Providing Home Care

A Textbook for Home Health Aides

SEVENTH EDITION

William Leahy, MD with Jetta Fuzy, MS, RN and Julie Grafe, BSN, RN



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Notice to Readers

Though the guidelines and procedures contained in this text are based on consultations with healthcare professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning healthcare practices. These guidelines change, and it is each reader's responsibility to be aware of these changes and of the policies and procedures of their healthcare facility.

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Gender Usage

This textbook uses gender pronouns interchangeably to denote healthcare team members and clients. The words *male* and *female* as used throughout relate to a person's sex assigned at birth. This may be different from their experienced gender.

Acknowledgments

All books need an author. Finding one who is passionate and knowledgeable is a publisher's most important work. William Leahy, MD became involved with home health aide education both out of an interest in the care that his patients received and to give direction and meaning to the lives of young people in his community. After teaching the home health aide program at Bladensburg High School in suburban Maryland, he undertook the project of writing a better textbook. To his credit, he hired a registered nurse, who was working as a professional health journalist, to help craft the project. His vision was to produce learning and teaching materials that could be used by the program he founded and, subsequently, to use the royalties from the project to ensure the program's continuance. All royalties from sales of this book fund a foundation formed to support young people studying for healthcare careers. Currently Dr. Leahy is involved with four local programs, from which many students have successfully graduated.

Factors like the growing aging population and the COVID-19 pandemic continue to fuel the need for home health aides today. The US Bureau of Labor Statistics projects that this field will grow 22% in coming years, which is a much faster rate than the average for other occupations. Dr. Leahy sees these changes and the approaching "tsunami of aging" and hopes that *Providing Home Care* will serve as the foundation from which students can grow and be rewarded as they learn skills associated with the variety of jobs in the healthcare field.

Developing educational material for unlicensed healthcare workers demands the guidance of nurses who understand both educational theory and the practice of home health aide services. We found both in our experienced consulting editors, Jetta Fuzy, MS, RN and Julie Grafe, BSN, RN.

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Understanding how this book is organized and what its special features are will help you make the most of this resource!

1. List examples of legal and ethical behavior

Everything in this book, the student workbook, and the instructor's teaching material is organized around learning objectives. A learning objective is a very specific piece of knowledge or a very specific skill. After reading the text, if you can do what the learning objective says, you know you have mastered the material.

bloodborne pathogens

Bold key terms are located throughout the text, followed by their definitions. They are also listed in the glossary at the back of this book.

Making an occupied bed

All care procedures are highlighted by the same black bar for easy recognition.



This icon indicates that Hartman Publishing offers a corresponding video for this skill.

Guidelines: Handwashing

Guidelines, Common Disorders, and Observing and Reporting lists are colored green for easy reference.

Maintaining Boundaries

In professional relationships, boundaries

Orange boxes emphasize important information about a variety of topics.

Environmentally Friendly Care Take your time when feeding residents

There is an increasing trend throughout healthcare settings to be more environmentally friendly. In general, this term means that practices, policies, goods, products, and services do not cause harm to the environment (or cause minimal harm). Throughout this textbook, you will see these green boxes when there is a need to explain something about the environment and ways to be greener.

Chapter Review

Chapter-ending questions test your knowledge of the information found in the chapter. If you have trouble answering a question, you can return to the text and reread the material.

Beginning and ending steps in care procedures

For most care procedures, these steps should be performed. Understanding why they are important will help you remember to perform each step every time care is provided.

| Beginning Steps | |
|---|---|
| Wash your hands. | Handwashing provides for infection prevention. Nothing fights infection like performing consistent, proper hand hygiene. Handwashing may need to be done more than once during a procedure. Practice Standard Precautions with every client. |
| Explain the procedure to the client, speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible. | Clients have a legal right to know exactly what care you will provide. It promotes understanding, cooperation, and independence. Clients are able to do more for themselves if they know what needs to happen. |
| Provide for the client's privacy if the client desires it. | Doing this maintains clients' right to privacy and dignity. Providing for privacy is not simply a courtesy; privacy is a legal right. |
| If the bed is adjustable, adjust the bed to a safe level, usually waist high. If the bed is movable, lock the bed wheels. | Locking the bed wheels is an important safety measure. It ensures that the bed will not move while you are performing care. Raising the bed helps you remember to use proper body mechanics. This helps prevent injury to you and to clients. |

| Ending Steps | |
|--|--|
| If you raised an adjustable bed, return it to its lowest position. | Lowering the bed provides for clients' safety. |
| Wash your hands. | Handwashing is the most important thing you can do to prevent the spread of infection. |
| Document the procedure and any observations. | You will often be the person who spends the most time with a client, so you are in the best position to note any changes in a client's condition. Every time you provide care, observe the client's physical and mental capabilities, as well as the condition of the client's body. For example, a change in a client's ability to dress himself may signal a greater problem. After you have finished giving care, document the care using your agency's guidelines. Do not record care before it is given. If you do not document the care you gave, legally it did not happen. |



In addition to the beginning and ending steps listed above, remember to follow infection prevention guidelines. Even if a procedure in this book does not tell you to wear gloves or other personal protective equipment, there may be times when it is appropriate.

For example, the procedure for giving a back massage does not include gloves. Gloves are usually not required for a back massage. However, if the client has open sores on his back, gloves are necessary.

Phonetic spelling key for this textbook

In phonetic spelling, a term is spelled exactly the way it sounds. This type of spelling is used in this book when certain terms are introduced. It is shown in parentheses.

Here are our rules for phonetic spellings:

Long vowels

ay = long a as in day ee = long e as in see y or ye = long i as in pie oh = long o as in low oo = long u as in blue

Short vowels

a = short a as in cat
e = short e as in bet
i = short i as in sip
ah = short o as in not
u = short u as in put
uh = the short vowel sound in above, chicken,
complete, stadium (This sound, called a schwa,
can be made by any vowel.)

Blended vowel sounds

ai = the sound in air ar = the sound in car aw = the sound in fawn or = the sound in floor ow = the sound in crowd oy = the sound in oil ur = the sound in germ yoo = the sound in cute

Special consonant sounds

j = j or soft g (as at the beginning of gentle) k = k or hard c (as at the beginning of cut) ks = x (as at the end of wax) kw = qu (as at the beginning of quit) s = s or soft c (as at the beginning of city) sh = sh (as at the beginning of show) th = th (as at the beginning of this or the end of path) sh = the sound in measure or illusion

Capital letters are used to show which part or parts of the word should be emphasized (spoken most strongly). For example, the word *jaundice* is pronounced JAWN-dis. The emphasis is on the first syllable. The word *gastrointestinal* is pronounced GAS-troh-in-TES-tin-uhl. The first and fourth syllables are both emphasized.

Note: Pronunciations in this book are based on pronunciations listed in reputable medical dictionaries. There may be additional correct pronunciations that are not included in this book. Check with your instructor if you are not sure about a pronunciation.