



Annual Employee Training
12-16/17-2021 9am-5pm

Agenda

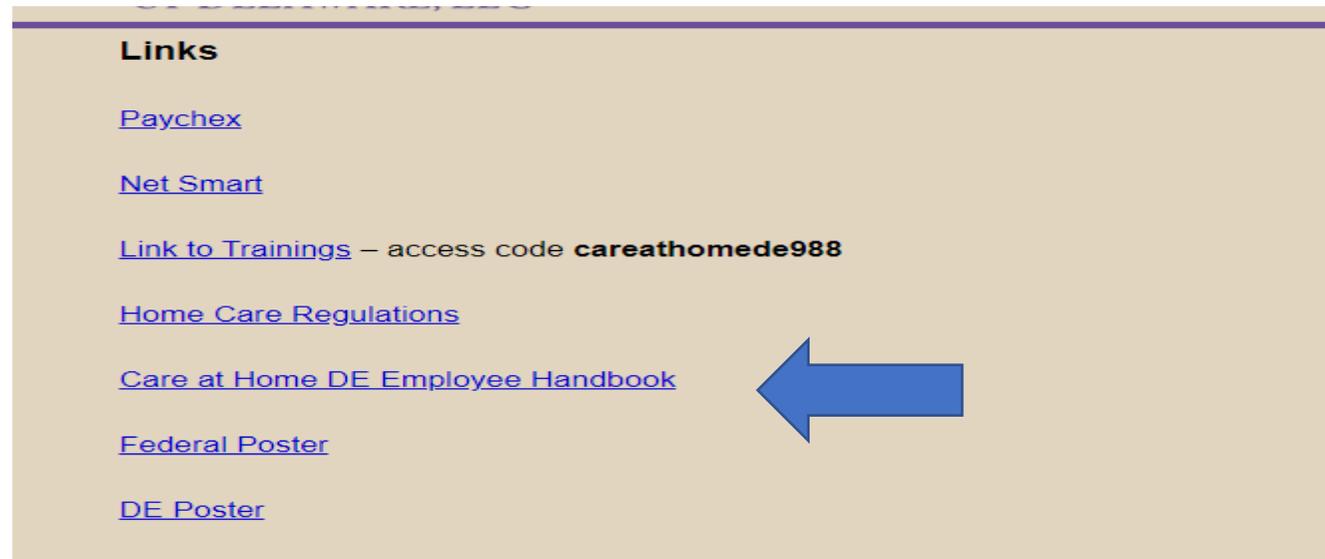
- ✓ Company Policies
- ✓ Assisting patients with Activities of Daily Living
- ✓ Emotional and Physical problems accompanying aging and disability
- ✓ Maintaining a clean and healthy environment
- ✓ Confidentiality of patient information
- ✓ Patient Rights
- ✓ Good Body Mechanics
- ✓ Verbal/Non-Verbal Communication Skills
- ✓ Good Nutrition
 - Meal Planning
 - Food Purchasing
 - Preparation of Foods
 - Special Diets

Company Policies

Company Policies and Procedures

Employee Handbook and Policies

- Web page [Employee Portal \(Private\) - Care at Home of Delaware health caregivers \(careathomedelaware.com\)](https://careathomedelaware.com/health-caregivers)



Assisting Patients With ADL's

Assisting patients with Activities of Daily Living

Home Health Aide's role in assisting clients with personal care:

- **hygiene**
 - practices used to keep bodies clean and healthy.
- **grooming**
 - practices to care for oneself, such as caring for fingernails and hair.
- **activities of daily living (ADLs)**
 - personal daily care tasks, such as bathing, dressing, caring for teeth and hair, eating, drinking, transferring, walking, and elimination.
- **perineal care**
 - care of the genital and anal area.

Assisting patients with Activities of Daily Living

- Help the client be as independent as possible
- Be aware of client preferences and routines
- Always explain what you will be doing
- Always provide privacy
- Let the client make as many decisions as possible
- Observe the client during care
- Note and report signs and symptoms
- Observe client's mental and emotional state
- Report any changes
- Leave the client's room neat and clean

Assisting patients with Activities of Daily Living

HHAs should know these guidelines for bathing:

- Baths are for health and relaxation
- Complete baths are only necessary every other day or less frequently, and for the elderly only one to two times per week
- The face, hands, axillae, and perineum should be washed every day
- Keep room temperature comfortable

Think about this question:

- Why is checking the temperature of the bath water and having client check the temperature so important?

Assisting patients with Activities of Daily Living

These safety rules are important when assisting with bathing:

- Make sure there are no loose rugs
- Never leave client alone
- Never use bath oils or gels
- Make sure water temperature is comfortable for the client
- Wear gloves and change gloves before giving perineal care
- Be familiar with safety and assistive devices

Assisting patients with Activities of Daily Living

These assistive devices may be used when bathing a client:

- Transfer belts
- Tub chair, shower chair, bath bench
- Safety bars, grab bars

As you view the following procedure for helping a client transfer to the bathtub, keep these safety precautions in mind:

- Lock wheels on wheelchairs
- Use a transfer belt
- Use grab bars, tub chairs, slide board

Assisting patients with Activities of Daily Living

Giving a complete bed bath

When bathing, move the client's body gently and naturally. Avoid force and over-extension of limbs and joints.

1. Wash your hands.
2. Explain the procedure to the client, speaking clearly, slowly, and directly. Maintain face-to-face contact whenever possible.
3. Provide privacy for the client. Be sure the room is a comfortable temperature and there are no drafts.
4. If the bed is adjustable, adjust bed to a safe level, usually waist high. If the bed is movable, lock bed wheels.
5. Ask client to remove his eyeglasses and jewelry and put them in a safe place. Offer a bedpan or urinal for the client to use before the bath (see procedures later in this chapter).
6. Place a soft cotton blanket or large towel over the client, and ask him to hold on to it as you remove or fold back the top bedding to the foot of the bed. Remove top clothing while keeping the client covered with blanket (or top sheet). Place clothing in the hamper.
7. Fill the basin with warm water. Test water temperature against the inside of your wrist. Water temperature should be no higher than 105°F. Allow the client to check the temperature to see if it is comfortable. Adjust if necessary. The water will cool quickly. During the bath, change the water when it becomes too cool, soapy, or dirty.
8. Put on gloves.
9. Ask the client to participate in washing. Help him do this whenever needed.
10. Uncover only one part of the body at a time. Place a towel under the body part being washed.
11. Wash, rinse, and dry one part of the body at a time. Start at the head, work down, and complete the front first. When washing, use a clean area of the washcloth for each stroke.

- Giving a complete bed bath

12. Place the towel under the buttocks and upper thighs. Help the client turn onto his back. If the client is able to wash his perineal area, place a basin of clean, warm water, a washcloth, and towel within reach. Hand items to the client as needed. If the client wants you to leave the room, remove and discard your gloves. Wash your hands. Leave the bed rails up (if used). Return the bed to its lowest position. Leave a call signal within reach. If the client has a urinary catheter in place, remind him not to pull it.
13. If the client is unable to provide perineal care, you will do so. Remove and discard your gloves. Wash your hands and put on clean gloves. Provide privacy at all times.
14. **Perineal area and buttocks:**
 - Change the bath water. Place a towel under the perineal area including the buttocks. Wash, rinse, and dry perineal area, working from front to back (clean to dirty).
 - Thoroughly rinse the penis and pat dry. If the client is uncircumcised, gently return foreskin to normal position. Then wash the scrotum and groin. The groin is the area from the pubis (area around the penis and scrotum) to the upper thighs. Rinse thoroughly and pat dry. Ask the client to turn on his side. Using a clean washcloth, wash, rinse, and dry buttocks and anal area. Clean the anal area without contaminating the perineal area.
15. Cover the client with the cotton blanket.
16. Place soiled washcloths and towels in the hamper or laundry basket. Empty dirty bath water into the toilet. Rinse the basin and discard rinse water in the toilet. Flush the toilet. Dry bath basin.
17. Remove and discard your gloves.
18. Wash your hands.
19. If time permits, a bed bath is a good time to give the client a back rub if he wants one.
20. Provide the client with deodorant. Place a towel over the pillow and brush or comb the client's hair (see procedure later in this chapter). Help the client put on clean clothing and get into a comfortable position with proper body alignment. If you raised an adjustable bed, return it to its lowest position.
21. If the client uses a signaling device, place it within reach. Take the bath supplies away, and wash and store everything. (If you need to change bed sheets and blanket. Place used bed linens in the hamper or laundry basket.)
22. Wash your hands.
23. Document the procedure and your observations. Did you observe any redness, whiteness, or purple areas on the skin? Was there any broken skin? How did the client tolerate the bath? Did the client tell you about any symptoms? Has there been a change in the client's abilities since the last bath or shower?

Emotional and Physical Problems Accompanying Aging and Disability

Emotional and Physical problems accompanying aging and disability

Late Adulthood (65 years and older)

- Many physical and psychosocial changes
- Loss of physical health
- Loss of friends and jobs
- Many receive home care

Emotional and Physical problems accompanying aging and disability

Define the following terms:

- **geriatrics**

- the branch of medicine that deals with the diagnosis, treatment, and prevention of disease in older and elderly adults, as well as problems related to aging.

- **gerontology**

- the study of the aging process in people from midlife through old age.

- **ageism**

- prejudice toward, stereotyping of, and/or discrimination against persons or the elderly.

Emotional and Physical problems accompanying aging and disability

Know these facts about aging:

- Older adults have many different capabilities
- Stereotypes are false.
- Older persons are usually active
- Aging is a normal process, not a disease
- Aging persons need to adjust to change
- They do not need to be dependent

Emotional and Physical problems accompanying aging and disability

HHAs should understand the changes of aging and related care for each body system.

Changes in the integumentary system:

- Thin, dry, fragile skin
- Fatty layer lost
- Thin, gray hair
- Wrinkles appear
- Nails harder and more brittle

Emotional and Physical problems accompanying aging and disability

Care of the integumentary system:

- Fewer baths
- Moisturizing lotions
- Less frequent shampooing
- Layering clothing
- Keeping bed linens wrinkle-free
- Encouraging fluids

Emotional and Physical problems accompanying aging and disability

- Changes in the musculoskeletal system:
 - Weaker, less-toned muscles
 - Brittle bones
 - Stiff joints
 - Loss of height
- Care of the musculoskeletal system:
 - Preventing falls
 - Encouraging self-care
 - Assisting with range of motion exercises
 - Promoting independence
 - Exercising

Emotional and Physical problems accompanying aging and disability

Changes in the nervous system:

- Loss of ability to think quickly and logically
- Loss of concentration and memory (improved by reminiscing)
- Slower responses and reflexes
- Changes in vision, hearing, taste, and smell

Care of the nervous system:

- Keeping notes and lists
- Placing calendar nearby
- Reminiscing
- Allowing time for decision-making
- Allowing time for movement
- Encouraging mental activities

Emotional and Physical problems accompanying aging and disability

Care of the nervous system (cont'd):

- Providing digital books or audiobooks
- Cleaning eyeglasses, hearing aids
- Speaking carefully but not loudly
- Facing client
- Encouraging mouth care
- Providing fresh foods
- Assisting with bathing
- Using safety measures to lower risks of burns and falls

Emotional and Physical problems accompanying aging and disability

Changes in the circulatory system:

- Less efficient pumping of heart
- Decreased activity
- Need for more rest
- More sensitivity to temperature extremes

Care of the circulatory system:

- Encouraging moderate exercise
- Assisting with range of motion exercises
- Encouraging slower movements (example: rise slowly and stand for a minute to prevent dizziness)
- Controlling temperature
- Wearing slippers or shoes and socks
- Using safety measures for loss of senses

Emotional and Physical problems accompanying aging and disability

Changes in the respiratory system:

- Lung strength and lung capacity decreases
- Oxygen in the blood decreases
- Voice weakens

Care of the respiratory system:

- Encouraging more rest periods
- Doing moderate exercise
- Assisting with deep breathing exercises
- Limiting exposure to pollutants
- Sitting upright, rather than lying down

Emotional and Physical problems accompanying aging and disability

Changes in the urinary system:

- Bladder muscle tone weakens
- bladder is unable to hold the same amount of urine (frequent urination)
- Susceptibility to infection

Care of the urinary system:

- Encouraging fluids
- Offering trips to bathroom
- Reporting urinary incontinence
- Maintaining cleanliness and giving regular skin care
- Keeping clients clean and dry

Emotional and Physical problems accompanying aging and disability

Changes in the gastrointestinal system:

- Loss of appetite
- Changes in digestion
- Elimination difficulties

Care of the gastrointestinal system:

- Offering more fluids and nutritious meals
- Serving softer foods
- Making mealtimes enjoyable
- Offering bite-sized pieces
- Providing smaller meals
- Encouraging more fiber intake

Emotional and Physical problems accompanying aging and disability

Changes in the endocrine system:

- Lower hormone levels (including poor pancreas function)
- Less able to handle stress

Care of the endocrine system:

- Regulate blood sugar with medication and diet
- Eliminating stressors and exercising

Emotional and Physical problems accompanying aging and disability

Changes in the reproductive system:

- Menstruation ends
- Physical changes in sex organs (such as prostate and vagina)
- Sexual needs and desires do not necessarily change

Care of the reproductive system:

- Avoiding hot baths
- Providing privacy for sexual activity
- Reporting inappropriate behavior

Emotional and Physical problems accompanying aging and disability

Changes in the immune and lymphatic systems:

- Weakened immune system
- Slow recovery rate
- Decrease in bone marrow activity and number of lymph nodes
- Decreased response to vaccines

Care of the immune and lymphatic systems:

- Washing hands often
- Keeping everything clean
- Providing proper nutrition
- Monitoring vital signs for signs of infection

Emotional and Physical problems accompanying aging and disability

HHAs should observe and report these signs of psychological changes that can be related to aging:

- Disorientation
- Problems concentrating
- Depression
- Dementia
- Confusion
- Suicidal thoughts
- Insomnia
- Loss of appetite or overeating

Emotional and Physical problems accompanying aging and disability

Signs of psychological changes (cont'd):

- Lack of attention to basic personal care tasks
- Pain, including headaches, stomach pain, and other body aches
- Moodiness or withdrawal
- Changes in appearance, speech, movement, and behavior
- Sleep disorders and emotional changes

Emotional and Physical problems accompanying aging and disability

Lifestyle changes related to aging:

- Death of friends and relatives
- Loss of strength and stamina
- Fear of death, illness, or injury

Care:

- Listening and caring
- Ensuring safety

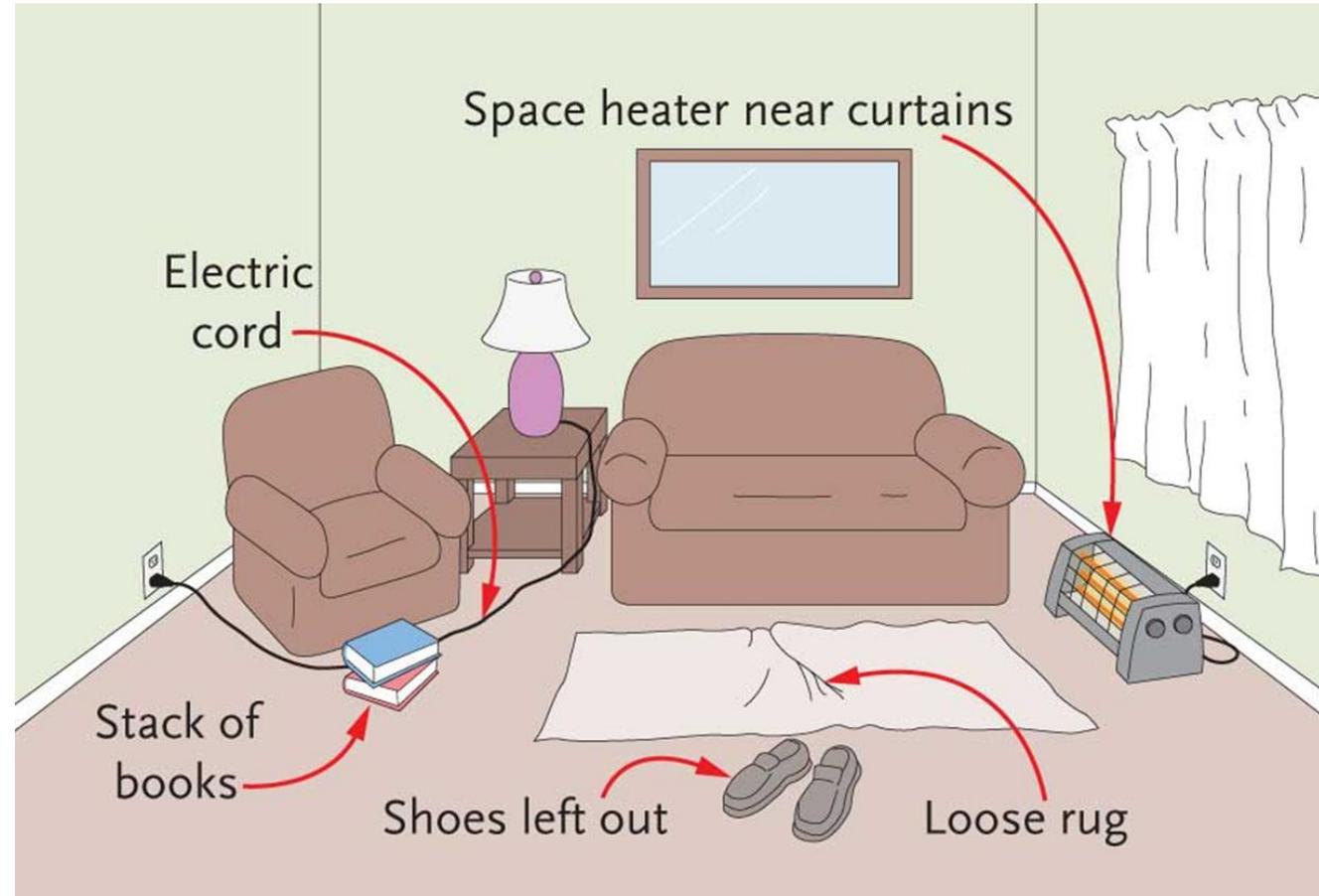
Emotional and Physical problems accompanying aging and disability

HHAs can promote health in older adults in these ways:

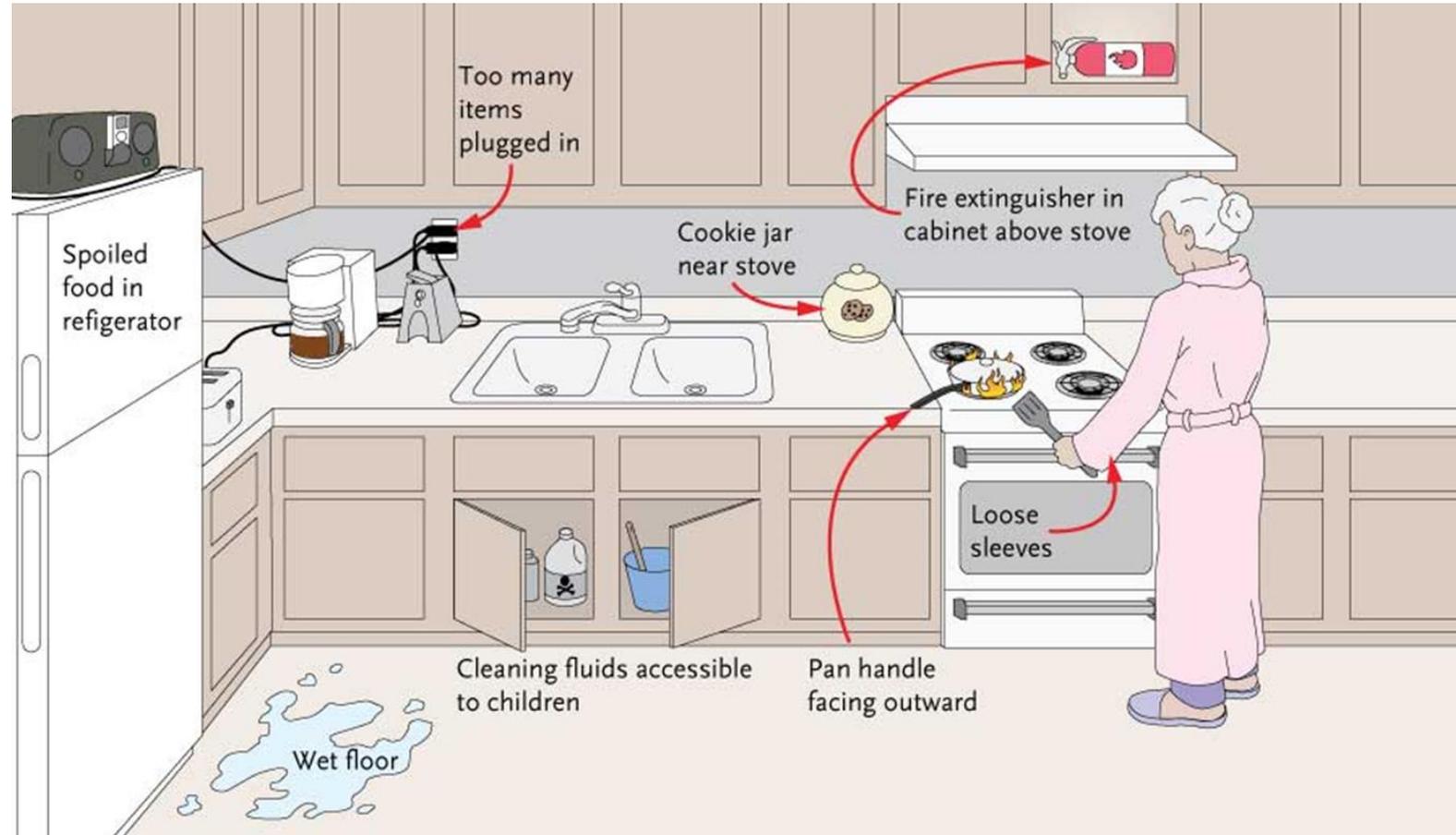
- Encourage clients to pursue activities they enjoy and can succeed in
- Help clients develop a routine for the day
- Encourage self-care
- Help clients to be well-groomed
- Address clients respectfully
- Respect the needs for privacy and social interaction

Maintaining a Clean and Healthy Environment

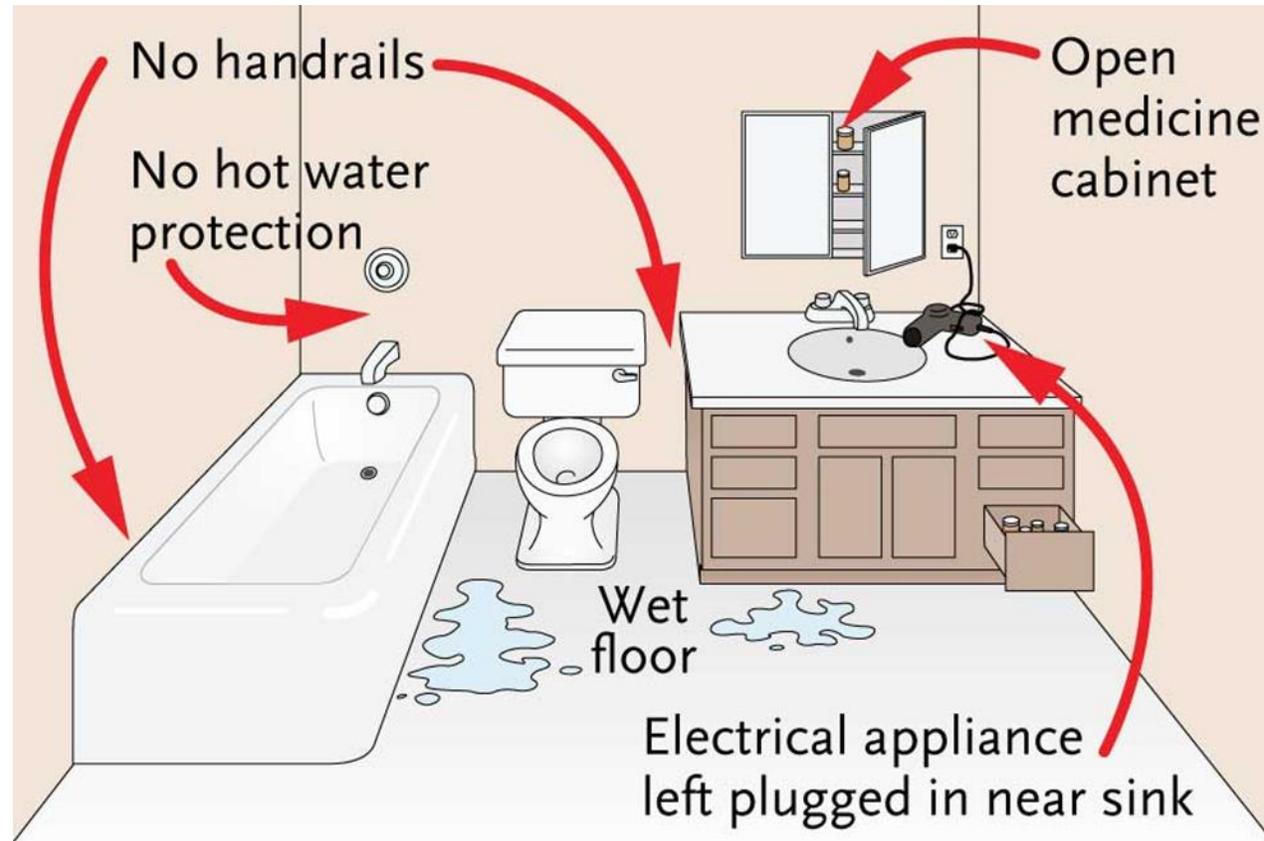
Maintaining a clean and healthy environment



Maintaining a clean and healthy environment



Maintaining a clean and healthy environment



Maintaining a clean and healthy environment

Five common types of accidents in the home

1. Falls

- Causes: unsafe environment, loss of abilities, disease, medications, loss of vision, gait or balance problems, weakness, paralysis, and disorientation
- Prevention:
 - Clear walkways
 - Avoid waxing floors, and use nonskid mats
 - Wear nonskid shoes with tied laces
 - Wear clothing that fits properly
 - Keep frequently-used personal items close
 - Clean up spills

Maintaining a clean and healthy environment

Fall Prevention (cont'd):

- Mark hazardous areas
- Improve lighting
- Lock wheelchair wheels
- Lock bed wheels before giving care or transfers
- Return beds to lowest position after care
- Get help when moving clients
- Offer help with elimination need often. Respond to requests for help immediately
- Leave furniture in same place

Maintaining a clean and healthy environment

2. Scalds or burns

Burns

- Causes: dry heat (iron, stoves, other electric appliances), wet heat (hot water or other liquids, steam), or chemicals (lye, acids)
- Prevention:
 - Roll up sleeves
 - Check that stove and appliances are off
 - Set hot water heater at 120-130°F
 - Check temperatures of liquids with thermometer or on inside of your before serving

Maintaining a clean and healthy environment

Burns Prevention (cont'd):

- Be careful with space heaters
- Use low settings on hair dryers
- Report frayed cords
- Let clients know if you are about to pour or set down hot liquid
- Pour hot drinks away from clients and keep away from edges of tables
- Make sure clients are sitting down before serving hot drinks

Maintaining a clean and healthy environment

3. Poisoning

- Cause: ingesting harmful substances
- Prevention:
 - Lock harmful products away
 - Check medication for expired dates
 - Check refrigerator and cabinets for spoiled food. Investigate odors
 - Post Poison Control Center number

Maintaining a clean and healthy environment

4. Cuts

- Cause: sharp objects
- Prevention:
 - Keep sharp objects away from children
 - Lock sharp objects away if clients are confused
 - Cut away from body while preparing food
 - Know first aid for cuts

Maintaining a clean and healthy environment

5. Choking

- Causes: eating, drinking, or swallowing medication; babies putting objects into mouth; unconsciousness, ill, or weakened clients
- Prevention:
 - Keep small objects out of reach
 - Cut food
 - Position infants on their backs for sleeping
 - Eat sitting up
 - Provide thickened liquids

Confidentiality of Patient Information

Confidentiality of Patient Information

Care at Home's paper files and information systems contain confidential records pertaining to our business operations, our clients, business associates, health care professionals, and employees. Because this information is vital to the operation of our organization in providing services to our clients, it must be protected. As such, in accordance with current HIPAA regulations and organizational policies governing the access, use, and disclosure of protected health or organization information, you have the responsibility to protect such data.

As an employee of this organization, you may have access to protected information. The purpose of this agreement is to provide you with information to assist you in understanding your duty and obligations relative to confidential information. Your signature on this document indicates that the information contained herein has been explained to you, you received a copy of this document, and that you understand the rules set forth. YOU AGREE:

1. To respect the privacy and confidentiality of any information you may have access to through our paper files, computer system or network and that you will access or use only that information necessary to perform your job.
2. To refrain from communicating information about a client in a manner that would allow others to overhear such information or to discuss a client's information with anyone not permitted access to such information in accordance with the organization's established policies.
3. To disclose confidential client, business, financial or employee information ONLY to those authorized to receive it.
4. To safeguard and not disclose your password or user ID code or any other authorization you may have that allows your access to protected information. You accept responsibility for all entries and actions recorded using your password and user ID code.
5. Not to attempt to learn or use another employee's password and user ID code to log-on to our organization's computer system or network.
6. To immediately report to the FSA Privacy /Security Officer or CEO any suspicions that your password and user ID code has been compromised.
7. Not to release or disclose the contents of any clients of the communities we serve or organizational record or report except to fulfill your work assignment.
8. Not to remove or copy any protected information or reports from their storage location except to fulfill your work assignment.
9. Not to sell, loan, alter or destroy any protected information or reports except as properly authorized within the scope of your job assignment.

Confidentiality of Patient Information

10. Not to leave your computer terminal or workstation unattended without logging off or using your system's screen saver function before leaving your work area or securing hardcopy information so that it may not be disclosed to unauthorized persons.
11. Not to access or request any protected information that is not necessary to perform you assigned job function.
12. Not to permit others to access our organization's computer system or network using your password or ID code.
13. To permit your access to our organization's information systems to be monitored;
14. Not to download or make copies of any software or applications without proper authorization or license.
15. Not to access or download any pornography or other illegal materials or perform any illegal activity such as gambling while on the organization's computer system or network.
16. Not to use our organization's computer system or network to send/forward harassing, insulting, defamatory, obscene, offending or threatening messages.
17. To report any suspected or known unauthorized access, use, loss or disclosure of protected information.
18. To abide by the HIPAA policies and procedures set forth by the organization as well as current regulations governing privacy issues.
19. To restrict personal use of the organization's computer system or network to meal and break periods and to follow the organization's established policies governing such personal use.

Patient Rights

Patient Rights

- Be treated with courtesy, consideration, respect, and dignity;
- Be encouraged and supported un maintain one's independence to the extent that conditions and circumstances permit, and to be involved in a program of services designed to promote personal independence;
- Self-determination and choice, including the opportunity to participate in developing one's Plan of Care;
- Privacy and confidentiality;
- Be protected from abuse, neglect, mistreatment, financial exploitation, solicitation and harassment
- Voice grievances without discrimination or reprisal; You may do this by contacting the Director or Clinical Director at (302) 442 – 3600 or contacting:

Office of Health Facilities Licensing and Certification
261 Chapman Road, Suite 200, Newark, DE 19709
Telephone: (302) 292 – 3930, Fax: (302) 292 – 3931
Toll-free hotline: 1 (800) 942 -7373

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- Be fully informed, as evidenced by patient's written acknowledgment of these rights, and of all rules and regulations regarding patient conduct and responsibilities;
- Be fully informed, at the time of admission into the program, of service, and activities available and related charges
- Be served by individuals who are properly trained and competent to perform their duties; and
- Refuse care and to be informed of possible health consequences of the refusal.

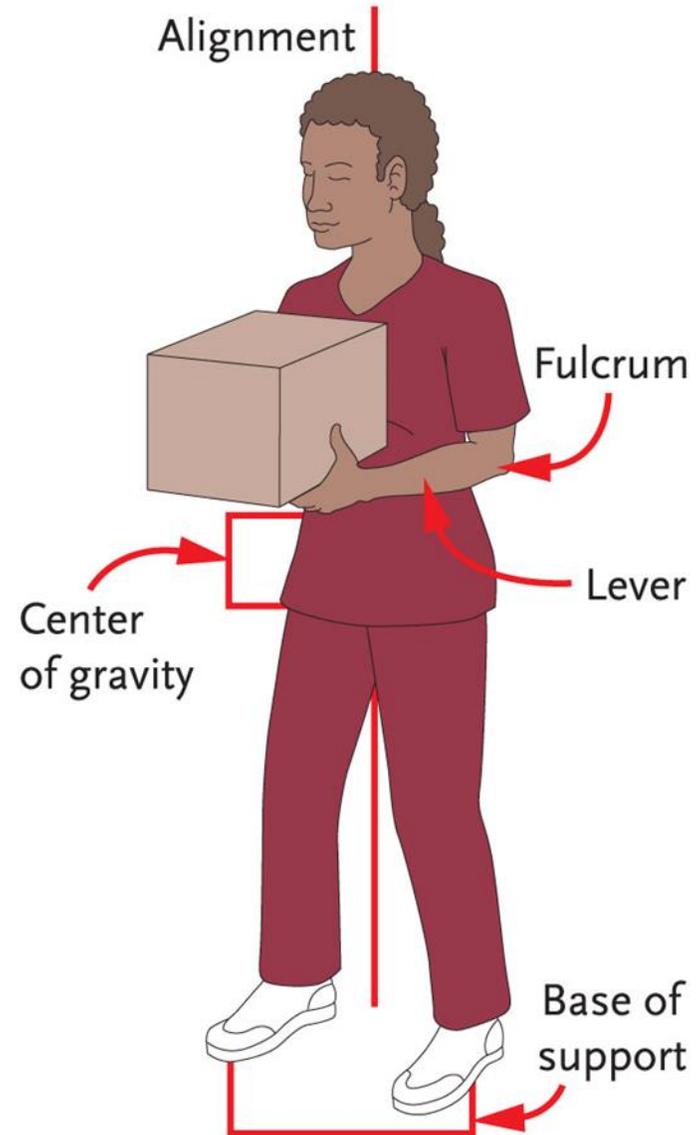
CARE
AT HOME
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Good Body Mechanics

Good Body Mechanics

body mechanics

the way the parts of the body work together when a person moves



Good Body Mechanics

- *Alignment*

- Try to keep body in alignment, with two sides of the body as mirror images of each other
- Keep object close when lifting
- Point feet and body toward the direction you are moving
- Avoid twisting at waist

- *Base of support*

- Wide base is more stable
- Stand with legs shoulder-width apart

Good Body Mechanics

Principles of body mechanics (cont'd):

- *Fulcrum and lever*
 - Arm is lever
 - Elbow is fulcrum
 - Rest object against forearm

- *Center of gravity*
 - When standing, weight is centered in pelvis
 - Low center provides greater base of support
 - Bend knees when lifting

Good Body Mechanics-Lifting Objects from the floor



Good Body Mechanics

When lifting a heavy object from the floor

- Spread your feet shoulder-width apart
- Bend your knees
- Use muscles in your thighs, upper arms, and shoulders to lift the object
- Pull object close to your body
- When you stand up, push with hip and thigh muscles
- Pivot your feet instead of twisting at the waist
- Always face the object or person you are moving

Good Body Mechanics

Remember these general guidelines for proper body mechanics:

- Assess the situation and clear the path first
- Use both arms and hands when lifting, pushing, or carrying objects
- Spread feet shoulder-width apart and use the muscles in the thighs, upper arms, and shoulders when lifting an object
- Hold objects close to you
- Push or slide objects rather than pulling them
- Avoid bending and reaching as much as possible

Good Body Mechanics

General guidelines for proper body mechanics (cont'd):

- When making an adjustable bed, adjust the bed height to a safe working level, usually waist high
- Use a good stance when bending and bend at the knees
- Avoid twisting at the waist; turn your whole body instead and face what you are moving
- Get help when possible
- Talk to clients before moving them
- Place your feet about shoulder-width apart to help a client sit up, stand up, or walk

Verbal/Non-Verbal Communication Skills

Verbal/Non-Verbal Communication Skills

Define the following terms:

- **verbal communication**

communication involving the use of words or sounds, spoken or written.

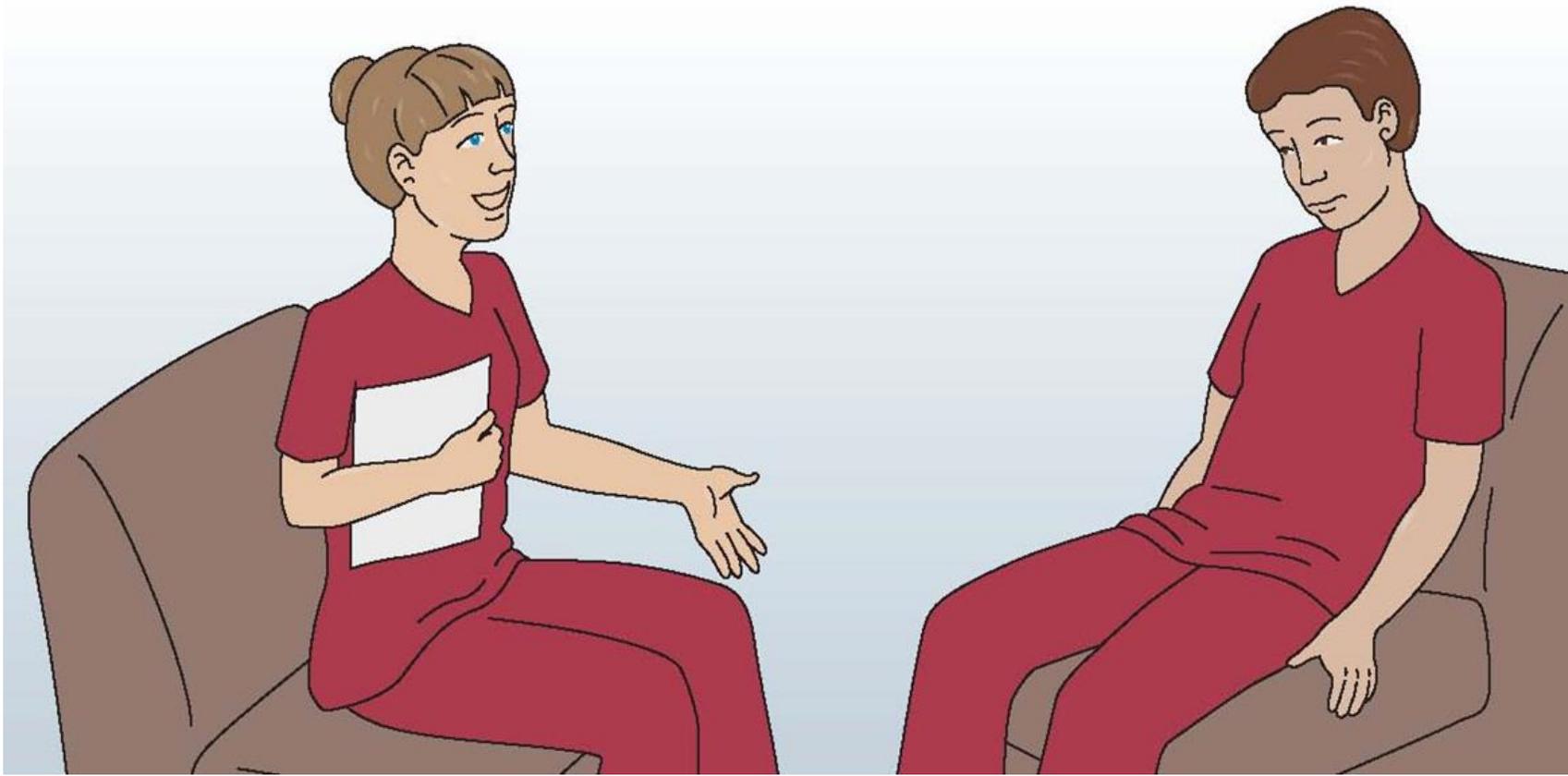
- **nonverbal communication**

communication without using words.

- **culture**

a system of learned beliefs and behaviors that are practiced by a group of people and are often passed on from one generation to the next

Key Material 4-2: Body Language



Verbal/Non-Verbal Communication Skills

Remember:

- Nonverbal communication may depend on personality or cultural background. Each culture may have different knowledge, behaviors, beliefs, values, attitudes, religions, and customs and all of these can influence communication.

Good Nutrition

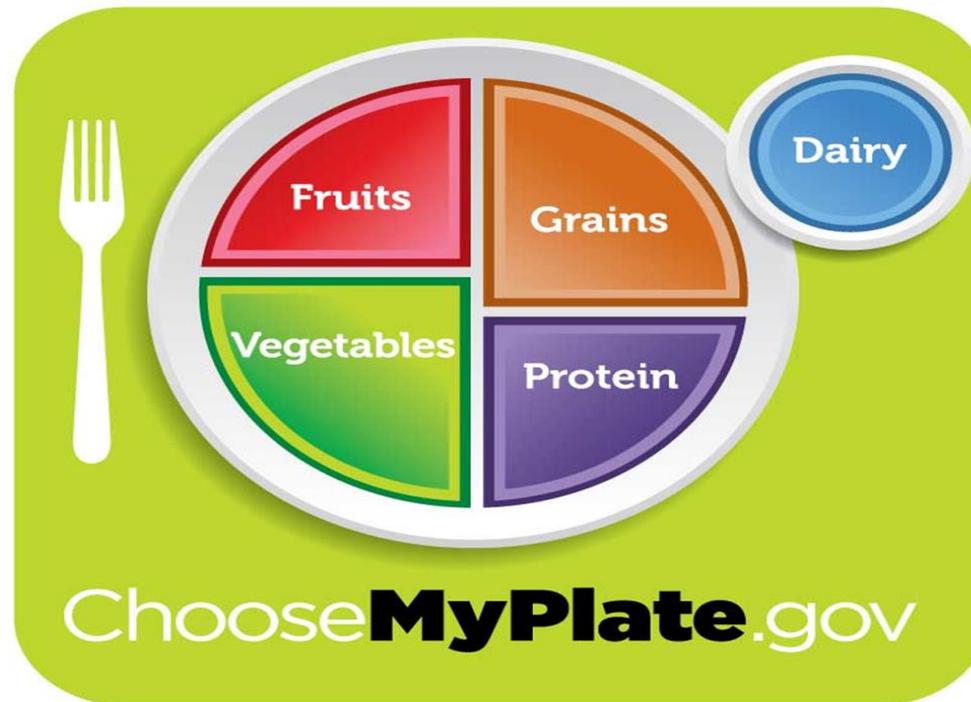
Good Nutrition

What is nutrition? Nutrition is how the body used food to maintain health.

Six Basic Nutrients:

1. Water
2. Carbohydrates
3. Protein
4. Fats
5. Vitamins
6. Minerals

The USDA's MyPlate icon is based on scientific information about nutrition and health and its goal is to guide people in making healthy food choices.



Tips to healthy food choices

- Balance calories
- Enjoy your food, but eat less
- Avoid oversized portions
- Foods to eat more often are vegetables, fruits, whole grains, and fat-free or 1% milk and low-fat dairy products
- Foods to eat less often are foods high in solid fats, added sugars, and salt. These foods include fatty meats, like bacon and hot dogs, cheese, fried foods, ice cream, and cookies
- Compare sodium in foods. Select canned foods that are labeled sodium-free, very low sodium, low sodium, or reduced sodium
- Drink water instead of sugary drinks

Nutrition Terms:

- **NPO**
 - abbreviation for *nothing by mouth* from the Latin *nil per os*; a medical order that means a client should not have anything to eat or drink.
- **dehydration**
 - a serious condition in which a person does not have enough fluid in the body.
- **fluid overload**
 - a condition that occurs when the body is unable to handle the amount of fluid consumed.
- **Fluid balance**
 - Taking in and eliminating equal amounts of fluid
- **Edema**
 - Swelling caused by excess fluid in body tissues

Remember

- Drinking enough water or other fluids per day can help prevent constipation and urinary incontinence.
- Without enough fluid, urine becomes concentrated, which creates a higher risk for infection.
- Proper fluid intake helps to dilute fluid and flush out the urinary system.
- It may help prevent confusion

Dehydration Signs and Symptoms

- Dry mouth
- Cracked lips
- Sunken eyes
- Dark urine
- Strong-smelling urine
- Weight loss
- Fatigue
- Dizziness
- Complaints of abdominal pain
- Client reports being very thirsty

Fluid Overload Signs and Symptoms

- Swelling of extremities
- Weight gain
- Decreased urine output
- Shortness of breath
- Increased heart rate
- Anxiety
- Tight, smooth, or shiny skin

Special Diets

- Low-sodium diet
- Fluid-restricted diet
- High-potassium diet
- Low-protein diet
- Low-fat diet
- Modified calorie diet
- Bland diet
- Diabetic diet
- Low-residue (low-fiber) diet
- High-residue (high-fiber) diet
- Gluten-free diet
- Vegetarian diet
- Vegan diet
- Limited animal-based diet
- Liquid diet
- Soft diet and mechanical soft diet
- Pureed diet

Awareness of regional, cultural, and religious food preferences

Think about this question:

- What regional, cultural, or religious food preferences do you have?
- Check with your patients about their food preferences.

HHAs should remember these points about assisting with eating

- Mealtime is a social time, which has a positive effect on eating
- Client may be embarrassed when being fed
- Encourage clients to do whatever they can for themselves
- Wash your hands
- Do not treat the client like a child
- Sit at client's eye level
- Check the food temperature
- Cut food and pour liquids as needed
- Identify foods and fluids. Call pureed foods by correct name
- Allow client to make food choices
- Ask client which food he prefers to eat first
- Do not mix foods unless asked
- Do not rush the meal
- Be social and friendly
- Give the client your full attention while she is eating
- Alternate offering food and drink

How to prepare a basic food plan and list food shipping guidelines

A meal plan should include snacks, not just meals.

- Use coupons
- Read the unit price tags
- Buy foods in season
- Buy in quantity
- Shop from list
- Avoid processed, ready-made foods
- Buy cheaper brands
- Read the labels
- Estimate cost before buying
- Consider the waste in bones and fat

When deciding what to buy, it is important to understand these four factors:

- Nutritional value
- Quality
- Price
- Preference

Sample Meal Planner

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Breakfast					
Snack					
Lunch					
Snack					
Dinner					
Snack					

Safe Food Preparation

- Wash hands frequently.
- Keep your hair tied back or covered.
- Wear clean clothes or clean apron.
- Wear gloves if you have any cuts on your hands. Depending upon a client's illness, you may always have to wear gloves when preparing food. You may also have to wear a mask. Follow instructions in the care plan.
- Avoid coughing or sneezing, and wash hands immediately if you cough or sneeze.
- Keep countertops and surfaces clean/disinfected.
- Handle raw meat, poultry, fish, and eggs carefully
- Once you have used a knife or cutting board to cut fresh meat, do not use anything else until it has been washed in hot, soapy water, rinsed in clean water, and allowed to air dry. Use separate cutting boards for produce, bread and raw meat, poultry, and seafood.

Safe Food Preparation continued

- Use hot, soapy water to wash utensils.
- Change dishcloths, sponges, and towels often. Wash sponges in the dishwasher.
- Thaw frozen foods in the refrigerator.
- Wash fruits and vegetables thoroughly.
- Cook meats, poultry, and fish thoroughly.
- Do not use cracked eggs or serve raw eggs.
- Do not taste and stir with the same utensil.

Safe Food Storage

- Buy cold food last; get it home fast
- Keep it safe; refrigerate
- Use small containers that seal tightly
- When in doubt, throw it out

Remember:

- Some elderly people who are on tight budgets or who are forgetful do not throw away old foods

Questions

