning, Decontamination and Waste Management (D/616/4059)

The Importance of Hygiene and Safety

Poor standards of hygiene and safety can put anyone at risk; when you are providing

meals for people who may be at increased danger from infection it is particularly important to take extra care.

If your standards of cleanliness are poor, and food and drink are not stored and handled appropriately, the following factors can increase people's likelihood of becoming seriously ill (the effects of food poisoning can also be fatal):

- Extreme youth
- Old age
- Pregnancy
- Existing illness / infection
- Physical frailty

Your clients (and potentially you) are also placed at increased risk of food poisoning by communal living arrangements; mass catering and sharing of facilities make the spread of infection more likely.

If working practices and kitchen areas are unsafe both staff and clients may be placed at risk of accidental injury. Common hazards include boiling liquids, slippery floors, hot equipment, knives and cleaning chemicals. Accidents involving any of these could lead to serious injury, time off work, investigation and possibly legal action.

Bacteria

Some interesting facts

- Bacteria are not visible to the naked eye. This means that you can be surrounded

by thousands of them without being aware of their presence.

- 90% of germs on hands are found under the nails
- You have between 2 and 10 million bacteria between your fingertips and your elbow
- There could be as many germs under a wedding ring as there are people in Europe
- Oxygen is not a necessity for bacterial growth, some types (anaerobes) can breed well without it.
- It would take about a million bacteria clustered together to form a spot the size of a full stop
- Your body contains more bacterial cells than human ones

Bacteria are tiny living organisms; although we commonly refer to them as 'germs' and associate them with dirt, illness and rotting food they are a vital element of life on earth. Bacteria perform many functions which are necessary for our health and the health of the world around us.

Bacterial Growth

Bacteria breed by dividing into two; this means that in the right conditions they can generate large numbers very quickly. They have four requirements for reproduction:

Warmth – bacteria breed best at around 37°C but can breed successfully anywhere between 5°C and 63°C; this temperature range is known as the danger zone

Food – bacteria are not particularly choosy but they are happiest with high protein, moist foods such as meat, fish and dairy products. Soups, stews and stocks can form a particularly good breeding ground

Moisture – like all living organisms bacteria require water to thrive, they can exist without it but they do so in a dormant form and are unable to do anything until they come into contact with water again

Time – given the right conditions bacteria divide every 20 minutes so 1 bacterium becomes over 2 million in 7 hours (bacteria do die so they do not carry on doubling unchecked forever)

Other Types of Contamination Viruses and Moulds

Viruses and moulds are from the same family as bacteria, but they have significant differences. Viruses are smaller and need to be in living tissue to survive so they are commonly transferred on hands contaminated with faecal matter. Moulds are larger and may be clearly visible on food.

Many people dismiss moulds as unattractive but harmless, but like bacteria there are 'good' and 'bad' types. Penicillin is developed from mould and the veins in blue cheeses are edible forms; however, moulds are also believed to cause lung cancers as well as serious food poisoning outbreaks.

Cross Contamination

Cross contamination is the process by which bacteria, viruses and moulds are spread. In unit 2 we looked at ways of limiting the ability of bacteria to multiply; good food hygiene depends on doing this whilst also preventing the spread of contaminants between foods and from people, pets etc. There are two types of cross contamination, direct and indirect.

Direct cross contamination – this occurs when two foods are touching, or one food drips on another. If raw foods are stored above cooked foods the risks of cross contamination are high and bacteria may get the chance to breed on foods which are ready for serving to clients.

Indirect cross contamination – this describes the transfer of bacteria between foods by means of a vehicle; most commonly a pair of hands but it could be a knife, chopping board, tea towel, pet or clothing, in fact anything that can touch one food and then come into contact with another.

Hand Washing

The most important thing you can do to prevent cross contamination is to wash your hands. This should be done using the technique below at the following times:

- When starting work
- After using the toilet
- After blowing your nose
- After handling raw food
- Before handling cooked foods
- After touching your hair, nose, spots etc
- After having a break
- After smoking a cigarette
- After washing up
- After handling rubbish
- Before serving food
- Before providing assistance in the dining room

Personal Hygiene

Maintaining good cleanliness is an important way of reducing the risks of cross contamination.

To make it easier to keep your hands clean your nails should be kept short and, if you prepare food, they should be unpainted as varnish chippings can contaminate food. You should not wear jewellery, with the exception of a wedding ring, as it harbours bacteria and you may not notice if an earring or gemstone fell into food.

When you are ill you have a legal duty to inform your manager if you don't you may be fined under the provisions of the Food Safety Act 1990.

You must wear suitable clothing to work with food that will reduce the likelihood of cross infection. Your employer may provide protective clothing and equipment to protect the food from you and you from the food.

The following are possible solutions:

- Overalls
- Aprons
- Hats and hairnets
- Non-slip shoes
- Disposable gloves
- Rubber gloves

Hygienic Working Areas

An important part of your work role is to help maintain the hygiene and safety of all areas where foods are stored, prepared or eaten. To do this you must know your responsibilities and good practice for cleaning, pest control and waste disposal.

Cleaning

All equipment, work surfaces, floors, cupboards, walls, crockery, cutlery and appliances must be cleaned appropriately, regularly and thoroughly. To ensure that this is done these rules should be followed:

- Work areas, equipment and tools should be made of easily washable materials
- Layout, design and installation should allow access to all areas
- The kitchen / storeroom layout should be planned to keep processes involving raw and cooked foods separate
- There should be a cleaning rota in place (see below)
- You should get used to cleaning things as soon as you have finished using them

Cleaning Rotas

In your workplace there should be a person who has overall responsibility for the kitchen and other food areas. This person will probably be a senior member of staff and will carry out risk assessments and develop policies and procedures for safe and hygienic catering.

This responsible person should have created a comprehensive cleaning rota that will ensure that the risks associated with dirt and spillages are kept to a minimum.

Effective Cleaning

The way you clean utensils, equipment, work surfaces and the materials you use should ensure that dirt and grease are removed, and bacteria are reduced. This may require different cleaning products to be used; detergents such as soap deal with grease while disinfectants (including hot water) kill bacteria.

Cloths, mops etc. may be colour coded for use in different places and will ideally be disposable so that dirt and bacteria end up in the bin.

There are five main steps to cleaning:

1. Remove loose dirt – scrape plates, sweep floors, brush work surfaces
2. De grease and wash with detergent and cloth
3. Rinse
4. Disinfect (Rinse if its chemical disinfectant)
5. Dry

