

## Unit 4

### **Everyday Health & Safety**

This course is designed to help participants understand they need to be aware of the basic principles of nutrition and hydration, the importance of handwashing, managing caregiver stress, preventing injury during a seizure, and back safety.

There are many topics around wellness that require in-depth knowledge so that those providing direct care can respond appropriately to health related challenges of people with intellectual disabilities and/or traumatic brain injury.

## Everyday Health and Safety Agenda

5 minutes	Introductions A. Course content B. Agenda/outcomes
20 minutes	Module I: Nutrition/Hydration DVD Section I
15 minutes	Module II: Personal Hygiene/Handwashing DVD Section II
10 minutes	Module III: Caregiver Stress DVD Section III
10 minutes	BREAK
45 minutes	Module IV: Health Management DVD Section IV A. Annual Health Screening Recommendations B. Health Review Checklist C. Awareness of Health Care Coordination VIDEO: <i>Communicating for Health</i>
10 minutes	BREAK
35 minutes	Module V: Seizures DVD Section V Video <i>Seizure First Aid</i>
10 minutes	Module VI: Back Safety DVD Section VI
10 minutes	Conclusions A. Review/Wrap up B. Evaluation

## Outcomes

### *Awareness of:*

#### **Module I – Nutrition/Hydration**

- The importance of good nutrition
- The need to offer choices that respect personal preferences while encouraging good nutrition
- People who have special diets that must be followed
- The benefits of regular exercise that is medically appropriate and individually selected
- Good dental care practices and how they can be encouraged.
- The importance of adequate hydration
- The consequences of improper hydration and nutrition such as bowel obstruction.
- Dysphagia and aspiration

#### **Module II – Personal Hygiene**

- The importance of handwashing

#### **Module III – Caregiver Stress**

- The advantages of stress management for everyone
- The benefits of regular exercise

#### **Module IV - Health Management**

- The important role that direct support professionals play in health care advocacy
- Annual Health Screening Recommendations
- Communication of observations made by persons providing direct care is ESSENTIAL
- The Health Review Checklist
- The Procedure for a Medical Appointment
- The importance of each individual's health and medical history.

#### **Module V – Seizures**

- Different types of seizure disorders and things that can be done to protect the person from injury.

#### **Module VI – Back Safety**

## New Hampshire Bureau of Developmental Services Introductory Training

### Introductions

- People's names, where they work, their positions.
- Course content – outcomes. Post outcomes clearly on easel paper or white board to make clear to participants that the expectation is that they will attain AWARENESS of the importance of:
  - Nutrition
  - Hydration
  - The need for regular exercise for both the individual and their caregiver
  - Managing caregiver stress
  - Each individual's health, medical history, and health management
  - The different types of seizures and preventing injury during a seizure
  - Back safety

Orient class to sections of the training?

## New Hampshire Bureau of Developmental Services Introductory Training

**I. Healthier Nutrition** – *People with developmental disabilities are at increased nutritional risk because of swallowing issues, drug-nutrient interactions, metabolic disorders, and decreased mobility. In addition, they may also be at risk due to insufficient income, limited nutrition knowledge, and/or caregivers may not provide an environment that promotes the intake of a nutritionally adequate diet.*

- a. Introduce food pyramid (Healthier Nutrition handout, MyPyramid handout.), [www.mypyramid.gov](http://www.mypyramid.gov) website
  - i. Inside the Pyramid – grains, vegetable, fruit, oils, milk, meat
  - ii. Portion Distortion
  - iii. Healthy Living Action Plan Worksheet
  - iv. One size doesn't fit all

### Start DVD Section I

- b. Challenge of people with disabilities – obesity. **STOP VIDEO** – ask people why individuals with DD are at increased risk for obesity – get participants to answer.
  - i. “Healthier food costs more” – yes, but with junk food, people are just eating empty calories.
  - ii. Co-ops, Co-op extensions – find out the resources in your area.
- c. Go over special diets:
  - i. Some individuals need to be on a low-sodium (low salt) diet. Explain that there needs to be a MD's order and information specific to that person's diet
    1. Additional resources: Sodium
  - ii. Swallowing difficulties – pureed diet, Thick-It (need MD's order). Review Dysphagia and Aspiration Observation Sheet (handout)
  - iii. Individual preferences – individuals can help by selecting their own foods. Individuals have the right to choice!
    1. Teaching moment – what if the individual wants to have the package of cookies? Take the individual to the grocery store and point out healthier snacks. Stay positive and suggest positively – lifestyle changes don't happen overnight.
- d. Allergies!
  - i. Should be written on ALL medication logs
  - ii. Need to find out all the information specific to the individual you're working with.
  - iii. Lactose intolerance?
  - iv. Medications can affect people's appetites
- e. Utilize dieticians whenever possible.

## New Hampshire Bureau of Developmental Services Introductory Training

- f. Understand this is an Introductory Training – this training is to give caregivers an “awareness” of important issues that people with developmental disabilities experience. More complex issues, such as diabetes, high blood pressure and other cardiovascular diseases will call for additional training with a more advanced approach.
- g. Additional resources section refers people to websites – individuals and support personnel can work together to review these.
- h. **Hydration - Re-start video** –Stop at Personal Hygiene

### i. Dehydration

- 1. What can cause dehydration?
  - a. Hot days, perspiring a lot
  - b. Fever
- 2. How much water per day? It also depends on the person’s medical condition. If a person has CHF (congestive heart failure) his or her fluids may be limited, vs. someone who is very active.
- 3. People can die from dehydration! Individuals taking medications like lithium can have increased lithium levels because of the dehydration, which can kill them.
- 4. Go over medical emergencies (handouts)
  - a. Dehydration Observation Sheet
  - b. Bowel Management Recommendations Sheet
  - c. Constipation Observation Sheet
  - d. Bowel Obstruction Observation Sheet

Start DVD Section II - stop at Caregiver Stress

II. **Personal Hygiene –**

- a. Handwashing! (5 Things You Can Do To Prevent Infection handout)– the single most important thing you can do to safeguard the health of yourself and others is to wash your hands –
  - i. After going to the bathroom
  - ii. Before meal preparation
  - iii. After handling poultry, eggs, etc.
  - iv. Before eating
  - v. After nose blowing, sneezing, coughing;
  - vi. Before and after personal care to self or others’
  - vii. On arrival to work in human services
  - viii. After dirty work (e.g., gardening, working on your care)
  - ix. After wearing gloves (Universal Precautions and Blood Borne Pathogen training given at another time)
  - x. Alcohol-based hand-sanitizers!!
  
- b. Grooming – supporting people with disabilities includes common sense:
  - i. Daily bath, shower, or thorough washing
  - ii. Deodorant use
  - iii. Clean clothes
  - iv. Tooth brushing 2-3 times per day with a soft-bristle brush. If the person is unable to complete this task on his/her own or avoids it, consider supporting/encourage better participation with:
    1. cueing
    2. a different style toothbrush: straight, angled, cushion grip, etc.
    3. an electric toothbrush
    4. a different kind of flavor of toothpaste or gel
    5. a pleasant flavored mouth wash with which to rinse
    6. gum stimulation is especially important for those whose seizure medications (e.g., Dilantin) may cause gingival hyperplasia: i.e., overgrowth of gum tissue. Those who are edentulous (toothless) continue to need gum stimulation and breath freshening.
    7. food can get caught in “pockets” and lead to periodontal disease and lead to cardiac problems (HANDOUT “Practical Oral Health Care for People with DD”)
    8. supporting people in cleaning dentures.
  - v. Help people project a positive image to others with:
    1. careful grooming
    2. scents/cosmetics
    3. age appropriate and seasonally appropriate stylish clothing and hair.

## New Hampshire Bureau of Developmental Services Introductory Training

- vi. Sometimes individuals are resistant to good grooming. Consider the following:
  1. resist a power struggle over the issue by allowing choice and encouraging invitation, such as:
    - a. Do you like to shower in the morning or evening?
    - b. Would you prefer to take a bath?
    - c. Have you ever tried (bubble bath, shower gel, a loofah, etc.)?
    - d. Ask why people don't like showering – tactile issues
  2. Point out the consequences of poor grooming:
    - a. Medical/dental problems
    - b. People not wanting to be around you
    - c. Loss of a job
  3. Grooming is an area where you can use instructional strategies while respecting personal preferences.

Start DVD Section III - stop at Health Management

**III. Caregiver Stress**

a. Classroom exercises:

i. List two signs of caregiver stress:

- 1.
- 2.

ii. List two strategies for coping with caregiver stress:

- 1.
- 2.

Answers:

Signs of caregiver stress	Strategies for coping with stress
Frustration	Exercise
Fatigue	Eat well
Irritability	Decrease alcohol/caffeine consumption
Body tension	Ask for help
Loss of sensitivity	See your supervisor
Illness	Take a break
Uncharacteristic physical/emotional abuse	Use leave time

b. Caregiver Stress Observation Sheet (handout)

c. If you're not taking good care of yourself, it will be more difficult for you to care for others!

d. Exercise is good for all – people with DD have a right to receive services that promote their health – Exercise Observation Sheet (handout). There are references to disability-specific videos available via the web:

- [www.lookiris.com/store/Developmental\\_Disabilities/Ease\\_Into\\_Fitness/](http://www.lookiris.com/store/Developmental_Disabilities/Ease_Into_Fitness/)
- [www.lookiris.com/store/Developmental\\_Disabilities/Walk\\_Your\\_Way\\_to\\_Fitness/](http://www.lookiris.com/store/Developmental_Disabilities/Walk_Your_Way_to_Fitness/)

**10 minute break**

Start DVD Section IV - stop at Seizures

#### IV. Health Management

- a. Direct Support Professionals – make a world of difference in people’s lives. You are the eyes and ears for all those involved with providing support for individuals with developmental disabilities and acquired brain disorders.

**Our goal is to enhance the quality of health care that individuals with disabilities receive through a focus on the important role that direct support professionals play in health care advocacy.**

- b. The National Alliance for Direct Support Professionals (NADSP) is a membership body of organizations and individuals who share a commitment to helping people who receive community human services to live self-determined lives. [www.nadsp.org/main/](http://www.nadsp.org/main/)
- c. Annual Health Screening Recommendations, NH Bureau of Developmental Services (handout) These recommendations were adapted from the Mass Health Quality Partnership's Preventive Health Standards to address the specific needs of people with intellectual disabilities. The recommendations provide valuable guidance to both direct support professionals and health care practitioners and serve as a valuable tool in assuring that individuals with intellectual disabilities receive age specific screenings.
- d. Health Review Checklist (handouts) Communication of observations made by persons providing direct care is ESSENTIAL!
  - i. Completed by direct support professionals and taken to every primary care appointment to aid in communication and follow up.
  - ii. Allows direct support professionals to respond to questions about easily observable indicators of health status.
  - iii. Provides the primary health care provider with important information to allow for proper diagnosis and treatment.
  - iv. The Health Review Checklist Guidelines are also here for a reference if you want more information about the signs of an individual’s health status.

- e. Speak UP! For a better and safer healthcare. (handout)

Everyone has a role in making health care safe. That includes doctors, nurses, individuals receiving supports and services, service coordinators and direct support staff and providers. You can make your care safer by being an active, involved and informed member of the health care team. Medical mistakes are a serious problem in the health care system. **In addition, people with disabilities are at higher risk for receiving health care that is less than adequate,**

**New Hampshire Bureau of Developmental Services Introductory Training**

***particularly if they or the person representing them is uninformed or not trained to represent individuals at health care appointments.***

- f. Play VIDEO: *Communicating for Health*
  - i. Don't go to a health care appointment unless you know why you are going!!
  - ii. Preparation for a MD appointment – this is a separate training, but information is here for review.

**10 minute break**

Start DVD Section V - stop at Back Safety

**V. Seizures**

- a. If someone is having a seizure for the first time, it is a medical emergency
  - b. Watch the 11 minute video Seizure First Aid (although this video is dated, it still contains excellent information!) and answer the following:
    - i. List three motions made by the body when a person is having a generalized (grand mal) seizure:
      - 1.
      - 2.
      - 3.
    - ii. List three important steps in seizure first aid:
      - 1.
      - 2.
      - 3.
  - c. When would you call an ambulance for a person who is having a seizure?
- 

- d. DISCUSSION:
  - i. Who has seen someone having a seizure? What did you see?
  - ii. Diastat – some protocols instruct that after a certain amount of minutes to get the diastat ready. Check to see if there is an MD order.
  - iii. There may be an order for sublingual Ativan.
  - iv. The person may have a vagal nerve stimulator that can be swiped with a magnet.
- e. Epilepsy Foundation (handouts)

## New Hampshire Bureau of Developmental Services Introductory Training

- i. Vagus Nerve Stimulation
- ii. First Aid
- iii. Seizure Recognition and First Aid Chart
- iv. Frequently Asked Questions
- v. Seizures Observation Sheet

### f. Questions:

#### **i. Can certain things trigger seizures?**

1. IN some cases, epileptic seizures can be triggered by things that happen in the environment. Seizures can be triggered by flashing lights of sudden changes from dark to light (or vice versa). Other people can react to loud noises or monotonous sounds, or even certain musical notes. It is important for people with Epilepsy to learn what kinds of events can trigger seizures for them.

#### **ii. Is it fatal?**

1. Epilepsy itself can cause death if prolonged repeated seizures (status epilepticus) are not treated properly. Such deaths are very rare, however. More common is death due to hazards or accidents that occur when someone has a seizure unexpectedly in a potentially dangerous situation.

#### **iii. What are “status” seizures?**

1. Status epilepticus is the term used to describe recurrent seizures without recovery of consciousness between attacks. This is a medical emergency and can be life threatening, or cause brain damage. Immediate action to get the necessary medical care should be taken.

#### **iv. Are there drug treatment for Epilepsy?**

1. Treatment of Epilepsy is primarily through the use of special anticonvulsive drugs. There are many different types of these drugs, and the type prescribed will depend upon the particular needs of the individual. The drugs are prescribed either alone or in a combination. The various drugs or combination of drugs control different types of seizures.

#### **v. Do these drugs have side effects?**

1. Many medication for Epilepsy have side effects. These can range from mild to severe, and will differ depending on the drug and dosage. Some of the more common side effects of antiepileptic drugs are: drowsiness, dizziness, nausea, irritability, and hyperactivity.

#### **vi. What is a “blood level?”**

1. "Blood level" refers to the amount of anticonvulsant in the blood. It is measured with a simple blood test and is used to help determine if a patient's symptoms may be due to toxicity or to side effects of medication. It is also used to determine if

the patient is taking enough medication to prevent seizures. The therapeutic range for different anticonvulsants has been determined by testing blood levels in thousands of patients whose seizures are controlled and who are not experiencing toxic effects.

**vii. What are the symptoms of too high a drug level?**

1. Too high of a drug level may cause a person to experience side effects such as drowsiness, confusion, breakthrough seizures, unsteadiness, and nausea. This may require a reduction in dosage or a change to a different medication.

**viii. Can Epilepsy affect intelligence?**

1. Seizures can affect intelligence, so prompt diagnosis and rapid control of seizures is important. There is also a risk if seizures are prolonged and there is a significant reduction in oxygen in the brain during seizures. However, these are extremely rare occurrences. In the case of developmentally delayed persons with Epilepsy, it is most likely that the cause of the developmental delay is also the cause of the seizures. In most cases, people with Epilepsy have normal intelligence.

**ix. Are there any disease that person with Epilepsy are more prone to?**

1. People with epilepsy who are on medications may experience side effects that makes them more susceptible to other diseases and disorders. One common condition is Hyperplasia, an over-growth of the gums caused by the drug Dilantin. Other common problems are liver dysfunction and depression.

Start DVD Section VI - Back Safety

**VI. Back Safety**

a. Consider and list three causes of back injury:

i.

ii.

iii.

b. List two ways of preventing back injury:

i.

ii.