

REVISED 06/30/2015

When using this program, please consider the following important points:

- 1. The guidelines and procedures outlined in the manual and videos will never supersede current regulation. To the best of our knowledge, these guidelines reflect current regulation; nevertheless, they cannot be considered universal recommendations. For individual application, all recommendations must be considered in light of the resident's condition. The authors and publishers disclaim responsibility for any adverse effects resulting directly or indirectly from the suggested procedures, from any undetected errors, or from the reader's misunderstanding of the text or video content.
- Regulations and interpretations will change and it is your responsibility to ensure
 that the assisted living or residential care community is operated under the
 guidelines outlined in current regulation. Review regulations, policy, procedures and
 instructions to ensure compatibility with the regulations your community is
 obligated to abide by.
- 3. The guidelines outlined in this manual will never supersede a state regulatory agency's directive, physician order, or direction from a licensed medical professional.
- Hands-on resident care of any kind should always be in accordance with physician orders. The interventions in this manual are not intended to be personalized plans of care.

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TERMINOLOGY

Various terms related to resident care are used throughout this training kit. While most of these terms are commonly accepted in the industry, there is some variation from state to state, and within different organizations. To clarify these terms and to improve your understanding of their meaning, a brief explanation is provided below:

Community

The care setting is referred to as an assisted living or residential care community. Although the term "facility" is often used in state regulations and by some in the industry, we feel it is important to distinguish an assisted living or residential care residence as a home, rather than strictly a clinical facility.

When the word "community" is used in this manual it is referring to the care setting, not the community at large. Clarification will be provided if necessary. In some cases, such as when quoting from regulations, the term facility will be used.

Caregiver

This is the person providing care. Although there are exceptions, typically this person is not a licensed medical professional.

Instructor

This is the person providing and/or overseeing training. This may be a supervisor, or a professional trainer hired to conduct training.

Learner

This is the individual being trained.

Resident

The resident is the individual receiving care. In other healthcare settings the term "patient" or "client" are more common, but to foster a homelike atmosphere the term resident is used in the assisted living and residential care industries.

INSTRUCTIONS FOR USING THIS TRAINING KIT

This training kit is designed to assist you in complying with the orientation training requirements for Residential Care Facility for the Elderly (RCFE) direct care staff orientation training.

This program is divided into six modules, each containing the following materials to assist you in completing the training:

- Training DVD
 There is a separate training DVD that corresponds to each module. It is recommended that learners view the DVD for each module separately, rather than in one long viewing session.
- Learner Workbook
 The learner workbook contains additional information to be reviewed during the training, as well as important learning activities that reinforce key points.
- Quiz and Quiz Key
 There is a separate quiz and key for each module. After reviewing all material,
 the learner should take the quiz and have it graded by the instructor.

It is recommended that you have your learner(s) complete one component at a time. For example, instruct the learner to view the first DVD (Introduction and Orientation/Resident Rights) and complete the corresponding portion of the workbook and quiz before moving on to the next module. Ensure that the DVD viewing area is comfortable and quiet.

After viewing the video, the learner and instructor will review the key information as outlined in the workbook. Next, the learner performs the instructor activities as outlined in this workbook. These activities may include discussion with the instructor and/or participating in supervised resident care or supervised discussion with residents. The instructor will sign the learner workbook appropriately upon successful review of the key information and successful completion of each activity.

When the learner has completed the entire program, the instructor/supervisor will sign the Orientation Training Checklist verifying successful completion. Make sure to maintain a copy of the Orientation Training Checklist in each employee's individual personnel record.

PROGRAM DEVELOPER QUALIFICATIONS

The training materials in this program, which includes DVDs and a student workbook, have been developed and approved by Josh Allen, RN as appropriate for staff training as outlined in Title 22.

Josh Allen, RN, C-AL

Josh Allen is a Registered Nurse with over 15 years experience in the Assisted Living industry. Josh has served as a corporate consultant to numerous assisted living providers on issues of staffing, clinical services, policies, and regulation compliance. He is the past Executive Director of the American Assisted Living Nurses Association and is a past board member of the Center for Excellence in Assisted Living.

TRAINING REQUIREMENTS

California RCFE Direct Care Staff Training Kit New California laws have expanded the training requirements for direct care staff working in a Residential Care Facility for the Elderly (RCFE) effective January 1, 2016. Assembly Bill 1570 and Senate Bill 911, both passed in 2014 have expanded the orientation training requirement to a total of 40 hours, including several new mandatory training topics.

Prior to Working Independently

Direct care staff must receive 20 hours of training prior to working independently, including 6 hours of dementia care and 4 hours of training in the area of postural supports, restricted conditions, and hospice. The table below outlines how this kit can be used to meet this requirement:

Required Topic	Length	Module	DVD(s)
Residents' rights	1 hour	Introduction & Orientation	Introduction/Orientation and Resident Rights
Physical needs and limitations of the elderly	2 hours	Special Needs of the Elderly	Special Needs of the Elderly
Importance and techniques for personal care services	2 hours	Delivering Personal Care	Assisting with Activities of Daily Living Infection Control
Policies and procedures regarding medications	1 hours	Understanding California Medication Regulations	Understanding California Medication Regulations
Psychosocial needs of the elderly	1 hour	Psychosocial Care	Psychosocial Care
Building and fire safety and appropriate response to emergencies	2 hours	Emergency Procedures	Emergency Procedures

Dementia care, including the misuse of antipsychotics, the interaction of drugs commonly used by the elderly, and adverse effects of psychotropic	3 hours	Introduction to Dementia Care	Introduction to Dementia Dementia Care: Effects of Medications on Persons with Dementia
drugs Special needs of persons with Alzheimer's disease and dementia and person-centered approaches to dementia care	3 hours	Alzheimer's Care Special Needs	Dementia Care: Tips for ADLs Dementia Care: Therapeutic Interventions, Activities, and Communication
Cultural competency	1 hour	Respecting Diversity	Food Service in Dementia Care Respecting Diversity:
and sensitivity issues			Residents, Staff, and Families
Postural Supports	1 hour	Postural Supports	Postural Supports
Restricted Conditions	2 hours	Restricted Conditions	Special Care Needs: Oxygen, Ostomy, Catheter, and Skin Breakdown
Hospice	1 hour	Hospice Care	End of Life

Within the First Four Weeks

Direct care staff must receive an additional 20 hours of training within the first four weeks of employment, including 6 hours of training on dementia care. The table below outlines how this kit can be used to meet this requirement:

Required Topic	Length	Module	DVD(s)
Physical needs and	1 hours	Special Needs of the	Monitoring Residents
limitations of the elderly		Elderly	for Changes in Condition

Importance and techniques for personal care services	8 hours	Delivering Personal Care	Assisting Residents with Transportation
care services			Fall Precautions in
			Assisted Living
			Vital Signs
			Wheelchairs and
			Ambulatory Aides
Psychosocial needs of the	2 hour	Psychosocial Care	Activities: Encouraging
elderly			Resident Participation
Building and fire safety	3 hours	Responding to	Calling 911
and appropriate response		Resident Emergencies	
to emergencies			Incident Reporting
Dementia care	6 hours	Caring for Residents	Dementia Care:
		with Dementia	Wandering
			_
			Dementia Care
			Sundowning
			Dementia Care:
			Aggressive Behaviors
			Dementia Care: Dignity
			and Sexuality Issues
			,
			Dementia Care:
			Hydration
			Dementia Care: Health
			Complications

Hands-On Training

At least 16 hours of the orientation training must include hands-on training. This kit includes training checklists to facilitate and document the hands-on portion of the training.

DIRECT CARE ORIENTATION TRAINING CHECKLIST, PART 1

(Must be completed prior to working independently)

Name:	Date of Hire:				
Module	Date Completed	Total Time	Trainer Name/ Qualifications	Trainer Signature	Employee Signature
Module 1: Introduction and Orientation		1 hour			
Module 2: Special Needs of the Elderly		2 hours			
Module 3: Delivering Personal Care		2 hours			
Module 4: Understanding California Medication Regulations		1 hour			
Module 5: Psychosocial Care		1 hour			
Module 6: Emergency Procedures		2 hours			
Module 7: Introduction to Dementia Care		3 hours			
Module 8: Alzheimer's Special Care Needs		3 hours			
Module 9: Respecting Diversity		1 hour			
Module 10: Postural Supports		1 hour			
Module 11: Restricted Conditions		2 hours			
Module 12: Hospice Care		1 hour			

Supervisor Signature

TOTAL TRAINING TIME: 20 HOURS

Employee Signature:

DIRECT CARE ORIENTATION TRAINING CHECKLIST, PART 2

(Must be completed within four weeks of employment)

Name:	Date of Hire:

Module	Date Completed	Total Time	Trainer Name/ Qualifications	Trainer Signature	Employee Signature
Module 1: Special Needs of the Elderly		1 hour			
Module 2: Delivering Personal Care		8 hours			
Module 3: Psychosocial Care		2 hours			
Module 4: Responding to Resident Emergencies		3 hours			
Module 5: Caring for Residents with Dementia		6 hours			
Module 6: Successful Completion of all Hands-On Checklists		16 hours, (included in the above modules)			
TOTAL TRAINING TIME: 20 HOURS, INCLUDES 16 HOURS OF HANDS- ON TRAINING	Supervisor	r Signature		Employee Signatu	ıre:

Hands-On Checklists



SKILLS DEMONSTRATION

Skills instruction and demonstration is an important component of direct care staff orientation training. At least 16 hours of the orientation training must include hands-on training. The following training checklists can be used to facilitate and document the hands-on portion of the training.

These checklists should be used during the appropriate section of the Part 2 training that must be completed during the first four weeks of employment. To use the checklists:

- 1. The instructor /shadower should demonstrate and discuss each step of the checklist.
- 2. The employee being trained should have an opportunity to practice each step either on the instructor /shadower or a co=-worker.
- 3. Once the employee being trained demonstrates a successful practice, he/she should be allowed to perform the skill with a resident under direct supervision.
- 4. When performed successfully, the checklist should be signed off by the instructor/shadower.

Name:	Date of Hire:
	·

	HANDWASHING	
1)	Wet hands and wrists under running water to begin cleansing	
2)	Apply soap to hands to begin washing	
3)	Use friction rubbing soapy hands together for a minimum of 20 seconds	
4)	Rinse hands and wrists under running water to remove soap	
5)	Keep hands pointed downward while washing and rinsing	
6)	Use clean dry paper towel to dry hands and wrists	
7)	Confine drying to areas washed	
8)	Use paper towel to turn water off after hands cleansed	
9)	Dispose of used paper towel in trash	
10)	End procedure with clean hands avoiding contamination (e.g., direct contact with faucet controls, paper towel dispenser, sink or trash can)	
Proc	edure completed successfully: Instructor Date	
	matractor Date	

		
	COMMON CARE PRACTICES	
Cor	nmon Care Practices are behaviors or actions that are part of all care the home care aide (CAREG to the resident. Common Care Practices are evaluated as a part of every skill the candidate pe	• •
1)	Identify self to the resident when beginning care	
2)	Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
3)	Promote resident's social and human needs throughout procedure	
4)	Promote resident's rights throughout procedure	
5)	Promote resident's safety throughout procedure	
6)	Promote resident's comfort throughout procedure	
7)	Leave common use items within resident's reach at end of care (e.g., phone, glasses, remote, tissues, glass of water)	
Pro	cedure completed successfully:	

Instructor

Name:

Date of Hire:

Date

Name:	Date of Hire:

HELP A RESIDENT TO WALK
1) Identify self to the resident when beginning care
2) Explain walking destination before the resident begins walking
3) Have resident lean forward on the seat of the chair before standing
4) Cue resident to push up with arms from chair to stand
5) Prepare resident for standing by positioning knees at 90 degree angle with feet flat on the floor
6) Place hand on resident's arm, back or waist when resident stands
7) Cue resident to stand
8) Walk slightly behind and to one side of resident while walking
9) Ambulate resident the required distance
10) Ask how resident feels after standing or while walking
11) Cue positioning before resident sits, with legs centered against seat of chair for safe seating
12) Cue resident to reach for chair before sitting
13) Place hand on resident's arm, back or waist when resident sits
14) Leave resident sitting safely in chair with hips against the back of seat
15) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedures
16) Promote resident's social and human needs throughout procedure
17) Promote resident's rights throughout procedure
18) Promote resident's safety throughout procedure
19) Promote resident's comfort throughout procedure
20) Leave common use items within resident's reach at end of care (e.g., phone, glasses, remote, tissues, glass of water)
Procedure completed successfully: Instructor Date

Name:	Date of Hire:
	-

	FEED A RESIDENT	
1)	Identify self to the resident when beginning care	
2)	Ensure resident is sitting upright in chair before begins feeding	
3)	Sit to feed the resident	
4)	Offer the resident fluid to drink during the meal	
5)	Talk to resident during the meal	
6)	Wait to offer another bite of food or fluid to drink until resident swallowed or resident's mouth is ensured empty	
7)	Alternate the type of food offered with bites or ask about resident's preference for each bite	
8)	Limit the amount of food on fork or spoon to provide as bite-size	
9)	Leave the resident with a clean mouth area at the end of the skill	
10)	Offer or apply clothing protector before beginning skill and remove before completing procedure	
-	Leave overbed table clean and dry and cleared of meal items (e.g., food, nes, tableware) at end of the procedure	
12)	Dispose of clothing protector (if used) and trash appropriately	
	Use infection control measures and Standard Precautions to protect the ident and the CAREGIVER throughout procedure	
14)	Promote resident's social and human needs throughout procedure	
15)	Promote resident's rights throughout procedure	
16)	Promote resident's safety throughout procedure	
17)	Promote resident's comfort throughout procedure	
	Leave common use items within resident's reach at end of care (e.g., phone, sses, remote, tissues, glass of water)	
Proc	cedure completed successfully: Instructor Date	

Name: Dai	te of Hire:
HELP DRESS A RESIDENT WHO HA	IS A WFAK ARM
The resident is sitting in a chair when care begins for this skill. The resident is clean T-shirt and underwear, and needs to be dressed in a cresident is played by another candidate, and for the test, will be	ident is able to stand. The resident is already shirt, pants, socks and shoes. The role of the
1) Identify self to the resident when beginning care	
2) Include resident in choice about what to wear	
3) Place shirt sleeve over weak arm before putting on nor	n-affected arm
4) Cue resident to assist with dressing	
5) Have resident seated when putting feet and legs into p	ants
6) Provide support to resident when pulling up and securi	ng pants
7) Provide assistance to put socks and shoes on resident v	while seated
8) Leave socks smooth and shoes secured properly	
9) Move resident's extremities gently and naturally, avoid when dressing	ling overextension
10) Complete dressing with clothing secured and aligned p	properly
11) Use infection control measures and Standard Precaution resident and the CAREGIVER throughout procedure	ons to protect the
12) Promote resident's social and human needs throughou	ut procedure
13) Promote resident's rights throughout procedure	
14) Promote resident's safety throughout procedure	
15) Promote resident's comfort throughout procedure	
16) Leave common use items within resident's reach at en glasses, remote, tissues, glass of water)	d of care (e.g., phone,

Instructor

Procedure completed successfully: _

Date

Na	me: Date of Hire:	
	PUT A KNEE-HIGH STOCKING ON A RESIDENT'S LEG	
Th	ne resident is lying in bed when care begins for this skill. For this test, the candidate is asked to pu on only one leg. The role of the resident is played by another candidate.	ut the stocking
1)	Identify self to the resident when beginning care	
2)	Prepare stocking for application by turning sock inside out to at least the heel area	
3)	Place foot of stocking over toes, foot and heel	
4)	Complete application of stocking over foot with the toes and heel in proper position per stocking design	
5)	Pull stocking up leg ensuring stocking is not twisted	
6)	Leave stocking smooth (wrinkle-free)	
7)	Leave room at toe area so that stocking is not tight against toes	
8)	Leave stocking raised to knee	
9)	Move resident's leg gently, supporting extremity, and avoiding overextension, when applying elastic stocking	
10)	Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
11)	Promote resident's social and human needs throughout procedure	
12)	Promote resident's rights throughout procedure	
13)	Promote resident's safety throughout procedure	
14)	Promote resident's comfort throughout procedure	
15)	Leave common use items within resident's reach at end of care (e.g., phone,	

Procedure completed successfully:		
	Instructor	Date

glasses, remote, tissue, glass of water)

Name:	Date of Hire:

PROVIDE PERINEAL CARE TO A RESIDENT	
Identify self to the resident when beginning care	
2) Use water that is a safe temperature to cleanse resident	
3) Apply gloves before cleansing perineal are	
Use pad or towel to protect bottom sheet from becoming wet during procedure	
5) Use soapy washcloth to cleanse perineal area	
6) Use clean area on washcloth for each washing and rinsing stroke	
7) Wipe perineal area from front to back for all cleansing and rinsing strokes	
8) Keep water in basin soap-free for use as rinse water by: (1) washing with washcloth with soap applied directly to the washcloth instead of adding soap into basin of water; or (2) using two separate basins of water: one for washing and one rinsing	
9) Rinse perineal area using a soap-free clean wet washcloth or soap-free area of the washcloth used to cleanse	
10) Dry perineal area by patting with towel moving from front to back	
11) Provide cleansing, rinsing and drying to include labial folds and extending into groin (skin-fold) area (female resident)	
12) Position resident a safe distance from edge of bed when turned on side during care	
13) Wash, rinse and dry peri-anal area and buttocks	
14) Wipe from front	
15) Leave resident on dry underpad or sheet at completion or procedure	
16) Minimize exposure of the resident's body during the procedure	
17) Wear gloves while providing perineal care, while rinsing and drying equipment, and handling soiled linens	
18) Rinse, dry and store basin, dispose of used linen(s) and trash appropriately at completion of procedure	
19) Remove gloves without contaminating self after rinsing and storing equipment	

20) Leave resident covered with top sheet at completion of procedure	
21) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
22) Promote resident's social and human needs throughout procedure	
23) Promote resident's rights throughout procedure	
24) Promote resident's safety throughout procedure	
25) Promote resident's comfort throughout procedure	
26) Leave common use items within resident's reach at end of care (e.g., phone,	
glasses, remote, tissue, glass of water)	
	•
Procedure completed successfully:	
Instructor	Date

Name:	Date of Hire:	

TRANSFER A RESIDENT FROM A BED INTO A WHEELCHAIR The resident is lying in bed when care begins for this skill. The resident can bear weight, but cannot walk. The resident's transfer requires a transfer (gait) belt. The role of the resident is played by another candidate. 1) Identify self to the resident when beginning care 2) Have wheelchair positioned near bed before assisting the resident to sit 3) Assist resident to apply non-skid footwear before standing 4) Provide support holding behind resident's shoulders or back, and hips to help resident sit up at edge of bed 5) Apply transfer (gait) belt before standing resident for transfer to wheelchair 6) Apply transfer (gait) belt over clothing with fit to allow for placement of flat hand only between belt and resident's body 7) Position wheelchair to allow for pivot with front interior wheel at side of bed, with chair parallel or slightly angled, before beginning transfer 8) Have the resident's feet (wearing shoes) positioned flat on the floor before standing 9) Ensure footrests raised, removed or swung out of way before transferring resident into wheelchair 10) Lock wheels before beginning transfer 11) Brace one or both of resident's lower extremities when assisting to stand 12) Grasp gait belt on sides or around back when assisting resident to stand and throughout transfer 13) Cue resident to stand 14) Turn resident upon standing so that back of legs are positioned centered against seat of wheelchair 15) Cue resident to hold onto armrest(s) before sitting in wheelchair 16) Provide controlled gentle lowering into wheelchair seat 17) Complete transfer with resident's hips positioned against the back of the wheelchair seat 18) Leave resident seated in wheelchair in proper body alignment and with feet repositioned on footrests

19) Remove gait belt after transfer complete	
20) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
21) Promote resident's social and human needs throughout procedure	
22) Promote resident's rights throughout procedure	
23) Promote resident's safety throughout procedure	
24) Promote resident's comfort throughout procedure	
25) Leave common use items within resident's reach at end of care (e.g., phone,	
glasses, remote, tissues, glass of water)	
Procedure completed successfully:	
Instructor	Date

Name:	Date of Hire:	

TURN AND REPOSITION A RESIDENT WHO MUST STAY IN BED.

	ONTO HIS/HER SIDE	J ,
Т	he resident is lying on his/her back in bed when care begins for this skill. The resident needs he support to remain in a side-lying position. The role of the resident is played by another car	
1)	Identify self to the resident when beginning care	
2)	Hold resident at hip and shoulder area when turning onto side	
3)	Position resident a safe distance from edge of bed when turned onto side	
4)	Position device (e.g., padding, pillow) against back rolled and tucked to maintain resident's side-lying position	
5)	Leave resident in side-lying position, avoiding direct pressure on hipbone	
6)	Use device (e.g., padding, pillow) to support top leg	
7)	Use device (e.g., padding, pillow) to maintain alignment of top hip	
8)	Leave top knee flexed	
9)	Leave ankles and knees separated	
10)	Leave resident in side-lying position with head supported by pillow	
11)	Leave resident's lower arm and shoulder free from being tucked under side	
12)	Support upper arm using padding or pillow	
13)	Leave resident covered with top sheet at completion of procedure	
14)	Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
15)	Promote resident's social and human needs throughout procedure	
16)	Promote resident's rights throughout procedure	
17)	Promote resident's safety throughout procedure	
18)	Promote resident's comfort throughout procedure	
19)	Leave common use items within resident's reach at end of care (e.g., phone, glasses, remote, tissue, glass of water)	
Pro	cedure completed successfully: Instructor	Date

Name:	Date of Hire:

PROVIDE MOUTH CARE TO A RESIDENT	
Identify self to the resident when beginning care	
2) Apply clean gloves before brushing teeth	
3) Wet toothbrush with water before brushing resident's teeth	
4) Apply toothpaste to toothbrush before brushing resident's teeth	
5) Brush tops and side surfaces of resident's teeth	
6) Use gentle circular motions when brushing side surfaces of resident's teeth and gums	
7) Brush, or offer to brush, the resident's tongue	
8) Provide resident clean water in cup to rinse mouth	
9) Hold basin or a cup (separate cup) near resident's chin to collect rinse water and spit	
10) Leave resident's mouth area clean and dry at completion of mouth care	
11) Use barrier (e.g., towel) to protect resident's clothing while providing mouth care and remove at completion of procedure	
12) Rinse and dry basin and rinse toothbrush before storing	
13) Dispose of used linen(s) and trash appropriately and leave overbed table dry at completion of procedure	
14) Remove gloves without contaminating self after rinsing and storing equipment	
15) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
16) Promote resident's social and human needs throughout procedure	
17) Promote resident's rights throughout procedure	
18) Promote resident's safety throughout procedure	
19) Promote resident's comfort throughout procedure	
20) Leave common use items within resident's reach at end of care (e.g., phone, glasses, remote, tissues, glass of water)	
Procedure completed successfully: Instructor Date	_

Name:	Date of Hire:

CLEAN AND STORE A RESIDENT'S DENTURE	
Identify self to the resident when beginning care	
2) Apply gloves before handling denture	
3) Use cool or tepid water when cleaning and rinsing denture	
4) Use toothpaste to cleanse denture	
5) Brush inner and outer surfaces of denture	
6) Rinse denture in water to remove toothpaste after brushing	
7) Place clean denture in denture cup filled with clean, cool or tepid clean water or denture solution	
8) Prevent contamination of denture throughout procedure(e.g., floating in sink water or setting denture directly on unprotected surface)	
9) Use technique to reduce the risk of denture breakage if dropped during cleaning (e.g., brushing denture directly over sink lined with washcloth/paper towel/towel, filled with water, inside basin)	
10) Drain sink and remove liner (if used) at the end of skill	
11) Rinse toothbrush, store equipment, and dispose of trash and used linens appropriately	
12) Remove gloves without contaminating self after rinsing and storing equipment	
13) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
14) Promote resident's social and human needs throughout procedure	
15) Promote resident's rights throughout procedure	
16) Promote resident's safety throughout procedure	
17) Promote resident's comfort throughout procedure	
18) Leave common use items within resident's reach at end of care (e.g., phone, glasses, remote, tissue, glass or water)	
Procedure completed successfully:	te

Name:	Date of Hire:

PROVIDE FINGERNAIL AND HAND CARE TO A RESIDENT	
1) Identify self to the resident when beginning care	
2) Use water to safe temperature for soaking hand	
3) Ask resident if water temperature is comfortable	
4) Soak resident's fingers in basin of water before cleaning or shaping nails	
5) Dry resident's hand, including between fingers, after removing from water and before cleaning under or shaping fingernails	
6) Dry resident's hand by patting with towel, not rubbing	
7) Use orange stick to clean under fingernails and remove residue	
8) Wipe orange stick on towel to remove residue before cleaning under another fingernail	
9) Use emery board to file fingernails	
10) Leave fingernail tips smooth and free of rough edges	
11) Offer or apply hand lotion to hand after fingernail care is completed	
12) Wear gloves when providing fingernail care and while rinsing and drying equipment	
13) Store equipment, dispose of used linen(s) and trash appropriately and leave overbed table dry at completion of procedure	
14) Remove gloves without contaminating self after rinsing and storing equipment	
15) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
16) Promote resident's social and human needs throughout procedure	
17) Promote resident's rights throughout procedure	
18) Promote resident's safety throughout procedure	
19) Promote resident's comfort throughout procedure	
20) Leave common use items within resident's reach at end of care (e.g., phones, glasses, remote, tissues, glass of water)	
Procedure completed successfully:	
Instructor	Date

Name:	Date of Hire:	

PROVIDE FOOT CARE TO A RESIDENT	
Identify self to the resident when beginning care	
Observe condition of skin on foot separating toes to check between toes and turns foot to look at heels before beginning foot cleansing	
Soak resident's foot in water contained in basin before cleaning or shaping toe nails	
4) Use water of safe temperature for soaking foot	
5) Ask resident if water temperature is comfortable before foot completely submerged	
Submerge foot in water with basin filled to level sufficient to cover foot completely	
7) Keep water in basin soap-free for use as rinse water by: (1) washing foot with washcloth with soap applied directly to the washcloth instead of adding soap into basin of water; or (2) using two separate basins of water: one for washing and one rinsing	
8) Wash resident's entire foot, including between toes with soapy washcloth after soaking	
9) Rinse to remove soap from foot and in between toes	
10) Dry resident's foot, including between toes, after removing from water and before cleaning under or shaping toenails	
11) Dry resident's foot by patting with towel, not rubbing	
12) Use orange stick to clean under nails and remove residue	
13) Wipe orange stick on towel to remove residue before cleaning under another toenail	
14) Use emery board to file toenails straight across	
15) Leave top edge of toenails smooth and free of rough edges	
16) Apply lotion to foot after nail care, avoiding lotion in between toes	
17) Wear gloves when providing foot care and while rinsing and drying equipment	
18) Store equipment, dispose of used linen(s) and trash appropriately and leave floor dry at completion of procedure	
19) Remove gloves without contaminating self after rinsing and storing equipment	

20) Use infection control measures and Standard Precautions to protect the resident and the CAREGIVER throughout procedure	
21) Promote resident's social and human needs throughout procedure	
22) Promote resident's rights throughout procedure	
23) Promote resident's safety throughout procedure	
24) Promote resident's comfort throughout procedure	
25) Leave common use items within resident's reach at end of care (e.g., phone,	
glasses, remote, tissues, glass of water)	
Procedure completed successfully:	
Instructor	Date