

Care 4 You Training Newsletter



INVESTOR IN PEOPLE



New Moving and Handling Trainers!

Care 4 You recently arranged training for the Team Leaders as part of their ongoing professional development to ensure that they are fully equipped to fulfill their responsibilities with regard to Moving and Handling

Erica, Kasey and Nisha all attended a 4 day Train the Trainer Course in Chester. Having successfully completed this intensive course, they all now have the knowledge and skills to complete M+H risk assessments, implement M+H action plans, and train and support staff in safe moving and handling techniques with their clients.

Prior to our Team Leaders completing this course, the Training was delivered by Samantha

Olubodun-Learning and Development Manager. However as the organization continues to grow, it was recognized that she was unable to effectively continue to support employees in safe moving and handling practices without the additional support of these 3 new Moving and Handling Trainers.

Erica has already started to demonstrate her new knowledge and skills acquired by assisting with a formal Moving and Handling Training session held last week at the Training Academy @ No 67.

She supported both new staff and more experienced members of the team to learn effective moving and Handling Techniques.

Staff benefited from this practical session and demonstrated their new skills by practicing the techniques in the safe environment of the classroom amongst colleagues to help gain their confidence.

If you have any issues to do with your clients Moving and Handling, you should raise these with your Team Leader as they are best placed to assess the client, as they are familiar with their individual support plans and are now qualified to assess, advise and guide you in safe Moving and Handling practices.

Samantha Olubodun will continue to coordinate all formal Moving and Handling Training and will support the Team Leaders in all aspects of Moving and Handling

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Special points of interest:

- *New Moving and Handling Trainers!*
- *Investors in People Award Success*

Investors in People Award Success

Some of you will be aware that Care 4 You underwent an assessment towards the end of January during which many staff were interviewed by the Investors In People Assessor. Clearly the Assessor was impressed with what staff had to say about the organization, and this is reflected by the achievement of the Investors in People Award.

A priority of all organisations working with the

Investors in People Standard is to ensure that their employees are kept in touch with what is going on. Importantly, as an employee of an organisation working with the Standard, you should understand your organisation's aims and objectives and the role you will play in helping it get there.

It is also vital that you understand how your work contributes to the success of the organisa-

tion as a whole. This is something that is discussed regularly during induction when staff have to demonstrate their understanding by completing a set of workbooks and also through supervision when staff demonstrate their knowledge and understanding with their clients when Team Leaders review their performance in practical terms.

So well done everyone on this massive achievement.

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Who are “Skills for Care”?

Skills for Care is the employer led authority on the training standards and development needs of nearly one million social care staff in England providing over £25 million in funding to support improved training and qualifications for managers and staff.

They work with social care employers and training providers both regionally and nationally to establish the necessary standards and qualifications that equip social care workers with the skills needed to deliver an improved standard of care.

Skills for Care is responsible for the strategic development of the adult social care workforces in England.

They do this by

-Working in consultation with employers, training providers, staff, carers and people who use care services

-Ensuring qualifications and standards continually adapt to meet the changing needs of social care workers, employers and people who use care services

-Distributing funding for the sector to develop skills and qualifications

-Using the National Minimum Dataset for Social Care (NMDS-SC) to create a profile of more than million social care workers for the very first time.

Their vision

-Put employers in the driving seat on social care workforce issues

-Create a trained and qualified workforce providing high quality care

-Provide an expert voice to the social care workforce

We work with

Skills for Care is not responsible for the inspection of standards of care provision in social care settings. This is the responsibility of the Commission for Social Care Inspection (CSCI).

Skills for Care is not responsible for the registering or regulation of care workers. This is the responsibility of the General Social Care Council (GSCC)

New Starters Join Our Growing Team

Despite the current economic climate, clients still continue to need support in their own homes. So with this in mind, the beginning of 2009 has seen 5 new starters joining the various teams.

Stephanie Gavin and Alison Densley

join Erica to support clients in the South West , Janice Waldron will be supporting Nisha and her clients in the South East, and Ella Magnus and Kaye Walker recently joined the North West Zone which is currently looking to appoint a new Team Leader

following the resignation of Janette Parker.

We wish them every success at Care 4 You and trust that they will enjoy supporting their clients and will find their job both interesting and rewarding.



Questiontime: What is my role in reducing cross contamination ?



Each month we feature frequently asked questions (FAQ's) . This month the question is

What is my role in reducing cross contamination?

Hand washing is a simple habit that can help keep you and your clients healthy. Hand washing, when done properly, is one of the best ways to avoid getting sick. This simple habit requires only soap and warm water or an alcohol-based hand sanitizer — a cleanser that doesn't require water.

The dangers of not washing your hands

Despite the proven health benefits of hand washing, many people don't practice this habit as often as they should — even after using the toilet. Throughout the day you accumulate germs on your hands from a variety of sources, such as direct contact with people, contaminated surfaces, foods,

animals and household waste. If you don't wash your hands frequently enough, you can infect yourself with these germs by touching your eyes, nose or mouth. And you can spread these germs to others by touching them or by touching surfaces that they also touch, such as doorknobs.

Infectious diseases that are commonly spread through hand-to-hand contact include the common cold, flu and several gastrointestinal disorders, such as infectious diarrhoea. While most people will get over a cold, the flu can be much more serious. Some people with the flu, particularly older adults and people with chronic medical problems, can develop pneumonia.

Inadequate hand hygiene also contributes to food-related illnesses, such as salmonella and E. coli infection. Signs and symptoms include nausea, vomiting and diarrhoea.

PPE You must remember the importance of ensuring that you use the PPE provided by Care 4 You whenever necessary.

Gloves and aprons must be worn for all personal care tasks and removed once personal care and all related tasks (such as emptying commodes etc) are complete.

If you are able to wash hands effectively it is not necessary to wear gloves for food handling, however it is essential to apply a clean apron for all food handling tasks.

Hands must then be washed or sanitised with alcohol gel following disposal of PPE.

Handwashing doesn't take much time or effort, but it offers great rewards in terms of preventing illness. Adopting this simple habit can play a major role in protecting your health and that of your clients.

Learning Zone : Stroke

Description of stroke and TIA

A stroke occurs when the blood flow to part of the brain is cut off – it is a 'brain attack' (in the same way that a heart attack happens when the blood supply to the heart muscle is cut off). Without a blood supply, brain cells can be damaged or destroyed because they may not receive enough oxygen.

The brain controls everything that the body does, so a stroke can affect many different functions of the body depending on which part of the brain is involved. The symptoms of stroke can include numbness, weakness or lack of movement on one side of the body, slurred speech, difficulty finding words or understanding speech, sudden problems with vision, confusion, and a severe headache. A stroke happens suddenly and the effects are experienced straightaway.

There are two main types of stroke. The most common type (an '**ischaemic stroke**') is when one of the blood vessels leading to or in the brain is blocked. The second type ('**haemorrhagic stroke**') is when a blood vessel in the brain bursts, causing bleeding into the brain.

A **transient ischaemic attack (TIA)**, often called a 'mini-stroke', happens when the blood supply to part of the brain is interrupted for a very short time. The symptoms are the same as for a stroke, but they usually last only a few minutes or hours, and have disappeared completely within 24 hours.

Medication

A 'clot-busting' drug called alteplase may be used if a brain scan indicates that it might help. This drug treatment is known as thrombolysis.

Aspirin and anticoagulants-There are two types of drugs which are used to reduce the risk of blood clots forming (the cause of most strokes). The decision as to which sort used will be made after careful assessment by the medical team.

Everyone who has had a stroke should be given aspirin as soon as possible, and definitely within 24 hours of the stroke starting, unless a brain scan shows bleeding in the brain. This should continue to be given daily for

two weeks and a specialist should then discuss future treatment with the client

Statins-Some clients may have been taking a drug called a statin before having a stroke to reduce their cholesterol which should be continued or would be commenced immediately after a stroke.

Nutrition and swallowing problems

Clients should be monitored by their healthcare team to make sure that they are getting enough food and fluids. They may have difficulty swallowing after having a stroke. They should have their swallowing assessed by a trained healthcare professional before having any food, liquid or medication by mouth.

Their swallowing should be assessed by a specialist. After this assessment, clients should be given food and fluids in a consistency or form that can be swallowed. Further tests may be carried out if problems continue.

Preventing complications

If a client has been severely affected by the stroke they may need:

- a special mattress designed to prevent pressure sores
- help to find comfortable positions so that they do not damage the side of their body affected by the stroke
- special equipment such as a hoist to ensure that they are moved safely
- chest physiotherapy to keep their lungs clear of infection.

As soon as they are able they should be helped to sit out of bed in an appropriate chair for short periods of time.

Principles of rehabilitation

Stroke rehabilitation professionals should assess what your clients needs are work with you and their families to help them achieve as good a recovery as possible. This will be based on their assessment, your clients wishes and the severity of the stroke. All members of the care team should provide a consistent approach so that your client experienced continuity of care.

Speaking, writing and understanding

Stroke can affect your clients ability to speak or understand what is being said (known as aphasia), and reading and writing may be difficult or impossible. They may be unable to speak clearly because of muscle weakness (known as dysarthria) or difficulty coordinating the complex placement of the speech muscles, eg struggling to place the tongue correctly in a sequence of sounds (known as apraxia or dyspraxia). Each individual may be affected in different ways such as:

- difficulty in speaking or producing any sounds at all
- problems in thinking of the right words to speak or write
- trouble understanding speech or writing
- use of nonsense words
- problems understanding humour
- difficulties with social rules such as taking turns to speak
- slurring of speech, sounding as if they are drunk
- gestures and facial expressions affected by paralysis.

Bladder and bowel control

It is quite common to find that clients are unable to control their bladder and/or bowel movements after a stroke. If they already had a catheter prior to the stroke it is likely to still be required in the long term. If they have not had a catheter before, it should only be used if they are unable to pass water, not as a means of treating incontinence. This can be distressing if they are embarrassed but there are alternatives (such as a conveen) which are more appropriate as it is often only a problem in the early stages.

Emotional and psychological effects of stroke

It is very common for strokes to cause problems with thinking, concentrating, remembering, making decisions, reasoning, planning and learning. After a stroke nearly everyone feels tired and it may take many months to regain normal energy levels. Clients may also have problems with mood. These may take the form of feeling emotional, anxious, unhappy or depressed (sometimes crying or laughing uncontrollably).

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Our Mission Statement

- To maintain a safe, comfortable environment within the service users' home, adapting to meet the individual changing needs of the service user.
- To optimise freedom of choice and aid independence within the limits of health and safety, promoting individual rights.
- To provide a continuous training and development programme to aid us to deliver high standards of holistic care aimed towards achieving service users' optimum health potential.
- To provide cost effective care within the limits of specified budgets to ensure value for money and effective use of resources.
- To enable service users to live as fully and comfortably as possible and in due time, to die at peace with dignity, and to provide support and care to relatives and friends

Useful Website Links

www.care-4-you.org
www.scils.co.uk
www.skillsforcare.org.uk
www.gsc.org.uk
www.bbc.co.uk/learningzone
www.cityandguilds.com
www.csci.org.uk
www.dh.gov.uk
www.ageconcern.org.uk
www.learndirect.co.uk

