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| ACTIVITY 1.1 PROFILE | | | | | |
| Name: | Caitlin Summers | | | | |
| Needs: | Has difficulties with daily living activities like: dressing, grooming household chores, and cooking meals. | | Strengths and Preferences: | | Reading and Swimming |
| Goals: | Short-term- Use assistive technologies  Long -term- Reduce hand fatigue | | Timeframe to Achieve Goals: | | Short-term- 1-3 months  Long-term- 9-12 months |
| INDIVIDUALISED PLAN | | | | | |
| ADL/ALD | | Support Service | | Resources Needed | Required Personnel Assistance |
| Dressing | | Assistance with ADL’s | | Button hooks | Support worker |
| Grooming | | Occupational therapy | | Utensil holders | Support worker |
| Household chores | | Medication | | Zipper pulls | Supprt worker |
| Cooking Meals | | Assist in usage and maintenance of assistive technologies | | Guides on using assistive technologies | Support worker |

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| ☐TRUE ☐FALSE | i. Support services are often so limited that individuals go to extraordinary lengths to be eligible to receive support. This process often leaves them feeling demeaned and humiliated. |
| ☐TRUE ☐FALSE | ii. In Australia, people with impairment have a legislated right to access aids, equipment and technology for daily living. |
| ☐TRUE ☐FALSE | iii. Many Australians with impairment want to live independently in their communities and are able to access the support they need to do so. |
| ☐ TRUE  ☐ FALSE | iv. There are still widespread misconceptions and stereotypes about disability and ageing that influences the attitudes of employers and recruiters. |
| ☐ TRUE  ☐ FALSE | v. For many people with impairment, the built environment acts as a powerful barrier to their social inclusion. Their inability to access the facilities in their communities limits their independence. |

ACTIVITY 1.2

ACTIVITY 2.1

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| Role Play Checklist (For traineer’s use only) | | | |
| During the role play activity: | | Yes | No |
| 1. The learner gathers the necessary materials for the bed bath (e.g. toiletries, towels, wash basin, waterproof sheet, etc.) | | Y | N |
| 2. The learner checks that the doors are closed, and curtains/blinds are drawn to preserve the person’s privacy during the bed bath. | | Y | N |
| 3. The learner preps the space, materials, and personnel for the bed bath (e.g. placing the waterproof sheet beneath the person, checking if another person is required for the bed bath, sanitising their hands, etc.) | | Y | N |
| 4. The learner covers the person with a towel or sheet to maintain their privacy. | | Y | N |
| 5. The learner verbally encourages the person to wash as much as they can by themselves. | | Y | N |
| 6. The learner washes the person’s body parts one at a time with a washcloth. | | Y | N |
| 7. The learner pats each washed body part dry with a towel as they go. | | Y | N |
| 8. The learner rolls the person onto their side to wash and dry the back surfaces of their body. | | Y | N |
| 9. The learner washes the private areas of the person last. | Y | | N |
| Trainer’s overall feedback on the learner’s performance during the role play activity:  Overall, the learner performed ech step of the task with great care for the individual (Matthew), and followed all the necessary steps. She communicated well with the individual and was very active in fulfilling her role. | | | |

ACTIVITY 2.2

MATCHING TYPE  
  
Listed below are the breadth of assistive technology used for carer support

a. Fall Detectors

b. Passive Infra-red Detectors

c. Panic Buttons

d. Personal Alarms

e. Smart Plugs

Match each to their description below, by writing the letter that corresponds to your answer in the space provided.

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| Description | |
| Personal Alarm | i. Devices a person can press when they need assistance. These can contact their carer or a response centre. |
| Passive Infrared Detectors | ii. Devices that monitor activity at the home of a person. They can tell their carer whether the person is active, where they are, and if someone has entered the home. |
| Fall Detectors | iii. Sensors that alert a carer if their client has taken a fall. The carer or a response centre may be notified as soon as the fall happens. |
| Smart Plug | iv. Devices used to monitor the use of household appliances and send an alert to a carer. |
| Panic button | v. Alarm buttons that are used in an event of a break-in or if someone threatening approaches the home of a person. |

Activity 2.3

**Fill in the blanks**

The following are statements about the rights of medication. Review each and complete the statement by filling in the missing words/phrases.

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| i. Check that you are assisting the right person. If you assist the wrong person in taking pre-packaged medication, they may receive the wrong dosage of medication as it may not be measured according to their weight. |
| ii. Check for information on when and how often the client must take the medication must be taken by the client. The timing of medication should be clearly written in the written direction of the client’s health professional. |
| iii. Check the information on the right route. Medication needs to be taken through a specific route. If medication was taken through the wrong route, it can be toxic or have harmful effects on the client. |
| iv. Check if you have the right dosage. Dosage will vary according to the client’s age, size, and health condition . Usually, pre-packaged medications are already measured according to the written direction. Nevertheless, you must make sure that the dosage is correct before the client takes it. |
| v. Some medications may be packaged or named similarly. There are also cases wherein the medication is no longer appropriate. That is why you must check the label of the medication . |

ACTIVITY 3.1

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| **HAZARD LOG** | | |
| Kind of Hazard  (Hazard Identification) | Priority level  (Risk Assesment) | Action Taken  (Risk Control Method) |
| Fire Hazard due to a broken smoke detector and Joshua's habit of lighting and sometimes forgetting to extinguish scented candles. | High – Immediate action required. The combination of a broken smoke detector and unattended candles significantly increases the risk of fire, posing a serious threat to Joshua's safety. | The broken smoke detector was reported to the supervisor. Replacement of the smoke detector was scheduled during the next home visit. Temporary guidance was provided to Joshua to avoid lighting candles until the smoke detector is fixed. Additional safety check was arranged to ensure if the new detector is functioning properly post-installation. |

ACITICITY 3.2

TRUE OR FALSE

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| --- | --- |
| ☐ TRUE  ☐FALSE | i. Referrals are made when a client challenges your ability to provide them with the support they need. This means asking other workers to handle their care delivery for a specific purpose. |
| ☐TRUE  ☐FALSE | ii. Your responsibility as a care worker is to use either warm or cold referrals to other staff and support services. |
| ☐ TRUE  ☐FALSE | iii. You must document and report the referrals you make. This means documenting whether the client completed the referral or not and the reason behind the action. |
| ☐ TRUE  ☐FALSE | iv. As with seeking provision of service from other workers, it would be much better to refer the person to other support services. This lessens the risk of endangering their wellbeing. |
| ☐ TRUE  ☐FALSE | v. The procedures for referrals must comply with organisational policies and procedures for documentation and reporting. |

ACITIVITY 4.1

Identify and describe the requirements that can be found in an organisation’s policies and procedures for reporting.

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| i. Mandatory Reporting: Care workers are mandated to report any situation whereby they suspect somebody is being harmed, or is indeed at risk of being harmed. Care workers in charge of running their service include nurses, home care aides, social workers, and support workers, and their main role is to report any suspicion of abuse. This constitutes neglect, in cases when the person is not properly cared for, and either experiencing domestic violence when one is physically damaged, like hitting, or hurt, or threatened of doing so, and also in terms of psychological or emotional damage when one's feelings and mental health are put into serious impairments. Critical situations that must also be reported involve sexual harm, which may be in the form of abuse or exploitation; financial abuse, described as taking or misusing someone's money or property; and abandonment which refers to a situation that leaves an individual alone and without enough care. In situations like this, care workers, as they can identify and report risks, will protect their clients effectively and assure them of the help and suitable support that they require. There needs to be a care worker who, feeling that someone is at risk, must report—that is, tell the proper authorities or the right agencies—what is happening and thereby make an assessment, check whether immediate help is needed. They have to provide an opinion as to whether there is harm that is current or whether the person is currently suffering from any harm. The term authorities means the police, child protection services, or specialized agencies that handle abuse cases. Every state and territory in Australia developed its own reporting guidelines and agencies. This means a care worker may take different procedures just depending on where it is. Mandatory reporting means that vulnerable people are safe from abuse and receive prompt help. |
| ii. Organizational Chart: In a workplace, who reports to whom is depicted by the organizational chart. It presents your role and indicates clearly who actually supervises you. Charts for every organization are different, so preference has to take the rule through which task is to be carried out in the workplace. These rules usually state the information regarding your job, whom to report, and how to do this with your supervisors.  You will mostly be responsible to one team leader as a care worker. It becomes your role to pass on any of your observations regarding your clients. Your team leader is basically there to support you and to ensure that you are coping. For example, if a client tells you that they cannot do something because of their religion, you should tell your supervisor. You will also need to report anything such as changes in a client's care plan, or if they now are in need of financial support for services, to your supervisor. In addition to that, you will need to send documentation home to your supervisor before making some decisions such as sending a client in need of care to a social worker for extra service.  Written follow-ups of concerns through your organization's rules will keep everyone in the know, so to speak, for proper care and attention to your clients. |

Acitivity 4.2

Matching Type  
Listed below are kinds of documents and reports.

a. Communication Chart

b. One-Page Profile

c. Progress Notes

d. Mandatory Report

e. Workplace Checklists

Match each to their description below, by writing the letter that corresponds to your answer in the space provided.

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| DESCRIPTION | |
| One-Page Profile | i. This contains vital information about the client on a single sheet of paper to be quickly shared by others. |
| Progress Notes | ii. These act as proof of service delivery and constitute a legal record. |
| Communication Chart | iii. This is used to understand how a client converse with others. |
| Workplace Checklists | iv. These are mostly based on observations. In this document, you will find conditions that must be met or tasks that must be done. |
| Workplace Reports | v. This is an example of a workplace report for suspicions or verified incidents of abuse. |