

SECTOR: HEALTHCARE

HSS102-NQ 2013: Role of Patient Care Assistant

NVEQF Level 1 (CLASS IX)

STUDENT WORKBOOK



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Preface

The National Curriculum Framework, 2005, recommends that children's life at school must be linked to their life outside the school. This principle makes a departure from the legacy of bookish learning which continues to shape our system and causes a gap between the school, home, community and the workplace.

The student workbook on "**Role of Patient Care Assistant**" is a part of the qualification package developed for the implementation of National Vocational Education Qualification Framework (NVEQF), an initiative of Ministry of Human Resource Development (MHRD), Government of India to set common principles and guidelines for a nationally recognized qualification system covering Schools, Vocational Education and Training Institutions, Technical Education Institutions, Colleges and Universities. It is envisaged that the NVEQF will promote transparency of qualifications, cross-sectoral learning, student-centred learning and facilitate learner's mobility between different qualifications, thus encouraging lifelong learning.

This student workbook, which forms a part of vocational qualification package for student's who have passed Class VIII or equivalent examination, was created by a group of experts. The Healthcare Sector Skill Council (HSSC) approved by the National Skill Development Corporation (NSDC) for the healthcare sector developed the National Occupation Standards (NOS). The National Occupation Standards are a set of competency standards and guidelines endorsed by the representatives of Healthcare Industry for recognizing and assessing skills and knowledge needed to perform effectively in the workplace.

The Pandit Sunderlal Sharma Central Institute of Vocational Education (PSSCIVE), a constituent of National Council of Educational Research and Training (NCERT) in association with Healthcare Sector Skill Council (HSSC) has developed modular curricula and learning materials (Units) for the vocational qualification package in Healthcare sector for NVEQ levels 1 to 4; level 1 is equivalent to Class IX. Based on NOS, occupation related core competencies (knowledge, skills, and abilities) were identified for development of curricula and learning modules (Units).

This student workbook attempts to discourage rote learning and to bring about necessary flexibility in offering of courses, necessary for breaking the sharp boundaries between different subject areas. The workbook attempts to enhance these endeavours by giving higher priority and space to opportunities for contemplation and wondering, discussion in small groups and activities requiring hands-on-experience. We hope these measures will take us significantly further in the direction of a child-centred system of education outlined in the National Policy of Education (1986).

The success of this effort depends on the steps that school Principals and Teachers will take to encourage children to reflect their own learning and to pursue imaginative and on-the-job activities and questions. Participation of learners in skill development exercises and inculcation of values and creativity is possible if we involve children as participants in learning, and not as receiver of information. These aims imply considerable change in school routines and mode of functioning. Flexibility in the daily time-table would be a necessity to maintain the rigour in implementing the activities and the required number of teaching days will have to be increased for teaching and training.

ABOUT THE WORKBOOK

This workbook is to assist you with completing the Unit of Competency **HSS102-NQ2013: Role of Patient Care Assistant**. You should work through the workbook in the classroom, at the workplace or in your own time under the guidance and supervision of your teacher or trainer. This workbook contains sessions which will help you to acquire relevant knowledge and skills (soft and hard) on various aspects of the unit of competency. Each session is small enough to be easily tackled and digested by you before you move on to the next session. Animated pictures and photographs have been included to bring about visual appeal and to make the text lively and interactive for you. You can also try to create your own illustrations using your imagination or taking the help of your teacher. Let us now see what the sections in the sessions have for you.

Section 1: Introduction

This section introduces you to the topic of the Unit. It also tells you what you will learn through the various sessions covered in the Unit.

Section 2: Relevant Knowledge

This section provides you with the relevant information on the topic(s) covered in the session. The knowledge developed through this section will enable you to perform certain activities. You should read through the information to develop an understanding on the various aspects of the topic before you complete the exercise(s).

Section 3: Exercise

Each session has exercises, which you should complete on time. You will perform the activities in the classroom, at home or at the workplace. The activities included in this section will help you to develop necessary knowledge, skills and attitude that you need for becoming competent in performing the tasks at workplace. The activities should be done under the supervision of your teacher or trainer who will guide you in completing the tasks and also provide feedback to you for improving your performance. To achieve this, prepare a timetable in consultation with your teacher or trainer and strictly adhere to the stipulated norms or standards. Do not hesitate to ask your teacher or trainer to explain anything that you do not understand.

Section 4: Assessment

The review questions included in this section will help you to check your progress. You must be able to answer all the questions before you proceed to the next session.

SESSION 1: IDENTIFY ROLE OF PATIENT CARE ASSISTANT

Relevant Knowledge

Patient Care Assistants (PCA) provides nursing and technical care to patients under the supervision of nurses in a hospital or nursing care facility. Patient Care Assistants might spend more time with patients than other healthcare providers in a hospital. PCAs must be empathetic and have good communication and nursing skills to care for patients in a hospital.

Essential Duties and Responsibilities

The essential duties of a PCA include the following:

1. Assists professional healthcare staff with performing physical examinations and patient procedures, which may include measuring and recording vital signs and measurement of input and output.

- a) Patient data, such as vital signs and measurement of intake and output are taken and recorded according to the policy and procedure of the Hospital.
- b) Changes and abnormal findings in patient's data are communicated to the registered nurse and other members of the healthcare team in a timely manner.
- c) Patient is assisted with personal hygiene.
- d) Patient is given assistance with ADLs (Activities of Daily Living), exercise and ambulation as directed by therapists and other members of the healthcare team.
- e) Personal care and patient related services are provided in the patient's home as needed per guidelines set forth by the Home Health Agency.

2. Maintains patient safety

- a) Patient's environment including but not limited to the patient's room, exam room or treatment area is kept neat and clean.
- b) Meal preparation and light housekeeping duties may be necessary in the home setting to maintain a safe environment.
- c) Equipment maintenance and safety checks are completed according to policy and procedure.
- d) Incidents are reported promptly to appropriate parties using the Health System's quality reporting process.

3. Performs administrative support functions

- a) Medical record duties, including file maintenance and recordkeeping, are completed when necessary.
- b) Supply inventory and ordering are completed according to guidelines.
- c) Duties, including scheduling diagnostic procedures, meeting and greeting patients, or delivering specific supplies and pharmaceuticals are performed efficiently.

4. Maintains necessary skills and competencies

- a) Competency in the use of new equipment (i.e., lifting and moving patients) is achieved and maintained.
- b) Strengths and opportunities for professional development are identified and goals for self-improvement are set and documented appropriately.
- c) Identified goals for professional development are met through a variety of educational fora.
- d) The education and development of others is fostered by sharing information learned through individual professional development.
- e) A positive environment conducive to professional development of coworkers is demonstrated on an ongoing basis, including but not limited to teaching, orienting, role modeling and team participation.
- f) Annual mandatory training activities and regulatory in-service hours requirements are completed within established time frames.

Organizational Duties

1. Communicates appropriately using good interpersonal skills

- a) Positive, professional demeanor is projected through verbal and non-verbal communication.
- b) Information for patients and staff is delivered in a manner that is supportive, timely and understandable.
- c) Interpersonal conflicts are resolved using appropriate methods and organizational resources, including but not limited to Employee Relations Services and Faculty Employee Assistance Program.
- d) Diverse perspectives are acknowledged; language and behaviors are modeled that build inclusiveness in the work environment.
- e) Ideas and suggestions are clearly communicated.
- f) Clarification of communication is requested when appropriate.

2. Serves, manages and supports internal and external customers

- a) Privacy is maintained at all times for patient and employee information.

- b) Actions are initiated to meet or exceed customer/co-workers expectations in delivering service by implementing the “I Make the Difference” philosophy (ownership begins with me; greet customers by making eye contact and smiling; provide positive, professional and prompt responses, e.g., helping visitors find their way; close every interaction with “Is there anything else I can do for you?”).
- c) Appropriate resources throughout the organization are used consistently to meet customer needs.
- d) Relationships with staff in other work areas are fostered to meet internal and external customer needs.
- e) Positive working relationships with peers, management and customers are maintained at all times.
- f) Organizational mission and values of respect, integrity, stewardship and excellence are evident in behaviours.

3. Participates in performance improvement activities

- a) Participation in performance improvement activities and initiatives is on-going.
- b) Initiative is demonstrated to proactively diagnose and resolve problems.
- c) Change is met with positive and supportive behaviour.

4. Participates as a team member and is accountable for own work responsibilities

- a) Time off is scheduled to avoid disrupting workflow.
- b) Help is offered to others to solve problems and complete tasks to facilitate communication and positive team dynamics.
- c) Productive work habits are consistently displayed.
- d) Accountability for actions and decisions is demonstrated in daily work.
- e) Feedback is solicited and accepted in a positive manner.
- f) Constructive input is offered to support the work unit.

Exercise

Presentations by student about the role of Patient Care Assistant.

Assessment

Short Answer Questions.

- a) What is the role of Patient Care Assistant?

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Describe the role of Patient Care Assistant.

Part B

Discussed in class the following:

- (a) What are the role and responsibility of Patient Care Assistant?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Relate the abilities and strengths of self with the job role of Patient Care Assistant		
Enlist various job roles of Patient Care Assistant		

SESSION 2 : IDENTIFY VARIOUS ACTIVITY OF PATIENTS DAILY CARE

Relevant Knowledge

Activities of Daily Living (ADLs) is a term used in healthcare to refer to daily self-care activities within an individual's place of residence, in outdoor environments, or both. Health professionals routinely refer to the ability or inability to perform ADLs as a measurement of the functional status of a person, particularly in regards to people with disabilities and the elderly. Younger children often require help from adults to perform ADLs, as they have not yet developed the skills necessary to perform them independently.

ADLs are defined as "the things we normally do such as feeding ourselves, bathing, dressing, grooming, work, homemaking, and leisure". While basic categories of ADLs have been suggested, what specifically constitutes a particular ADL in a particular environment for a particular person may vary.

Patient Care Assistance Daily activity in the hospital

Patients need help with various activities because they may not remember or they may not be in that position to do them, they may have movement disorders and poor coordination and they may have lost interest in doing things, or may not understand why something needs to be done. They may not be able to understand instructions when someone tries to help them.

- Bathing and showering (washing the body)
- Bowel and bladder management (recognizing the need to relieve oneself)
- Dressing
- Eating (including chewing and swallowing)
- Feeding (setting up food and bringing it to the mouth)
- Functional mobility (moving from one place to another while performing activities)
- Personal device care
- Personal hygiene and grooming (including washing hair)
- Toilet hygiene (completing the act of relieving oneself)

Daily Care Plan of Patients according to their Needs

To a patient, every task could be a source of stress if it seems beyond their ability. On an average day, therefore, is a series of stressful tasks, and it is no wonder they get frustrated and tired.

One very helpful way of reducing their stress is establishing a regular routine for the day—doing the same things at the same time every day. This routine can be fine-tuned to ensure that the patient seems comfortable with it. Necessary tasks are all fitted into this routine so that the patient's day is regular and predictable, and the patient can get used to it. They need less effort to get through the day as they sort

of know what to expect. They get a greater sense of comfort, and also feel more in control of their lives. The daily routine should only be disrupted if it is very necessary.

In addition to a daily routine, the environment around the patient needs to be relaxed and friendly. Also, the patient should have access to whatever is needed to perform activities easily. There should be enough things to keep the patient oriented about where he/ she is, and what the time is. Also, depending on the patient's likes and dislikes, various other means of keeping the patient comfortable and relaxed should be adopted. This could include pictures of happy days, or incense, or music, if these are helpful to the patient.

Often, caregivers do not spend enough time making the environment comfortable because they are already having enough work and problems handling care. But even a few appropriate adjustments to the home can drastically improve the patient's emotional state, and consequently, the patient's ability to understand and do things. All of us work better when we are relaxed and happy and surrounded by things we like. So do the patients.

When thinking of how to do something, we shouldn't think only of how to get the task accomplished, but also whether we can make it more pleasant for ourselves and the patient. That will change the activity from a chore to something we may enjoy.

Helping Tips

These are some of the tips that you can use for specific activities in healthcare:

Bathing

- Patients often misjudge the temperature of the water, and may end up bathing with very hot or very cold water if not helped.
- A bathroom can be very unsafe for a patient if left alone, so stay with the patient. Patients may feel embarrassed or angry at the presence of a caregiver. Handing them the soap and then turning the face away may give them back their sense of privacy.
- A thin towel can be used to cover the torso/ private parts while the caregiver soaps the rest of the body.
- A bath stool may be needed so that the patient sits down comfortably for the bath. Grab rails near the bath stool may also be needed.
- Be careful to dry in the folds, such as under the breast. Also, dry areas like between the toes.
- If bathing is tiring and difficult, reduce frequency to what is indicated by the weather and the needs of personal hygiene. Or give partial baths. A daily full bath may not be needed.
- Use the bath time to check the patient for injuries and sores.

Dental care

- You may need to help the patient brush properly.
- Denture cleaning will probably have to be done by the caregiver.

- You may also, in later stages, have to assist the patient put in and remove the dentures; dentures should fit well, or the patient will get sores in the mouth.

Grooming

- Patients may cut themselves while shaving with an ordinary razor, and therefore switch to twin blade or electric razors. Caregivers may need to take this activity after sometime.
- Combing hair is another activity the caregiver may need to take over.
- Nail cutting and filing require fine coordination, and will need to be taken over.
- Even if the patients are unable to use face creams and groom themselves, they like to look neat and presentable, and the caregiver needs to take over these tasks as the patient's inability makes them too difficult to be done independently.

Dressing

- Too many clothes in the wardrobe may be confusing for the patient. Reduce the choices by removing extra clothes. Retain only a few comfortable, loose clothes.
- Clothing may need to be simplified as coordination reduces.
- When laying out the clothes for the patient to wear, lay them out in the sequence in which they have to be worn.
- Make sure clothes are not too long, so that patients do not trip.
- Switch to clothes without zippers or elaborate buttoning.
- Instead of pajamas/ salwars with strings, use them with elastic so that they can be just pulled on or taken off.
- Use shoes with velcro straps instead of shoes with laces.
- Replace sari with nightgown.

Toileting

- Incontinence occurs for many reasons, some of which are that the patient is not able to reach the bathroom in time, or forgets where the bathroom is. Use signage to point the way, have nightlights, have grab rails that the patient can use while reaching the bathroom, and have clothing that can be taken off easily.
- Timed visits to the bathroom often reduce accidents.
- Watch out for signs of constipation and dehydration (note colour of urine) and change diet and water intake accordingly.
- If the patient shows signs of pain while passing urine or during bowel movements, consult with the doctor.
- Be ready for accidents, and set up the house for quick cleaning after such accidents.
- Persons who have been used to different styles of toilets in their childhood may forget what a commode is for, and may need to be reminded.
- Grab rails or toilet seats with rails may make the experience of sitting on the toilet seat less frightening for the patient.
- Watch the patient to ensure proper wiping, and proper washing of hands.

- For visits outside, diapers may be a good option. Even patients, who could be tense about finding a suitable bathroom outside, may easily agree to using diapers for outside visits (such as to the doctor). Patients will need assistance in wearing and removing diapers.

Eating

- Patients may forget to eat if family members have gone out and left the food on the table for them. Someone may need to ensure that the patients eat.
- Eating becomes messier over time, and patients who used to use a spoon may switch to eating with hand. They may have problems handling larger pieces, and food may need to be cut down in smaller sizes they can handle.
- Patients may not mix food while eating. They may eat all the *daal/ sambhar* first, and the curds, and then try to eat the rice without anything mixed. They may finish off the vegetable or curry, and then be left with the *roti* and nothing to eat with it. They may even eat the pickles separately. This is because they find it a problem to handle multiple items.
- Caregivers may need to mix food and give it to them, or to make combined dishes like *pulao, khichdi, bisi bele* bath, and curd rice.
- Denture fitment becomes bad. The patient may lose more teeth, but not be mobile or alert enough to get a new denture.
- Chewing becomes a problem over time, and food may need to be made softer, and finally, liquidized in a *Mixer*.
- Consult doctors about diet supplements like calcium and vitamins, and also find out whether the patient needs to take a serving of balanced-diet.

Drinking water

- Sometimes, patients, in order to avoid repeated trips to the bathroom, reduce their water intake.
- They may also forget to drink water.
- Caregivers need to make sure that patients are drinking enough water.
- Doctors may also ask patients to include electrolyte drinks in the daily routine, if the patient is showing an electrolyte imbalance.

Taking medication

In the beginning, patients may find it problematic to keep track of their medicines. Using small labeled boxes for the medicines can help.

Soon, however, more care needs to be taken to ensure that patients continue taking their medicines as prescribed. Forgetting to take medication is a common problem. Patients cannot be depended on to take their medication as required. They may forget to do so. Even if reminded, they may not believe they need to take the medication (they may say things like, *but I don't have high blood pressure*). If caregivers insist, patients sometimes hide the medicine away under the mattress or pretend to swallow it and then spit it out. It is good to be alert on this, and if necessary, supervise the patient to ensure that the medicines are taken as prescribed. In later stages, as swallowing becomes difficult, doctors should

be asked to switch prescriptions to medicines that can be crushed and given or can be substituted by syrups.

Physical Exercise

- Some amount of daily physical exercise is desirable. Walking is a good exercise. Over time, patients become unsteady, and grab rails may need to be installed at strategic places.
- Range of motion exercises will keep the patient flexible and mobile longer.

Exercise

Prepare a daily care plan for patients.

Assessment

Short Answer Questions:

- a) List 5 daily activities in a patient care?

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Describe the various activity performed by the Patient Care Assistant.
- Describe the various needs of patient.

Part B

Discussed in class the following:

- (a) What are the daily activities of a Patient Care Assistant?
(b) What are the daily needs of a patient?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Enlist the daily activity of Patient Care Assistant		
Enlist the daily activities of a patient		

SESSION 3: IDENTIFY BASIC COMPONENTS REQUIRED FOR PATIENT COMFORT

Relevant Knowledge

Besides being aesthetically pleasing, the human environment must provide light, air, and thermal comfort. In addition, proper acoustics and hygiene are important. Comfort is best defined as the absence of discomfort. People feel uncomfortable when they are too hot or too cold, or when the air is odorous and stale. Positive comfort conditions are those that do not distract by causing unpleasant sensations of temperature, drafts, humidity, or other aspects of the environment. Ideally, in a properly conditioned space, people should not be aware of equipment noise, heat, or air motion. The feeling of comfort or discomfort is based on a network of sense organs: the eyes, ears, nose, tactile sensors, heat sensors, and brain. Thermal comfort is that state of mind that is satisfied with the thermal environment; it is thus the condition of minimal stimulation of the skin's heat sensors and of the heat-sensing portion of the brain.

The environmental conditions conducive to thermal comfort are not absolute, but rather vary with the individual's metabolism, the nature of the activity engaged in, and the body's ability to adjust to a wider or narrower range of ambient. For comfort and efficiency, the human body requires a fairly narrow range of environmental conditions compared with the full scope of those found in nature. The factors that affect humans pleasantly or adversely include:

1. Temperature of the surrounding air
2. Radiant temperatures of the surrounding surfaces
3. Humidity of the air
4. Air motion
5. Odours
6. Dust
7. Aesthetics
8. Acoustics
9. Lighting
10. Room hygiene
11. Sound
12. Bed comfort

Exercise

- List various elements that can help in providing comfort to patients.
- Prepare patient Check list and compare with standard measurements.
- Demonstrate care needed by the patient.

Assessment

Short Answer Questions:

- a) What are the various requirements of patient with regard to the following:
- (i) Temperature of the room
 - (ii) Aesthetics
 - (iii) Bed comfort

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Differentiate between the various comfort requirements of a patient

Part B

Discussed in class the following:

- (a) What are the various elements that need to be considered for providing comfort to the patient?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Enlist various factors that affect patient's comfort		

SESSION 4: UNDERSTAND PATIENT'S SAFETY

Relevant Knowledge

The environment of a patient is vital to assist in the recovery process. As such, the environment must be maintained so that it contributes to and not be a detriment to healing. The patient's environment consists of the setting around him, equipment, furniture, as well as people. The patient's environment should have the following characteristics:

1. The environment should be conducive to rest;
2. The environment should be well lighted to ensure safety;;
3. The environment should be free from noise and extraneous activity;
4. The environment should be well ventilated;
5. The environment should be predictable.

Environment as conducive to rest

When a person is sick, he/she requires plenty of rest among other things as part of his/her therapy. It should allow the patient to regain his/her resources so that he restores his/her health. Many factors should be considered to make this possible, such as scheduling procedures promptly. In addition, assisting the patient in their activities of daily living should be as close to the personal routines the patient has at home. For example, some patients prefer to have their baths in the morning, while others prefer them in the evening. Schedule for visitors should be adhered to so that the patient can focus on physical rest.

The environment should be well-lighted

Since many elderly individuals are usually hospitalized, their needs must be kept in mind. Accidents may be prevented when corridors and rooms have good lighting. Good lighting includes the avoidance of glares which can distract the patient's vision.

The environment should be free from noise and extraneous activity

Noise pollutes. If a hospital environment is noisy, it detracts from the healing that rest provides. Personnel should control their voices when talking and avoid the use of telephones and other personal electronic equipment in patient care areas. Trolleys, carts, stretchers, and wheelchairs should not be noisy so as to distract the patient.

The environment should be well ventilated

Maintaining good ventilation can be achieved in air-conditioned as well as non-air-conditioned rooms. The Patient care Assistant should ensure that good ventilation is achieved by not allowing crowds of people to visit at the same time, as well as to maintain a good air circulation by opening or closing windows or doors as needed.

The environment should be predictable

As part of the admission procedure, patients and their families are oriented to the room. Since patients are in unfamiliar surroundings, consistency in the placement of personal effects, equipment and furniture should be maintained. They should know where the urinal or bedpan is or where they can obtain water and their personal effects. The patient care assistant should always return these equipment or furniture to their original placements so as not to confuse the patient. In addition, routines should be followed closely as much as possible, such as the schedule for meals, as well as visitation.

Patient Environment and its Components

1. Typical equipment/accessories in the patient's room include the following:
 - Bedside table
 - Overhead table
 - Sink
 - Bed
 - Mattress
 - Intravenous (IV) pole
 - Soap dispenser
 - Glove container
 - Sharps and needle trash
 - Bin for different biomedical waste
2. Supplies in the patient's room include the following:
 - Bed sheets
 - Soap
 - Towels

Nursery Unit/Ward

A nursery unit/ward typically comprise the following:

1. Nursing station
2. Medication room

3. Examining room
4. Treatment room
5. Procedure room
6. Clean utility room
7. Dirty utility room
8. Kitchen

Traffic Patterns in Patient Rooms and Hallways

Another aspect of creating a safe environment in the hospital is adhering to traffic patterns. It includes the following:

1. Elevators used for transporting carts, drugs and equipment should not be accessible to non-hospital personnel;
2. Delivery carts should never be left unattended in hallways. They should always be parked away from access pathways, as well as away from patient rooms;
3. Walk following the rules of street traffic. Keep left;
4. Use the stairways instead of the elevator when going up one floor or when going down two floors.
5. Ensure that hallway hazards, such as a wet floor, are marked with appropriate warning signs or notices.

Proper Functioning of Equipment and Patient Room Accessories

Equipment and accessories in patient rooms are designed to either contribute to the therapeutic regimen of a patient or to assist the patient in maintaining activities of daily living. As such, equipment and accessories should be functional at all times. It should be part of the ward activity for personnel to check these at regular intervals as part of a preventive maintenance program. Rooms should be checked before a patient is admitted to the make sure that equipment are in working order. Defective equipment should be tagged and sent to the appropriate department for repair. In addition, all equipment should have a regular schedule of being calibrated, tested, and updated as recommended by the manufacturer. Remember that prevention is better than repair. Do not wait for an equipment to fail while it is used on a patient.

Exercise



**Think, learn
and Discuss**

1. Visit a private and a government-run hospital and observe their set-up of patient rooms. What are the similarities differences?

2. Debate: Visitors should be allowed to visit patient anytime.
3. Make a list of what you would like to have in your room if you were sick and compare them to those that you observed in a patient's room during your hospital visit. Discuss why hospitals should include the item in your wish-list.

Assessment

I. Short Answer Question.

1. Enlist 5 characteristics of a safe patient environment
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____
2. Enlist 2 measures to make the patient environment predictable.
 - a. _____
 - b. _____
3. Enlist 5 rules to ensure patient safety related to traffic patterns and flow
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____

II. Fill in the blanks

1. The patient's environment consists of _____, _____, furniture, as well as _____.
2. Since patients are in unfamiliar surroundings, _____ in the placement of personal effects, equipment and furniture should be maintained.
3. If a hospital environment is _____ it detracts from the healing that rest provides.
4. _____ is better than repair.

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Differentiate between the various components of patient's environment.

Part B

Discussed in class the following:

- (a) Why is it important to provide a well lighted environment in the patient’s room?
- (b) Why entry of visitor’s should be controlled?
- (c) Why patient’s room should be well-ventilated?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Identify and enlist the traffic patterns in hallways.		
Enlist the equipment and accessories of patient room.		
Explain the role and proper functioning of equipment and patient room accessories.		

SESSION 5 : IDENTIFY QUALITIES OF A GOOD PATIENT CARE ASSISTANT

Relevant Knowledge

Patient Care Assistant (PCA) works in a range of healthcare settings and makes a valuable contribution in all areas of healthcare. They work under the supervision of nurse in the hospital. As per to the institutional guideline, the PCA has to have a good code of ethical conduct.

Medical Ethics

Some of the **important medical ethics** they should follow which are listed below as per Indian Medical standards:

1. **Informed consent:** Tell the truth and make sure that the patient understands it properly when they are obtaining the patient's consent to a procedure or treatment.
2. **Confidentiality:** The PCA should consider the details about his patients as purely personal between him and the patient. Except for professional reasons the details should not be discussed with others or in public.
3. **Communication:** Clear communication between the PCA and the patient is very important for successful treatment. Any doubt that the patient has should be dealt with care and cleared at once in simple language which he/she understands.
4. **Control:** It is the ability to purposefully direct or change.
5. **Cultural concerns:** To be sensitive to the cultural practices of the patient/client in any given circumstance eg: Breast feeding practice.
6. **Communication with family members of the patient:** The PCA should understand the anxiety of the relatives of the patients and make them aware of the medical condition of the patient.
7. **Business related issues:** Healthcare providers should not entertain unethical practices in the hospital.
8. **Telling the truth about illness, about medication, and side effects of medicines:** Telling the truth implies respect for autonomy - if a patient is lied to, they can not make a reasoned and informed choice, because they do not have the information they need to do so.

- 9. Follow the guidelines of the hospital:** The PCA should strictly follow the guidelines for hygiene, patient care, etc. This helps prevent hospital induced infections.
- 10. Accountability:** As a professional, the PCA is personally accountable for actions and omissions in his/her practice and must always be able to justify his/her decisions. He/she must always act lawfully, whether those laws relate to the professional practice or personal actions.

Qualities of a Patient Care Assistant

1. Empathy

- To be able to identify with and understand another person's feelings, situation and motives;
- Must have a sincere interest in working with people;
- Must care about others and be able to communicate and work with them;
- Understand needs and learn effective communications is one way to develop empathy.

2. Honesty

- Truthfulness and integrity;
- Others must be able to trust at all times;
- Must be willing to admit mistakes so that they can be corrected.

3. Dependability

- Must accept the responsibility that your position requires;
- Must be prompt in reporting to work and maintain good attendance record;
- Must perform assigned tasks accurately and on time.

4. Willingness to learn

- Must be willing to learn and adapt to changes;
- Changes occur because of research, new inventions and many other factors;
- Changes can mean learning new techniques or procedures;
- At times, additional education may be required to remain competent.

5. Patience

- Must be tolerant and understanding;
- Must learn to control your temper and "count to ten";
- Learn to deal with frustration and overcome obstacles.

6. Acceptance of criticism

- Must be willing to accept criticism and learn from it;
- Patients, employers, co-workers and others may criticize you;
- Some criticism will be constructive and allow you to improve your work.

7. Enthusiasm

- Must enjoy work and display a positive attitude;
- Enthusiasm is contagious;
 - Helps you do your best
 - Encourages others to do the same
 - Concentrate on positive points and negative points will not seem to be quite so important.

8. Self-motivation

- Ability to begin or to follow through with a task;
- Should be able to determine things that need to be done and do them without constant direction.

9. Tact

- Ability to say or do the kindest or most fitting thing in a difficult situation;
- All individuals have a right to their own feelings and these feelings should not be judged as right or wrong;
- Shows consideration of the feelings of others;
- Requires constant practice.

10. Competence

- Qualified and capable of performing a task;
- Follow instructions;
- Use approved procedures;
- Strive for accuracy in all you do;
- Know your limits and ask for help or guidance if necessary.

11. Responsibility

- Being willing to be held accountable for your actions;
- Others can rely on you and know you will meet your obligations.

12. Discretion

- In any health care career you have access to confidential information;
- Information should not be told to anyone without proper authorization;
- Patient is entitled to confidential care;
- Be discrete and make sure patient's rights are not violated.

13. Team player

- Learn to work well with others;
- Each member of a health care team will have different responsibilities, but each member must do his or her part to provide the patient with quality care;
- By working together, a team can accomplish goals much faster than an individual.

14. Personal Appearance

- Important to present a healthy appearance and a health hygiene that inspires confidence and a positive self-image;
- Should wear uniform as per to the place of employment;
- Wear the name badge with a photo identification as per to the norms of place of employment.

List of Do's and Don'ts for a Patient Care Assistant

DO's

- **DO** answer directly to the preceptor and instructor with regards to all facets of the rotation.

- **DO** communicate to the best of your ability with the patient
- **DO** follow laws and regulations that govern *Health Information Patient Privacy Act* (HIPPA) in the appropriate manner and seek clarification, when needed, from the preceptor regarding any professional, legal, or ethical issues.
- **DO** master the routine and site-specific procedures of each rotation quickly so you can focus on competencies and skills specific to the rotation.
- **DO** complete the various tasks assigned by the preceptor during each rotation (i.e., outline by the instructor).
- **DO** complete every assignment given to ensure you pass the program successfully and receive a passing grade!
- **DO** request to be placed somewhere new, not in a facility where you have already worked!
- **DO** report to the assigned externship/internship site **ON TIME!**
- **DO** make up hours in case of illness and emergency at the site originally assigned
- **DO** follow facility protocol and procedures to make up any missed hours

DON'T'S

- **DON'T** act without the authority of the preceptor, in regards to advising patients, health professionals or other professional activities.
- **DON'T** accept or receive pay, either directly or indirectly, from the patient
- **DON'T** request to be placed with someone you are related to.
- **DON'T** request changes to your externship once rotation assignments are made.
- **DON'T** “withdraw” from your rotation after the rotation has started.

Exercise

- Visit a Hospital and observe the services provided by the Patient Care Assistant. Prepare a report of your observations and submit to the teacher.
- Present checklist of good quality of a Patient Care Assistant

Assessment

I. Short Answer Questions:

- a) What are the 03 qualities that Patient Care Assistant should possess?

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Differentiate between the DO'S and DON'T'S of a Patient Care Assistant.

Part B

Discussed in class the following:

- (a) What are the good qualities of Patient Care Assistant?
- (b) What are the DO'S and DON'T'S of a Patient Care Assistant in healthcare set up?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Demonstrate good personal grooming		
Demonstrate responsible behaviour		
Demonstrate the willingness to learn		
Demonstrate the ability to communicate clearly		

SESSION 6: IDENTIFY VARIOUS BIOMEDICAL WASTE AND ITS MANAGEMENT

Relevant Knowledge

Hospitals, clinics, and medical teaching facilities dispose off waste products that have a potential risk to people, animals, and the environment. “Any waste which is generated during the diagnosis, treatment, or immunization of human beings or animals or in research activities pertaining thereto or in the production or testing of biological” are considered biomedical waste according to the Biomedical waste Management and Handling Rules 1998 of India. When these waste products are not disposed of properly, it may result in transmission of diseases to humans. Patient Care Assistants, like other Health Care Workers must know what biomedical waste is and how to dispose them off in the appropriate containers. By having waste classified, it becomes easier to process the waste so that it is decontaminated following existing guidelines. In addition, proper classification and disposal of biological waste protects healthcare workers and others in the community from accidental exposure to infectious or hazardous materials.

Segregation of Biomedical Waste at Source

As soon as a waste product is identified, it must be disposed of properly according to the classification of that waste. For example, if you used a glove contaminated with a body fluid, such as blood, it must be disposed in the right container immediately. By disposing and segregating the waste at its source, it will limit the potential exposure to individuals involved in waste management.

Color coding and type of containers for disposal of bio-medical waste

BLACK BAG : Black bags are used for disposing off paper waste, uninfected plastic waste, gloves, wrappers, masks, empty ointment tubes and caps.



Paper Waste



Kitchen waste



Uninfected Plastic waste



Gloves cover



Wrappers



Mask



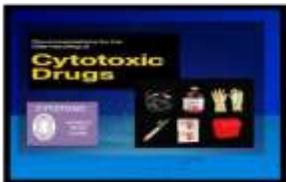
Empty ointment tubes



Caps

YELLOW BAGS: Yellow bags are used for disposing off the following items:

- Items contaminated with blood.
- Cotton containing body fluids.
- Blood stained tissues.
- Dressings, soiled plaster cast.
- Discarded medicines.
- Cytotoxic drugs.
- Electro Cardio Gram (ECG) electrodes



BLUE BAGS: Blue bags are used for disposing off the following items:

- All unbroken glasses and vials
- Empty uninfected bottles (Betadine, micro-shield bottles)

RED BAGS: Red bags are used for collecting and disposing the following:

- Infected plastic waste
- Catheters
- Gloves
- Syringes, IV sets
- Blood bags
- Urobags
- NG tube
- Vacutainers
- ET tubes

- Ventilator
- Circuits
- Oxygen mask
- Three-way extension tubes
- Blood glucose strips

Label for Transport of Bio-Medical Waste Containers/Bags

After segregation of biomedical waste, they will need to be transported according to established rules to the appropriate disposal facility. Some of these wastes will be burned (incinerated), micro waved, autoclaved, buried, or as specified by policy or legislation. These policies will also specify the method in which the waste will be transported. Manual handling of the biomedical waste is minimized by the use of available technology. Safeguards are also in place to minimize scavengers from accessing the biomedical waste. For transport of the waste, rules specify that the label contain the biomedical waste, a signature from the doctor or nurse, and the destination of the waste. The following illustrations indicate the universal symbol for biohazardous wastes.



Exercise

Think, learn
and Discuss

4. Request a copy of policies and protocols for bio medical waste management from the healthcare providers. Identify the areas of difference.

Assessment

- I. Define the following:
 - b) Biomedical waste

II. Give 5 examples of waste products to be disposed in a RED COLOR bags.

1. _____
2. _____
3. _____
4. _____
5. _____

III. Give 5 examples of waste products to be disposed in a YELLOW COLOR bags.

1. _____
2. _____
3. _____
4. _____
5. _____

II. Fill in the blanks

1. Infected plastic waste, catheters, gloves and syringes must be disposed in _____ bucket.
2. Paper -waste and kitchen waste must be disposed in _____ bucket.
3. Unbroken glasses and vials should be disposed in _____ bucket.

Checklist for Assessment Activity

Use the following checklist to see if you have met all the requirements for assessment activity:

Part A

- Define biomedical waste management.
- Discuss the various colour code of disposing waste.

Part B

Why do we segregate and dispose off biomedical waste in bags with different colours?

Part C

Performance Standards

The performance standard may include, but not limited to:

Performance standards	Yes	No
Identify and enlist the colors and labels for classification of biomedical waste.		

GLOSSARY

Activities of Daily Living - an index or scale which measures a patient's degree of independence in bathing, dressing, using the toilet, eating, and moving from one place to another.

Acute Care - medical treatment rendered to individuals whose illnesses or health problems are of a short-term or episodic nature.

Administrative Control - a method of controlling employee exposures by job rotation, work assignment, or training in specific work practices designed to reduce the exposure.

Ambulatory Health Care - a type of health care service provided without the patient being admitted. It is also called **outpatient care**.

Anesthetic Agent - drug used to reduce or abolish the sensation of pain, e.g. halothane and isoflurane.

Antibiotic: A substance produced by or derived from certain fungi, bacteria, and other organisms.

Antineoplastic Drugs - drugs used in the treatment of cancer and other tumors.

Biological Safety Cabinets - primary containment devices used by workers when handling moderate and high risk organisms.

Bloodborne Pathogens - means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Custodial Care - basic care provided on a 24 hour basis that meets an individual's basic physical needs; simple assistance or total care may be needed.

Depression: A condition of mental disturbance, typically with lack of energy and difficulty in maintaining concentration or interest in life.

Disorder: A lack of order or regular arrangement or confusion.

Emergency: A serious, unexpected, and often dangerous situation requiring immediate action

Ergonomy: The applied science of equipment design, as for the workplace, intended to maximize productivity by reducing operator fatigue and discomfort.

Extended Care Facility - a facility in which patients are care for after hospitalization.

First Aid: is an immediate and temporary care given to a victim of an accident or sudden illness before the services of a physician is obtained.

Harassment: a feeling of intense annoyance caused by being tormented

Hazard: Anything that might cause harm to a person.

Home Care - services provided by health professional's in an individual's place of residence on a per-visit or hour basis to patients or clinics who have or are at risk of an injury, illness, or disabling conditions or who are terminally ill and require short-term or long-term interventions by health care professionals.

Hospice - a health care facility or program for individuals dying from terminal illnesses.

Long Term Care - a set of health care, personal care and social services required by persons who have lost, or never acquired, some degree of functional capacity in an institution or at home on a long-term basis.

Managed Care - an organized system of health care that encourages providers to deliver the most appropriate care in the most effective manner. Managed care plans are also known as HMOs or coordinated health plans.

Nursing Home - includes a wide range of institutions which provides various levels of maintenance and personal or nursing care to people who are unable to care for themselves and who have health problems which range from minimal to very serious.

Other Potentially Infectious Materials - means (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Safer Needle Devices or Sharps with engineered sharps injury protections - means a non needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident.

Safety: The condition of being protected from or unlikely to cause danger, risk, or injury.

Sharps - contaminated Sharps means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires.

Volunteer: A person agreeing to provide service outside the scope of his/her employer and/or employed position, without additional or specific compensation for the voluntary commitment.

Vulnerability: The likelihood of an organization being affected by a hazard, and its susceptibility to the impact and consequences (injury, death, and damage) of the hazard.

Warning: Dissemination of notification message signaling imminent hazard which may include advice on protective measures.

Waste Anesthetic Gases - are those gases that are inadvertently released into the workplace and/or can no longer be used. They include all fugitive anesthetic gases and vapors that are released into anesthetizing and recovery locations, from equipment used in administering anesthetics under normal operating conditions, as well as those gases that leak from the anesthetic gas scavenging system, or are exhaled by the patient into the workplace environment.

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