# PERSONAL CARE PEDIATRIC ATTENDANT COMPETENCY

# Welcome!

We are pleased that you have joined our team!

This booklet gives you a general orientation to the tasks you might perform for our patients/clients as well as some general information. This test booklet is in addition to the other information you are given during orientation such as on infection control and child Abuse and Neglect. The patient/client-specific information and assignment will be given to you by the Supervisor.

Each task is followed by at least two multiple choice questions which you must answer correctly. Upon the successful completion of this booklet, with a 100% on the test, you will be able to complete the orientation process.

We wish you well!!

# YOUR SUPERVISOR

Your Supervisor is your first level contact. Your Supervisor will make the assignment to you and will tell you any patient/client-specific information you will need to safely and efficiently provide services to the patient/client. In turn, you must call your supervisor for certain reasons. Some of the reasons are critical enough that if your supervisor is not available, you should talk to his/her supervisor or someone else in the office rather than leave a message on voice mail. These critical items are marked with a star (\*). The reasons you should call your Supervisor include, but are not limited to:

- Changes in the patient's/client's health, mental or emotional status(\*);
- ♦ If it is a health-related emergency, call 911 first, then call your supervisor(\*).
- Changes needed in the tasks provided;
- Changes needed to the schedule;
- Patient/client falls(\*);
- Patient/client moves(\*);
- Patient/client enters a hospital(\*);
- Patient/client dies(\*);
- Someone new moves in with patient/client;
- Someone moves out of the patient's/client's home(\*);
- You cannot work for any reason (call in as soon as possible)(\*);
- You move or change your phone number;
- You need gloves or other personal protective equipment(\*);
- You have been injured on the job(\*);
- The patient/client is not following the service plan or is making unreasonable service demands(\*);
- The patient/client is being abused, neglected or exploited(\*);
- The patient/client or someone in the patient's/client's home is taking illegal drugs(\*);
- The patient/client or someone in the patient's/client's home is participating in criminal activities(\*):
- ♦ The patient/client or someone in the patient's/client's home is harassing you(\*); and,
- The patient/client or someone in the patient's/client's home threatens you verbally or physically(\*).

- 1. It is your responsibility to contact your Supervisor or the office if you have any questions. You must also contact your Supervisor or someone in the office if:
  - a. The patient/client is being abused.
  - b. The patient/client enters the hospital.
  - c. You need gloves.
  - d. All of the above.
- 2. Which of the following is a time when you can call your Supervisor and leave a message without talking to him/her or someone in the office?
  - a. To ask for a schedule change.
  - b. To report that the patient/client has died.
  - c. To report that the patient/client fell.
  - d. To report that you called 911.

# **PATIENT/CLIENT RIGHTS**

Please review the information you have been given on patient/client rights.

#### QUIZ:

- 1. Pediatric patients/clients have patient/client rights.
  - a. True
  - b. False

# ABUSE, NEGLECT AND EXPLOITATION

Please review the information you have been given on abuse, neglect and exploitation.

- 1. What is: The illegal or improper act of someone using a patient's/client's resources for monetary profit?
  - a. Abuse
  - b. Neglect
  - c. Exploitation
- 2. What is: The failure of oneself or someone else to provide food and other services to avoid physical harm?
  - a. Abuse
  - b. Neglect
  - c. Exploitation
- 3. What is: Infliction of injury, intimidation or punishment with resulting physical harm, pain or mental anguish?
  - a. Abuse
  - b. Neglect
  - c. Exploitation

# SOLICITATION

Please review the information you have been given about patient/client solicitation.

#### QUIZ:

- 1. You have just started working for this agency. You used to work for another agency and you really like working with one of the patients/clients there. You want her to transfer to this agency so you can take care of her again. Which of the following statements is correct?
  - a. The patient/client caregiver said she would transfer if you gave her \$50.00 so you do.
  - b. The patient/client caregiver said she would transfer if you promise to work extra for her so you do.
  - c. You don't do anything about it.
  - d. You tell the patient/client caregiver to transfer to this agency or you will take her dog.
- 2. You solicited a patient/client to transfer to your agency. Which of the following is true?
  - a. You did nothing wrong.
  - b. You could be terminated.
  - c. Nothing will happen when the agency learns of it.
  - d. All of the above.
  - e. None of the above.

# OSHA HIV/AIDS

The Occupational Safety & Health Administration (OSHA) was established in 1971 to ensure safe and healthful workplaces in America. Since it was created, workplace fatalities have been cut in half and occupational injury and illness rates have declined 40%. One of the things OSHA has done is to set minimum requirements for training that must be provided to employees. One of those training topics is Blood-borne Pathogens (BBP). The BBP rules came about primarily due to the outbreak of HIV (Human Immunodeficiency Virus) and AIDS (Acquired Immune Deficiency Syndrome). Following is a summary of information and is not meant to tell you everything you need to know about HIV/AIDS. There are other resources available for you to get more in-depth information.

AIDS is an infectious disease caused by a virus called Human Immunodeficiency Virus. The virus attacks the body's immune system so the body is unable to fight off many life threatening diseases. AIDS is the final step in the disease process. AIDS is spread by:

- Sexual intercourse with an infected person;
- Infected blood to blood contact:
- Sharing IV drug needles with infected users; and
- Infected mother to baby at birth or during breast feeding.

AIDS IS NOT SPREAD BY CASUAL CONTACT! Close contact with people living or working with AIDS patients/clients does not spread the disease if there is no sexual contact or blood-to-blood contact with the infected person. For that reason Standard Precautions have been developed. The idea behind Standard Precautions is that when you are providing care, think of everyone as having an infection. The following list gives you a general idea of Standard Precautions and is not meant to be all inclusive. Take these precautions whenever you are providing care to ANYONE:

- Always wash your hands before and after patient/client contact, even if you wear gloves;
- Wear gloves if either you (for example: a hangnail or a cut on your hand) or the patient/client have open wounds;
- Wear gloves if you are bathing the patient's/client's rectal/genital area;
- Wear disposable gloves if you are going to come into contact with urine, feces or any body secretions;
- Wear disposable gloves if providing mouth care;
- Wear disposable gloves if changing a patient's/client's diaper;
- Wear disposable gloves if coming in contact with linen soiled with urine or feces;
- Wear disposable gloves when cleaning the toilet, cleaning spills of urine or feces;
- Cover your nose and mouth when you cough or sneeze and then wash your hands;
- Wash your hands immediately with hot water and soap for 30 seconds to one minute if you come into direct contact with blood or other body secretions;
- Wear other personal protective equipment (PPE) such as a long gown, goggles and/or a face mask if you are giving care which may place you at risk of being soiled from fecal material, blood or other body secretions.

If you have any further questions about HIV/AIDS you can contact the National AIDS Hotline at 1-800-342-AIDS. For information in Spanish, you can call 1-800-344-SIDA.

### QUIZ:

- 1. The Occupational Safety & Health Administration (OSHA):
  - a. Sets rules for employers to follow.
  - b. Establishes guidelines for training.
  - c. Has set up a blood-borne pathogen rule.
  - d. All of the above.

# 2. HIV/AIDS:

- a. Can be spread by casual contact.
- b. Can be spread by hugging.
- c. Can be spread by blood-to-blood contact.
- d. Can be spread by shaking hands.

### 3. Standard Precautions:

- a. Should be used when providing care to anyone.
- b. Say that one should wash his/her hands if wearing gloves.
- c. Say that one should wash his/her hands if coming in contact with blood, urine or feces.
- d. All of the above.
- e. None of the above.

# **HEPATITIS B**

Hepatitis B is a disease that primarily attacks the liver. It is caused by a virus called Hepatitis B. Virus (HBV). It is usually spread by contact with infected blood or using or touching material that has infected blood on it. It is also spread by sexual contact and sharing needles, razors or toothbrushes with infected people.

You can have Hepatitis B but not be sick because the symptoms haven't developed yet. They may never develop or they may develop later. There is a vaccine that you can take that may prevent Hepatitis B with its complications of liver cancer and cirrhosis of the liver.

Symptoms of the disease include fatigue, mild fever, muscle and joint aches, nausea, vomiting, loss of appetite, abdominal pain and occasional diarrhea. Some people develop jaundice which includes yellowing of the skin and whites of the eyes, dark urine, light-colored stools and itching of the skin. Hepatitis can often be cured with medicine. After taking the medicine prescribed by a doctor, a person may no longer be infectious as shown by tests and then s/he can lead a normal life, including returning to work.

- 1. Hepatitis B is caused by a virus. It can be spread by:
  - a. Touching a person who has Hepatitis B.
  - b. Particles in the air when a person who has Hepatitis B coughs.
  - c. Cleaning up blood spills.
  - d. Particles in the air when a person who has a cold coughs.
- 2. Symptoms of having Hepatitis B disease include:
  - a. Joint aches.
  - b. Vomiting.
  - c. Diarrhea.
  - d. All of the above.
  - e. None of the above.

# **TUBERCULOSIS**

Tuberculosis (TB) is a disease that primarily attacks the lungs. It is caused by a bacteria called Mycobacterium tuberculosis. It is spread in the air when a person who has TB coughs or sneezes. You become infected if you breathe the bacteria.

TB is on the rise and people who are especially at risk include:

- ♦ People with HIV/AIDS;
- ♦ People from a place that has a lot of TB already such as Latin America and Africa;
- ♦ People who live or work in a long-term institutional setting; and/or,
- Medically under served people:
  - Poor;
  - Homeless; and,
  - IV drug users.

You can have TB but not be sick because the symptoms haven't developed yet. They may never develop or they may develop later. A person who has TB infection but no symptoms may take medicine such as isoniazid or INH so that symptoms don't develop. A TB skin test given by a health care worker is a way to find out if you have the infection.

Symptoms of the disease include a bad cough that lasts longer than two weeks, coughing up blood or sputum, weight loss, no appetite, pain in the chest, weakness, chills, fever and night sweats. TB disease can usually be cured with medicine. After taking the medicine prescribed by a doctor, a person may no longer be infectious as shown by tests and then s/he can lead a normal life, including returning to work.

- 1. Tuberculosis is caused by bacteria. It is spread by:
  - a. Touching a person who has TB.
  - b. Particles in the air when a person who has TB coughs.
  - c. Cleaning up urine spills.
  - d. Particles in the air when a person who has a cold coughs.
- Symptoms of having active TB disease include:
  - a. Having an open skin wound.
  - b. Coughing for over two weeks.
  - c. Having blood in your urine.
  - d. All of the above.
  - e. None of the above.

### HAND WASHING

Although hand washing is not a task, it is an important part of many of the tasks that you might perform for a patient/client. Hand washing is the first line of defense that you will use in preventing the spread of germs from you to the patient/client or from the patient/client to you.

You should wash your hands or use hand sanitizer:

- Before and after contact with the patient/client;
- Before handling food;
- After contact with contaminated objects;
- After blowing your nose;
- After using the bathroom; and,
- After contact with soiled linen.



When using hand sanitizer, apply product to palm of one hand and rub hands together, covering all surfaces of hands and fingers, until hands are dry or per manufacturer's guidelines if different.

- 1. It is important for you to wash your hands or use hand sanitizer when taking care of patients/clients because:
  - a. It is a task.
  - b. It makes your hands more attractive.
  - c. It is the first line of defense in spreading germs.
- 2. When should you wash your hands or use hand sanitizer?
  - Before handling food.
  - b. After using the bathroom.
  - c. Before contact with the patient/client.
  - d. All of the above.

# **BATHING**

There is more than one way to bathe a patient/client depending on his/her health status. Your supervisor will tell you the best way to bathe each patient/client. Types of baths include a bed bath, a sponge bath, a tub bath, shower, Plastic baby bath tub or a sink bath. Never leave child alone during the bath.

There are some things that are the same for all types of baths. These include:

- Remove patient's/client's clothing and diaper or assist the patient/client in removing clothes;
- Use water that is safe and comfortably mild warm Always test water before submerging child in the water.
- Infant bath water should be no more than 90 degrees F;
- Wash, or assist patient/client to wash, body parts -
  - Face:
  - Upper body;
  - For bed bath or sponge bath, change the water now;
  - Lower body; and
  - Genital area.
- Rinse skin using clean water to remove all soap;
- Dry skin surfaces gently; and,
- Protect patient/client from unnecessary exposure and chilling.
- Bath child and infant in warm environment.

\*\*\*\* Infant Bath must use mild soap and never leave infant alone during bath. Use a Plastic baby bath tub or sink. Never fill to the top. Place one to two inches water in tub or sink. Bathe infant very gently and pat dry gently.



**REMEMBER**: Blood bourne pathogens, such as, Hepititis B or Hepititis C could be transmitted through bathing patients/clients who have blood, urine, or feces on their skin.

- Types of baths you might give to a patient/client include:
  - a. Bed bath.
  - b. Tub bath.
  - c. Chemical bath.
  - d. a and b.
- 2. The order in which you should wash, or assist the patient/client to wash, body parts is:
  - a. Lower body, genitals, face, upper body.
  - b. Face, lower body, genitals, upper body.
  - c. Face, upper body, lower body, genitals.
  - d. Upper body, face, lower body, genitals.

# **DRESSING**

Most of your patients/clients will not be able to dress themselves. Assist your patient/client with dressing and ensuring his/her safety and privacy. Your supervisor will give you any patient/client-specific instructions depending on the patient's/client's condition and age.

Protect the patient/client from unnecessary exposure and chilling. Encourage self-care if the pediatric patient/client is at the age of self care. If the pediatric child becomes tired during dressing, the attendant should always assist the ill patient/client with dressing. If the pediatric patient/client is old enough to choose his/her own outfit, respect the patient's/client's choice. Always stay with the pediatric patient/client during dressing for safety.

- 1. The patient/client is 8 years old. You have just finished giving him a tub bath. He is now in the bathroom getting dressed. Your responsibilities include:
  - a. Making the bed.
  - b. Stay in the bathroom to help him with dressing
  - c. Answer the phone which is ringing in the kitchen.
- 2. The 10 year old child is almost finished dressing. He is beginning to feel tired from the bath and starting to dress. What should you do?
  - a. Yell at him to hurry up.
  - b. Let him sit and rest a bit as you finish buttoning his shirt.
  - c. Answer the phone which is ringing in the kitchen.



# HAIR CARE

You may shampoo the patient's/client's hair in the tub, sink or bed depending on the patient's/client's functional status. Never leave child or infant alone during the shampoo.

All steps are the same except for the positioning. If your patient/client is bed-bound, position him/her with head and shoulders moved to the edge or head of bed and place a plastic or improvised water trough under his/her head so water constantly drains away from the patient/client. Use a pitcher to apply water. Otherwise, position the patient/client in a comfortable position at the sink or tub. The rest of the steps are the same:

- Remove or protect clothing that may become wet during shampoo;
- Protect patient/client from exposure and chilling;
- Use water at safe and comfortable warm temperature;
- Wash hair using shampoo and water;
- Rinse hair thoroughly using clean water, pouring from a pitcher; and,
- ♦ Towel dry and comb patient's/client's hair.
- ♦ Infant you should use mild shampoo

- 1. The Child is bed-bound. You have been assigned to wash her hair each week. She does have a specially designed trough to use. You have placed it under her head and you have the water, pitcher and shampoo ready. What is your next step?
  - a. Wash hair.
  - b. Remove her gown.
  - c. Comb her hair.
- 2. The Child is ambulatory. You have been assigned to wash his hair each week. You have positioned him at the sink and have the water temperature set, and have a pitcher and the shampoo ready. What is your next step?
  - a. Wash hair.
  - b. Remove his shirt.
  - c. Comb his hair.

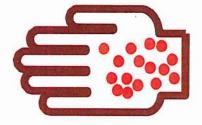


# Skin Care

# Skin Care

Skin care is provided to those patients/clients who may be prone to dry skin, rashes, redness or discoloration and/or skin breakdown. When you bathe a patient/client, look at his/her skin to see if there are areas of dryness, rashes, redness or discoloration and/or skin breakdown. After you bathe the patient/client, gently massage lotion into any area that shows any of these symptoms if assigned by supervisor. Report any new symptoms to your supervisor. If the patient/client is in bed, turn him/her to the side, not to the abdomen. Smooth clothes and/or bed linen to avoid bunching and wrinkling and to allow for free movement. If the patient/client is bed or chair bound, reposition him/her at least every two hours.

- 1. The best time to look for symptoms of skin problems is:
  - a. When the patient/client is on his abdomen.
  - b. When the patient/client is on his side.
  - c. During the bath.
  - d. In the morning.
- 2. If the patient/client is bed bound, s/he should be repositioned how often? At least:
  - a. Every four hours.
  - b. Every two hours.
  - c. In the morning.
  - d. At 3:00 p. m.



# **ORAL HYGIENE**

# Oral Hygiene

Mouth care is essential to maintain healthy teeth and gums.

Allow self-care as much as possible if age appropriate. If helping child, apply toothpaste to toothbrush and apply gentle strokes: brush downward on the upper teeth and brush upwards on the lower teeth. Gently brush the tongue. Allow patient/client to rinse mouth with water. The attendant will gently clean the Infant patient's/client's mouth and gums with soft clean cloth. At the age of 2 years old, you may start using small amount of toothpaste with soft bristle toothbrush. Ensure the child spits out the toothpaste. The attendant should always ensure the patient/client child has proper oral hygiene.

- 1. The infant patient/client has not developed any teeth. In providing oral hygiene, do you:
  - a. Brush her teeth.
  - b. Clean the denture as directed on the product's box.
  - c. Clean the gums and mouth with soft clean cloth .
- 2. The attendant should always ensure the child has adequate oral hygiene.
  - a. True
  - b. False



# **FEEDING**

Some patients/clients may need a great deal of assistance in eating. This requires patience and understanding on your part. When feeding a patient/client, that is age appropriate for solid food: follow these guidelines:

- Wash your hands;
- Wash the patient's/client's face and hands;
- Place the patient/client in a sitting position:
- ♦ Test the temperature of the food by feeling the container and testing a small amount against your inner wrist;
- Tell the patient/client what you are giving him/her;
- Fill the spoon only half full and place the food at the tip of the spoon;
- Place the food on the center of the tongue with a slight downward pressure:
- Allow the patient/client time to chew and swallow the food before putting more in his/her mouth;
- Alternate food and liquid; and
- Never feed a patient/client with a syringe.
- Proper position for Infant for bottle feeding is sitting position or semi-reclining position.
- Never give solid foods to infants from birth to 4 months old. You may start introducing small amount of solid foods one at a time at the age of 6 to 8 months if medical condition and physician has approved solid foods. Always check with supervisor before you change any patient's/client's diet.
- Some ill children may be getting nutrition through tube feeding formula's as part of the nutrition regimen.

- 1. The child patient/client is 9 years old and is bed bound. She does not speak. It is time for lunch. The food is ready and now you are going to feed her. What are the first steps to take?
  - Wash your hands, wash the patient's/client's hands and face, place the patient/client in a sitting position.
  - b. Test the food's flavor and add spices.
  - c. Chat with the patient/client and alternate food with fluids.
- 2. Which of the following you should never do when feeding an child?
  - a. Waiting patiently for the patient/client to swallow the food.
  - b. Alternating food with fluids.
  - c. Feeding the patient/client with a syringe.
  - d. Chatting with the patient/client during the meal.



# **ESCORTING SAFELY**

Employee may accompany patient/client to medical facilities and other necessary facilities. Escorting excludes driving the patient/client or attendants automobile. The attendant must stay with the child at all times during the duration of the escort unless accompanied by caregiver.

- 1. Are you suppose to drive the child patient/client to the medical facility?
  - a. Yes
  - b. No

# PEDIATRIC ATTENDANT COMPETENCY TEST

Attendant Name:									Date:		
										Score:	
Ple	ase circle th	e co	rrect answ	er to	the questic	ns lis	ted on the	atter	ndant comp	etency test given to you.	
YOUR SUPERVISOR						TUBERCULOSIS				GROOMING III (Oral Hygiene)	
1.	Α	2.	Α			1.	Α	2.	Α	1. A	2. A
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PATIENT/ CLIENT RIGHTS						HA	NDWASH	ING		FEEDING	
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ABUSE NEGLECT AND EXPLOITATION						BATHING				ESCORTING SAFELY	
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OSHA - HIV /AIDS						DR	ESSING			1	
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HEPATITIS B						GROOMING I (Skin Care)				1	
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# **ANSWER KEY**

# YOUR SUPERVISOR

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2. a

# PATIENT/CLIENT RIGHTS

1. a

# ABUSE, NEGLECT AND EXPLOITATION

C

2. b

3. a

# SOLICITATION C

1.

2. b

### OSHA - HIV/AIDS

d

2. С

3. d

#### HEPATITIS B

1. C

2. d

# **TUBERCULOSIS**

1. b

2. b

# HAND WASHING

1. С

2. d

# **BATHING**

1. d

С

#### HAIR CARE

1. b

2. b

#### **DRESSING**

1. b

2. b

# SKIN CARE

1. C

2. b

# **ORAL HYGIENE**

1. C

2. a

#### **FEEDING**

1. a

2. C

# **ESCORTING**

1. b