

The Homecare Workers' Handbook



The essential guide to care in the home

The Homecare Workers' Handbook

The following includes some sample sections from the UKHCA Homecare Workers' Handbook. Please note that each section includes a small number of sample pages and so the sections are by no means complete.

A full copy of the Contents and Index pages are included to give you an appreciation of the breadth of information held within the full Handbook.

To purchase copies of the complete Handbook please visit: www.ukhca.co.uk/handbook

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Every effort has been made to ensure the accuracy of this handbook. However, UKHCA cannot accept responsibility for any errors of fact or omission. You should always take appropriate professional advice before taking action, or refraining from taking action, if you are in any doubt as to how to proceed in specific cases.

Contents

Introduction	1
About this handbook	3
1 Principles of good care practice	6
2 Standards and regulations in the homecare sector	8
3 Your role	12
4 Service users and their homes	18
5 Health and safety at work	32
6 Helping service users to move	46
7 What to do in an emergency	54
8 The human body and health	70
9 Mental health	96
10 Common health conditions	108
11 Supporting people with dementia	122
12 Supporting children and young people	134
13 Supporting older people	140
14 Supporting people with learning disabilities	144
15 End of life care	148
16 Helping service users with medication	156
17 Food and nutrition	168
18 Social and cultural life	188
19 Self-expression and sexuality	194
20 Washing and dressing	198
21 Continence and using the toilet	208
22 Household tasks and money management	218
23 Aids and adaptations	226
24 The social care team	236
Index	244



It is important to follow the actions of a risk assessment to minimise the risks to both yourself and the service user.

5 Health and safety at work

Both you and your employer have a legal responsibility to look after your health, safety and welfare while you are at work. As an employee, you also have responsibilities for your own safety and for the welfare of service users.

The rules about health and safety are outlined in the Health and Safety at Work Act 1974, and in detailed regulations such as the Management of Health and Safety at Work Regulations 1999.

Your employer's responsibilities

Your employer should have health and safety policies and procedures in place, which set out the things they will do to avoid risks to your health and safety, and that of others, while you are at work.

Policies and procedures should be available for all aspects of your work, including:

- Reporting accidents and injuries
- Moving and handling
- Infection control
- Using hazardous substances
- Working on your own – 'lone working'.

Your employer should provide you with, or give you access to, the organisation's health and safety policies and procedures. Make sure you read them and understand what they mean for you. Your employer should provide relevant training and guidance to help you to follow the policies and procedures that apply to your work.

All employers are required by law to assess the risks that their employees face in the workplace. In the case of homecare, the workplace usually means service users' homes. An assessment should identify significant risks and what needs to be done to reduce the risks. It is important to follow the actions identified in a risk assessment to minimise the risks to both yourself and the service user. You must also inform your supervisor whenever you think there is a new risk or a change to an existing risk.

Sometimes the agency may be asked to provide a service urgently, and there may not be enough time to carry out a risk assessment before you visit a person's home. In these situations, your employer should let you know that no assessment has yet been carried out. You should take special care and inform your supervisor immediately if you think there is any risk to you or to the service user.

Your responsibilities

As a careworker, you must take responsibility for your health and safety in the workplace, and the wellbeing of those around you.

- Always follow your agency's health and safety policies and procedures. Work in accordance with the instructions and training you have received on health and safety.
- Use equipment or protective clothing provided by your employer.
- Look out for potential risks or hazards and report them to your supervisor.
- If you think that your working conditions have changed in a way that increases the risk to your health and safety or that of the service user, inform your supervisor so that the situation can be reassessed.

Employed or self-employed careworkers

Careworkers are usually:

- employed by a homecare provider
- employed by a service user or
- self-employed.

This handbook assumes that the careworker is employed by the homecare provider. Much of the information it contains is relevant to all types of careworker, but the balance of responsibilities will vary. For example, where a service user employs a careworker they assume the responsibilities of an employer, including for health and safety. The precise differences between the types of arrangement are beyond the scope of this handbook.

Lone working

Most careworkers work on their own, which can make them more vulnerable to some types of health and safety risk. For example, you might have to travel in isolated or unlit areas, or deal with a service user or relative who is behaving aggressively. Employers should take lone working into account when carrying out risk assessments, and should make sure that you have regular supervision and training. Your employer or agency will have systems in place to minimise the risks of lone working. These might include:

- An on-call system so that careworkers can make contact with someone outside of normal working hours if necessary.
- A system where careworkers phone in to the office at set times or at the end of their shift.
- A 'buddy' system whereby two lone careworkers meet up together at certain times of day.

- Lone worker safety equipment, for example, a personal safety alarm or first aid box if you are working in remote areas.

It is important to follow the procedures that your agency or employer has put in place to protect your health and safety.

If you feel uncomfortable, threatened or unsafe in someone's home, leave as soon as you can and contact your agency for advice or help.

Chemicals and dangerous substances

Most of the household products that you use in a service user's home will not pose a significant risk to you or the service user, as long as the products are used and stored in line with manufacturers' instructions.

If you need to use a substance that is not a normal household product, consult your employer. They should make sure you have the information you need about how to use it and any precautions you should take, such as wearing gloves.

Never mix products together, even if you think that they are similar and they perform similar functions – for example bleach and some toilet cleaners. Mixing products together can produce dangerous fumes.

Make sure all products are kept in their original containers. If you are not sure what is in a container or if you can't read the instructions, do not use it. Take special care when storing substances in the home of a service user who is blind or partially sighted. Also, remember that someone who has lost their sense of smell may find it more difficult to identify substances.

Electricity

There are three main hazards associated with electricity.

1. Contact with live parts can cause shock and burns (normal mains voltage can kill).
2. Electrical faults can cause fires.
3. Electricity could be the source of ignition in an explosive atmosphere, for example, if there is a gas leak or there is medical oxygen present.

If you see that an electrical appliance in a service user's home is damaged or in a poor state of repair, do not use it and tell the service user and your employer about it.

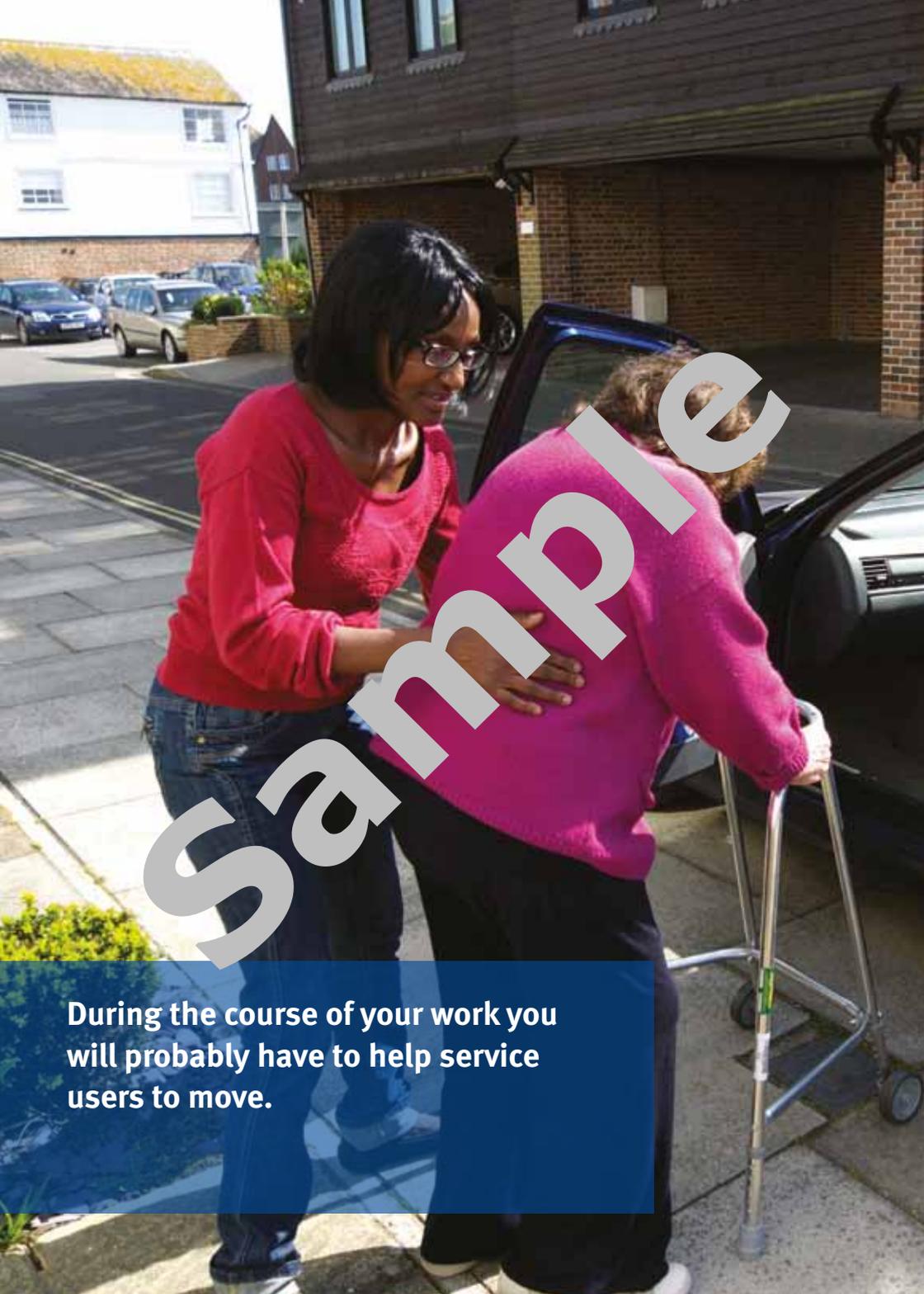
In an emergency you may need to know where to find the main electricity switch in your service users' homes. If electrical equipment gives off an unusual smell, appears to be overheating or is sparking, turn the electricity off at the main switch first, and then unplug the appliance.

If you are in any doubt about the safety of any electrical item, do not use it until it has been checked by someone who is qualified to do so.

Remember:

- To turn off fully any electrical appliances that don't need to be switched on all the time, with the service user's agreement.
- Not to use any electrical appliances in the bathroom, apart from those that are specially wired in.

To view the remaining 8 pages in this section please purchase a full copy from: www.ukhca.co.uk/handbook



Sample

During the course of your work you will probably have to help service users to move.

6 Helping service users to move

During the course of your work you will probably have to help service users to move – for example, to help them get out of bed and into a chair, or to use the bathroom. Your employer has a responsibility to make sure that you have the training, help, equipment and space to do this in a way that reduces the risk of injury to the service user, yourself or others.

As a careworker you also have a responsibility for your own health and safety and that of others, so it is vital to follow safe systems of working and inform your supervisor if there are any changes that affect your ability to move a service user.

Managing risk – employers' and careworkers' responsibilities

Where it is necessary to help a service user to move, your employer is responsible for carrying out a risk assessment. The risk assessment must be recorded as part of the service user's care plan. It should offer clear instructions on how the service user can be safely moved, taking into account the following points:

- The task to be carried out
- Information about the service user
- The environment (the working area)
- The careworker's ability to carry out the task

All risk assessments must be regularly reviewed. A review should also take place if the handling situation changes, reports show the situation is proving difficult, or if there is an accident.

It is your responsibility to:

- Follow safe ways of working as identified in training or by your supervisor.
- Make proper use of the equipment provided and tell your supervisor if it is broken or unsafe to use, or if you do not know how to use it.
- Let your supervisor know if there is a change in the service user's condition that could affect their safety or the safety of careworkers.
- Tell your supervisor if there is a change in your own health that affects your ability to move service users.

Your agency will have policies and procedures covering these requirements and should provide you with proper training in handling and moving service users during your induction. This chapter is intended to offer a helpful reminder.

Looking after your back

Think about ways of carrying out tasks that avoid bending your back, twisting or maintaining a static stooped position for any length of time.

Things to take into account before moving someone

Every service user's situation is different, and may vary from day to day, or even hour to hour. The service user handling assessment will have taken various factors into account to identify the tasks

required and whether there are any additional needs, such as a hoist or another careworker. You must also take into account the following points:

For the service user

- Particular problems or conditions the service user may have, such as arthritis or multiple sclerosis.
- Their size or shape – are they particularly tall, large or heavy? People who are overweight may sit or move in a different way to those of average weight, which could make a difference to the way you approach moving tasks.
- Their mental state – do they become confused or distressed easily?
- Can the service user help you to move them or follow prompts and instructions you give them?
- Posture – can the service user hold themselves upright?
- Sensory difficulties – can the person see or hear?
- Pressure areas – so that you can avoid friction or damage.
- Can the service user be moved without causing them pain?

For the working area

- Is there enough space to carry out the task safely?
- Are there obstacles in your way, especially things left on the floor?
- Furniture – is it large, heavy or awkward? Is it easy to move?

- Positioning – can you get behind the service user if you need to? How will you position the service user?
- Is there enough light?
- Are there different floor levels and surfaces to take into account?

For yourself

Finally, are you able to carry out the task? You can't learn to move and handle service users just by reading a book – your employer will provide training. You may also be able to take advantage of other courses that are available. This chapter should support and remind you as you go about your work.

Principles of safe moving and handling

There is always an element of risk when moving a service user, but by following the guidelines you can help to keep yourself and the service user safe.

- Before you begin, think about the whole process and work out what you need to do from start to finish.
- Encourage the service user to be as independent as possible.
- Always bend at the knee, not the waist. This allows your thigh and buttock muscles to do the work rather than putting all the pressure on your back.
- Make a stable base with your feet – ideally a medium stride apart, no wider than your shoulders.
- If working on a bed, stand with one knee on the bed to create a stable base.

- Keep as close as possible to the service user.
- Avoid twisting or jerking movements.
- Avoid twisting and bending at the same time.
- Always have your lead foot facing in the direction you are moving in to avoid twisting your back.
- Avoid stooping for long periods.
- Take your time and coordinate all movements and make sure everyone knows what to do and when to do it. Use clear, precise instructions, for example, “ready, steady” and then the action required such as “stand” or “slide”.
- Take extra care when helping a service user with stairs. Giving physical support to someone going up or down stairs could pose a risk to yourself or the service user. If the service user needs physical support to manage stairs, talk to your supervisor about how best their needs can be met.
- Always wear flat shoes and clothes that let you move freely. Remove sharp objects such as jewellery.
- Do not try to move anyone who is pulling back or resisting the move.
- Never allow the service user to put their arms around your neck.
- All moves that include holding a service user’s armpits are no longer considered safe.
- If you are in any doubt about your ability to move someone safely, do not try it. If you have any problems carrying out moves, talk to your supervisor about them.



Before you began your job as a careworker you will have been given some training on what to do in an emergency.

7 What to do in an emergency

Before you began your job as a careworker you will have been given some training on what to do in an emergency. You should also have been made aware of your employer's policies and procedures relating to emergency situations. You should look at these again from time to time to refresh your memory.

The following instructions are set out as briefly as possible in case you need to refer to them in an emergency.

Fire

- In the event of a fire, raise the alarm.
- Dial 999 and ask for the fire brigade, giving clear instructions about the location of the fire.
- If appropriate, help the service user to leave the premises if it is safe to do so.
- If safe to do so, close windows and doors to prevent fire and smoke spreading.
- It is usually safer to leave a building than tackle a fire yourself.
- Do not re-enter a building to collect personal belongings.
- Do not return to the building until the fire brigade has confirmed it is safe to do so.
- Report the incident to your supervisor as soon as it is safe to do so.
- Keep calm and reassure the service user.

Water leak or flooding

- Put a bucket or bowl underneath the flow of water if possible.
- Turn off the stopcock (the tap that controls the mains water supply to the flat or house) to cut off the water supply.
- If water is coming from the main water tank in the house, leave the bath tap running. If the stopcock has been turned off, the water in the tank will run out, temporarily stopping the leak or flood.
- Telephone your office or the emergency number of the water company that supplies water in the service user's area, if you know it.
- Use towels or other absorbent materials to mop up water – it is best to use things made of natural fibres, as man-made fibres are not very absorbent.
- Keep calm and reassure the service user.

Gas or fumes

- Gas is explosive and harmful to breathe. If there is a strong smell of gas, you should evacuate the building and raise the alarm.
- If you are able, open windows to let gases or fumes escape.
- Turn off any fires or cookers and DO NOT LIGHT matches, candles, tapers, cigarette lighters or anything else which could cause the gas to ignite.
- Turn off the main gas supply where it enters the house or flat.

- Do not turn on/off any electrical switches or use your mobile phone on the premises.
- If there are any electrical security entry phones/locks, please open door manually.
- Telephone the gas emergency number 0800 111 999.
- Telephone your office as soon as it is safe to do so.
- Try to identify the source of any fumes that are not related to the gas supply, if it is safe to do so.
- If the service user is having difficulty breathing, or is coughing, hold a damp cloth across their nose and mouth – do the same for yourself if needed.
- If the fumes continue to be a problem, consider going outside.
- Inform your supervisor as soon as it is safe to do so.

Electric shock

- **DO NOT TOUCH** a person if they are in contact with the electrical supply.
- Turn off the electricity supply at the mains.
- If you can't turn off the electricity, stand on a dry rubber mat, dry wooden block or book (such as a telephone directory) and use a wooden broom handle or something similar to push the person's limbs away from the electrical supply. **NEVER USE ANYTHING METAL.**
- Dial 999 for an ambulance.

- Treat the person for shock (see page 61).
- Inform your supervisor as soon as it is safe to do so.

Health-related emergencies

Is the person having a heart attack?

Does the service user have:

- severe chest pains?
- breathlessness?
- sudden faintness or giddiness?
- very pale or grey skin?
- blue lips?
- rapid pulse?

If so:

- dial 999 for an ambulance immediately
- sit the person up, if possible, with their knees bent (the 'W' position)
- give the person a 300mg aspirin tablet to chew slowly (unless there is a reason not to, for example, they are allergic to it). This will be recorded in the service user's care plan.
- keep the service user warm
- give plenty of reassurance.

Has the person collapsed, are they unconscious?

Tilt the head back, lift and hold the chin to keep their airway open.

Check if the person is breathing –

- Is their chest moving?
- Can you hear them breathing?
- Can you feel their breath?

If the person is breathing:

- Place the person on their side in the recovery position if this can be done safely.
- Dial 999 for an ambulance.
- Keep the person warm.
- Regularly check that they are still breathing.
- Administer first aid if you have been trained and in line with your organisation's policies.

If the person is not breathing:

- Dial 999 for an ambulance.
- Begin chest compressions.
- Using the heel of your hand only push down hard and fast in the middle of the chest at a rate of 100-120 per minute.
- Keep pushing and releasing at a regular rate until the ambulance arrives.

NOTE: Only administer CPR if you have previously received appropriate training.

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Sample

This chapter covers ways that people's bodies can change, or common conditions that they may develop.

8 The human body and health

This chapter describes the parts and systems of the human body. It describes how people's bodies can change, mainly as a result of getting older, but also because of general wear and tear, accidents, disease and the effects of disabilities, medical treatments and lifestyles.

Each section describes:

- What each part of the body does and sometimes, in simple terms, how it works.
- Ways that people's bodies can change, or common conditions that they may develop (mainly as a result of ageing).
- What this means for service users.
- What you should look out for and how you can help.

The skeleton, muscles and skin

The skeleton, along with the muscles and tendons that are attached to it, keep us upright and enable us to move. The skin provides a waterproof and infection-proof covering for the body.

What happens

- A person's bones may become brittle, which means they can break more easily. This condition, called osteoporosis, is more common in women than men.

- The discs between the bones of a person's spine may lose their water content or may become damaged. This can cause the spine to shrink or become curved and can cause pain and difficulty in moving.
- A person's joints can become misshapen because of diseases such as arthritis. This may mean the person cannot move their joints easily or quickly, and moving them becomes painful.
- A person's muscles may become less effective (or 'waste') because they don't use them very much or because they aren't getting enough nourishment in their diet. Some health conditions might mean that the person's muscles don't receive messages from the brain.
- As a person gets older, their skin is likely to become drier and thinner.

What this means for the service user

- Service users might become over-cautious because they are worried about breaking a bone. This can mean that they become less active.
- A lack of flexibility in the joints may mean that service users cannot move or bend easily. They might find it painful to move.
- It might be difficult or impossible for a service user to turn to look at someone.
- A service user's reactions might be delayed, or they may not be able to make the movements they want to make.
- The service user might find it difficult to hold or grip things. This means they could be more likely to drop things, or find it hard to do up buttons or hold a pen.

- A service user's skin could become cracked, sore or flaky.
- Even small cuts or grazes (particularly on a person's shin) can develop into ulcers.
- If a service user sits or lies in one position for a length of time, the pressure on one area of their body can lead to pressure sores.

What you can do

- Be firm but gentle when helping service users to move.
- Help to give the service user prescribed medication for pain relief if required to do so (see *Chapter 16 – Helping service users with medication*).
- Help the service user to sit or lie in a position that is comfortable and safe, using cushions, aids and other supports as necessary. If in doubt, you should talk to your supervisor about getting some advice from a physiotherapist.
- Look out for any changes in service users' skin, especially over bony parts of the body such as elbows, buttocks and heels. A change of colour or swelling could mean that a pressure sore is developing. If you spot these signs, talk to your supervisor straight away as the person may need immediate treatment.
- If a service user is not very mobile, encourage and help them to change position at least every two hours to avoid continuous pressure on the same parts of the body.
- Give service users extra time to do things like answer the door.
- Make sure service users can easily reach the things they need often, such as a walking stick, reading glasses or fluids.

- Talk to your supervisor if you think equipment or aids, such as a walking frame, would help a service user.
- Remember not to move furniture that has been put in special places, such as a kitchen stool that enables a service user to work at the sink or a chair that they use as a walking aid.
- Talk to your supervisor about contacting utility providers (ie the gas, water, electricity and telephone companies) for special aids such as Braille cooker controls, telephone stands and bells, if you think they would help a service user.
- Be patient if a service user's reactions and movements are slow.
- Be prepared for a service user's grip to be surprisingly strong – they may over-compensate because they are worried about losing hold.
- Make sure that a service user who is not able to move on their own is not sitting in a draught or too close to a fire.
- If a service user's clothes no longer fit because their body shape has changed, or if they find it difficult to get dressed or to do up fastenings, talk to your supervisor about getting their clothes altered or buying new clothes. (See *Chapter 20 – Washing and dressing*, for more guidance on helping people to get dressed.)
- Encourage service users to use hand or body lotion if they have dry skin. A community nurse may be able to recommend a lotion or cream that is particularly suited to older skin.
- If a service user has dry lips, suggest that they use a lip salve or cream.

- Encourage service users to have a balanced diet (but check in case they have been advised not to eat certain foods for medical reasons).

Hands and feet

Some of the information above applies to hands and feet, but there are some additional things you can do to help service users to maintain healthy hands and feet:

- Take special care to dry between a person's toes after washing their feet.
- Check the service user's toenails and look out for any uncomfortable hard skin. If their toenails or feet need attention, **DO NOT TRY TO DO THIS YOURSELF** – instead talk to your supervisor about contacting a chiropodist. Check the service user's fingernails and help them with cutting or filing their nails if necessary.
- Suggest removing (and replacing) any socks or stockings that are restricting a service user's blood flow.
- A service user who often has cold hands might benefit from wearing fingerless gloves, which provide warmth and still enable a person to hold and grip things.
- Make sure you don't tie a person's shoelaces too tight, as this could restrict the blood flow to their feet.
- Encourage service users to wiggle their toes and ankles to give them a little exercise and help their circulation. Encourage foot and hand exercises, such as gripping and releasing a tennis ball, which help people to keep their fingers supple and their muscles active.



Index

A

Abuse 7, 27, 28, 29, 135
 Abusive, violent or aggressive behaviour 34, 66, 67, 123, 127, 128
 Accidents 32, 70, 223, 227
 Accidents, reporting of 32
 Acute asthma attack 111
 Adaptations 51, 125, 204, 213, 226-233
 Adults with Incapacity Act 104
 Advance care plan 150
 Advance statement 150
 Agency (definition) 4
 Aggressive behaviour 34, 66, 67, 123, 127, 128
 Agitation, as sign of abuse 28
 Aids
 - *bedroom* 204, 230-231
 - *communication* 19, 233
 - *continence aids* 214-215, 238
 - *general* 125, 128-129
 - *hearing* 88, 90
 - *kitchen* 230
 - *living room* 232
 - *mobility (general)* 73
 - *moving and handling* 51, 72
 - *telecare* 233
 - *toilet* 213
 AIDS 117-118
 Aids and adaptations 51, 226-233
 Alcohol problems 132
 Alzheimer's 82, 114, 122, 131, 238
 Ambulance 39, 56, 57, 58, 59, 60, 62, 63, 64, 68

Anaemia 110
 Angina 116
 Anxiety 98, 99-100, 117, 127
 Appearance 97, 101, 203-206, 227
 Appropriate relationships 27, 137, 145, 195, 220
 Arm weakness 59, 120
 Arthritis 48, 71, 110, 237
 Assessment
 - *risk* 23, 33, 34, 46, 47, 201, 203, 221
 - *service user* 106, 158, 174, 209, 239, 241
 Asthma 43, 64, 65, 111, 134, 223
 Asthma, acute exacerbation 111
 Attorney 105
 Audiologist 237

B

Back, care (for careworkers) 47, 49, 50
 Bad breath (halitosis) 75, 93, 206
 Bath 55, 87, 200, 201, 205, 218, 222, 231
 Bathing 200-201, 205
 Bathroom 36, 38, 46, 201, 212, 213, 223, 230, 231
 Bedding 28, 40, 41, 215
 Bedding, waterproof 215
 Bed linen 41
 Bedpans 212
 Bedroom 230-231

Behaviour 18, 19, 26, 66, 67, 84,
101, 124, 127, 128, 132, 140, 145,
241

Bereavement 96, 153, 154

Best before dates 176, 177

Best interest decisions 106

Bet 220

Bills, paying 219

Bipolar disorders 102, 103

Bleeding 59

Blind or partially sighted 20, 35,
83, 85, 86, 87, 227, 230, 232

Blood vessels 78, 82, 112

Bones 70, 71, 87, 88

Bones, broken 63

Book holder 232

Borrowing 220

Bottle

- *aids for opening* 228
- *hot water* 62
- *poison* 63
- *medicine* 159
- *milk* 222
- *urine* 205, 214, 230

Boundaries, professional 27, 195,
220

Bradykinesia 119

Brain

- *brain and nerves* 82-84
- *cerebral palsy* 112
- *dementia* 113-115, 122
- *dysphasia* 115
- *and ear* 87
- *epilepsy* 115
- *and eye* 84
- *general* 71

- *and heart conditions* 78

- *and learning disabilities* 144

- *mental capacity* 104

- *multiple sclerosis* 118-119

- *and painkillers* 211

- *Parkinson's disease* 119

- *and reflex incontinence* 210

- *and stroke (CVA)* 78, 82, 115,
120, 122

- *tumour* 82, 115, 132

- *and unusual behaviour* 132

Bread 171, 73, 212

Breathing problems 56, 57, 58, 62,
78, 79, 98, 111, 118, 120, 149

Breathlessness 57, 111, 117

British Sign Language (BSL) 90

Bronchitis 43, 111

Broken bones 63

Broken equipment 47

BSL (British Sign Language) 90

Buddy system for lone workers
34

Budgeting 219

Burns 36, 37, 61, 75

Button hook 231

C

Cancer 134, 169

Carbohydrates 65, 66, 115, 168,
172, 173

Carbon monoxide detectors 38

Care and Social Services

Inspectorate Wales 9

Care Council for Wales 9

Care Inspectorate 9

- Care plan 22, 23, 46, 57, 64, 76, 81, 84, 104, 106, 108, 130, 135, 136, 137, 150, 158, 163, 174, 176, 183, 199, 209, 238
- Care Quality Commission 9
- Careworker
- *Self-employed* 3, 34
 - *Your role* 12-15
- Careworker (definition) 4
- Careworkers, regulation of 8, 9
- Cashpoint cards 219
- Cataracts 84, 85
- Catheter 214, 237
- CCTV 29
- Cellulitis 109
- Cerebral palsy 112, 242
- Cerebrovascular accident 82, 120
- Challenging behaviour 66, 127, 145
- Chemical reactions 37
- Chemicals 35, 178
- Chemist 233, 240
- Chest compressions 58
- Chest infection 109
- Chest pain 57, 99, 116, 117
- Chickenpox 41
- Child protection 137, 138
- Children (and young people) 134-138, 164, 200, 239, 241
- Chiropodist 74, 203, 237
- Choices 6, 12, 21, 26, 104, 105, 141, 144, 156, 168, 174, 185, 189, 198, 205, 218, 221
- Choking 59
- Circulatory system 77
- Circulation 74, 78, 79, 114, 116, 202, 226
- Cleaning
- *dentures and teeth* 77, 185, 202
 - *food hygiene* 182
 - *general* 222-223
 - *infection control* 40, 41
 - *kitchen knives* 179
 - *toilet spills* 81, 213
- Cleaning products 35, 178, 222
- Clothes rails 230
- Coastguard 39
- Code of practice 8
- Collapse 57, 58
- Commode, cleaning of 41
- Communication 19, 23, 86, 90, 124, 126, 145, 198, 233, 236, 242
- Community 12, 73, 81, 122, 144, 189, 209
- Community mental health nurse 122
- Community nurse 73, 81, 209, 237
- Community psychiatric nurse (CPN) 238
- Complaints 7, 25
- Complex carbohydrates 172
- Compliments 7
- Computer 232
- Confidentiality 7, 23, 24, 134, 136, 198
- Conflict of interests 26
- Confusion 110, 118, 123, 132, 151
- Conjunctivitis 85
- Constipation 76, 149, 170, 173, 211

Contenance 76, 77, 80, 81, 124, 208-216, 222, 238
Contenance adviser 81, 214, 238
Controlled drugs 156, 166
Cooking 41, 123, 146, 169, 175, 176, 177, 178, 179, 180
Coordinator (definition) 4
Coronary arteries 116
Cough 59, 78, 111, 113, 120, 240
Court Deputy 105
CQC 9
Creams 42, 61, 73, 159, 163, 164, 165, 166
CSSIW 9
Cultural heritage 189
Cultural holidays 189
Cultural life 188 -192
Culture 13, 19, 106, 124, 148, 190, 191, 192
Customer satisfaction survey 25
CVA 82, 120
Cystic fibrosis 113

D

Dairy products 171, 173
Dangerous substances 35
Death and dying 148-154
Death of service user 66, 150, 153, 166
Deep vein thrombosis 79
Dehydration 28, 132, 169, 170, 211, 215
Delusions 101, 102
Dementia 18, 20, 83, 104, 113, 114, 122-132, 140, 164, 169, 233, 238

Dementia with Lewy Bodies 114, 122
Dentures 64, 75, 77, 185, 205, 206
Deodorant 201
Depression 96-98, 102, 103, 119, 132
Diabetes 65, 82, 114, 115, 169, 238, 240
Diabetic neuropathy 82
Diarrhoea 42, 76, 113, 169, 216
Diet 71, 74, 75, 76, 83, 100, 115, 151, 168-176, 184, 191, 212, 238, 239
Dietitian 238
Difficulty breathing 56, 57, 111, 117
Digestive system 75, 76, 113, 173
Dignity 6, 13, 18, 77, 81, 128, 130, 131, 141, 148, 156, 198, 200, 202, 208, 212, 227
Discrimination 7
Discs 71
District nurse 237
Disposal of medicines 158
Diuretics 211
Domiciliary careworker 4
Doorbell amplifier (portable) 228
Dressing 61, 73, 146, 198-206 230
Dressing stick 230
Drugs 91, 92, 97, 98, 99, 102, 111, 125, 126, 132, 156, 166, 211, 237, 238, 240
Dry eyes 85, 87
Dysphagia 76, 119
Dysphasia 20, 115, 124

E

Ears 87, 88, 89, 157, 205, 206, 237
 Ear drops 157
 Ear wax 88
 Eggs 172, 173, 180
 Electrical appliances 36, 37, 204, 228
 Electricity 36, 37, 56, 73
 Electric shock 36, 56
 Electrical plugs with handles 228
 Electronic monitoring systems 21
 Emergencies 14, 36, 38, 39, 54-68
 Emergency, what to do 54-68

- *emergency first aid* 14, 165
 (see also First aid below)
- *fire* 37, 54, 73, 92
- *flood* 39, 55-56
- *health related* 57-66
- *999 (Emergency telephone number)* 39, 54, 56, 57, 58, 59, 60, 61, 62, 63, 64, 66, 67, 68, 120

 Emotional upset, as sign of abuse 28
 Employer (definition) 4
 End of life care 148-154
 Enemas 157
 Epilepsy 115
 Equipment, broken or unsafe 47
 Euphoria 102
 Evacuation 38, 54
 Eyes 84, 85, 86, 87, 157, 205, 239
 Eye drops 157

F

Facial weakness 59, 120
 Faecal incontinence 212
 Faintness 57
 False teeth (dentures) 64, 75, 77, 185, 205, 206
 Families 25, 26, 27, 29, 189, 195, 199, 209, 226, 239, 241
 Family carer 4, 25, 26, 27, 80, 130, 146, 237, 239
 Family doctor 98, 238
 Family members 7, 12, 25, 26, 108, 128, 136, 140, 153, 156, 164, 175, 183, 209, 218
 FAST 59, 120
 Fat 171, 172, 173
 Feedback 25
 Feet 49, 74, 82, 116, 117, 201, 202, 203, 229, 237
 Fibre (food) 171, 173, 212
 Fingernails 41, 62, 74, 203
 Fire 37, 54, 73, 92
 Fire brigade 34, 39, 54
 Fire extinguishers 37
 Fire guards 37
 Fire prevention equipment 37
 First aid

- *asthma attack* 64, 65, 111
- *bleeding* 59
- *choking* 59
- *heart attack* 57, 58, 79, 116, 117
- *shock* 56, 57, 61, 63
- *stroke* 59, 78, 79, 115, 120, 172, 242

 First aid box 35

Fish 171, 172, 173, 179, 180, 183

Five rights of medication
administration 160

Flooding 39, 55-56

Food

- allergies 238
- best before dates 176, 177
- carbohydrates 172
- cooking 179-181
- dairy products 171, 173
- dehydration 169
- and dementia 129
- for people with diabetes 65, 66
- digestive system 75-77
- eggs 172, 173, 180
- fat 172
- fibre 118, 171, 173, 212
- food groups 171
- fish 171, 172, 173, 179, 180, 183
- fruit 42, 65, 66, 170, 171, 173, 178, 182, 212
- general 74, 126, 151, 168-185, 218
- healthy eating 75, 168, 170, 171, 172, 173, 174, 238
- hygiene 40, 42, 176, 177, 178, 179, 180, 182
- importance of food 75
- and Incontinence 212
- infections from 108
- loss of appetite 29, 91, 93, 108, 151, 169
- malnutrition 168-169
- meal times 183
- meat 171, 172, 173, 177, 179, 180

- and medication 130

- menu planning 175

- pasta 171, 173

- planning meals 174

- preparation 178-179

- presentation 183

- problems eating or
swallowing 75

- pulses 172, 173, 180

- record keeping 185

- and religion 191

- and sense of smell 91-92

- for people in shock 62

- shopping 176, 221

- special dietary needs 176

- storage 177-178

- and the tongue 92

- use by dates 176, 177

- vegetables 42, 170, 171, 173,
177, 178, 182

Fractures 63

Frontotemporal dementia 114,
122

Fruit 42, 65, 66, 170, 171, 173, 178,
182, 212

Fumes 35, 55, 56

Functional incontinence 210

G

Gangrene 116, 203

Gas 36, 38, 55, 56, 73, 91, 92

Gas cooker controls 230

Gas fires 38

General Practitioner (GP)
(definition) 238

General Practitioner (GP)
 (general) 64, 65, 91, 98, 148, 156,
 165, 233, 240
 Giddiness 57
 Gifts 27, 220
 Glaucoma 85
 Good practice 6, 18, 156, 198
 Grab rails 213
 Grievance 15
 Grippers 228
 Grooming 203, 204

H

Halal 174, 191
 Halitosis (bad breath) 75, 93, 206
 Hands
 - *careworkers'* 40, 41, 90, 109,
 152, 178, 182, 199, 205, 206
 - *first aid* 60, 61
 - *washing / hygiene* 40, 41, 109,
 178, 182, 199, 205, 206
 - *service users'* 73, 74, 82, 99,
 116, 152, 185, 192, 229
 Hand washing (careworkers) 40,
 41, 109, 178, 182, 199
 Harmful substances 63, 222
 Hazardous substances 32, 35
 Hazards in the home 33
 Hazards, household 39
 Headscarves 191
 Health
 - *careworkers'* 14, 15, 47
 - *common conditions* 108-120
 - *emergencies* 57-66
 - *general* 12, 13, 23, 26, 149, 150,
 165, 168, 188, 215, 227, 236

- *human body and health* 70-93
 - *mental health* 18, 96-106, 238
 - *professionals* 148, 236-241
 - *sexual health* 195
 - *smoking* 25, 43, 44, 78, 240
 - *and special diet* 176
 Health and safety 15, 32-34, 46,
 47, 198
 Healthy eating 75, 168, 171, 172,
 173, 174, 238
 Health visitor 81, 239
 Hearing aids 88, 90, 237
 Hearing loss 88
 Heart (general) 59, 77, 78, 99
 Heart attack 57, 58, 79, 116, 117
 Heart disease 172, 238
 Heart failure 116, 117
 Helping hand 228
 Hiding medicines 164
 HIV 117, 118
 Hoist 48
 Home adaptations 51
 Hot water bottle 62
 Household hazards 39
 Household tasks 218-223
 Human body 70-93
 Human immunodeficiency virus
 (HIV) 117, 118
 Hydration 129, 151
 Hypertonia 112
 Hypo 65
 Hypoglycaemia 65
 Hypothermia 118
 Hypotonia 112

I

Immune system 108, 114, 117
Incontinence 76, 77, 80, 81, 207, 208-216, 222, 238
Independence 6, 12, 96, 141, 156, 239, 242
Indigestion 116, 117
Individuality 7, 12, 188
Induction training 3
Infection control 32, 40-42
Infections
– *bronchitis* 111
– *chest infections* 113
– *and dysphasia* 115
– *ear* 89
– *eye* 85
– *ungal* 237
– *and gangrene* 116
– *general* 108-109
– *and HIV / AIDS* 117-118
– *and incontinence* 210, 211
– *kidney* 79
– *lung* 78
– *nose* 91
– *and pneumonia* 120
– *skin* 203
– *urinary* 28, 132
Inhalers 64, 157
Injections 115, 159, 238
Injuries, as sign of abuse 28
Injuries, reporting of 32
Insoluble fibre 173
Insulin 114, 115
Insulin resistance 115
Insurance 14, 190
Irregular sleep patterns 29

J

Joints 71, 110, 226, 229
Joints Pain 110

K

Keys 24
Kettle and jug tipper 230
Kidneys 79, 170
Kidney stones 79, 170
Kosher 174, 191

L

Learning disabilities 18, 144-146
Legislation (Law) 9, 44, 104
Lending money to service users 220
Line manager (definition) 4
Liquid hand wash 40
Listening 19, 20, 98, 100, 209
Loans (from service users) 220
Loneliness 96, 140
Lone working 32, 34, 135
Loss of appetite 29, 91, 93, 108, 151, 169
Lotions 42, 156, 164, 166
Lottery tickets 220
Low carbohydrate diet 115
Low self-esteem 29
Lungs 77, 78, 81, 111, 113, 120
Lymphatic system 112

M

Main gas valve 38
Mains water supply 55
Makaton 90, 146
Malnutrition 168-169

- Mania 102
- Manager (definition) 4
- Managing emergencies 54-68
- Manic depression 102, 103
- Manual handling aids 51
- MAR (Medication administration record) 130, 158, 159, 160, 161, 162, 163, 164
- Meal planning 174
- Mealtimes 75, 129, 151, 168, 170, 183 (Food and nutrition 168-185), 191
- Meat 171, 172, 173, 177, 179, 180
- Medical oxygen 36
- Medication
 - *angina* 116
 - *assisting children* 164
 - *asthma* 64
 - *checking medication* 160
 - *controlled drugs* 156, 166
 - *covert administration* 164
 - *and dementia* 129, 130
 - *and end of life care* 151
 - *general* 42, 72, 83, 101, 105, 108, 129, 156-166, 239
 - *mental health* 96, 238
 - *over the counter (OTC)* 156, 157, 163, 164
 - *policies and procedures* 157-158
 - *prescription medication* 156, 157, 159, 164
 - *PRN (as required)* 157, 158, 163
 - *reporting errors* 165
 - *schizophrenia* 100
 - *storage and disposal* 166
 - *supporting service users take medication* 161
- Medication administration record (MAR) 130, 158, 159, 160, 161, 162, 163, 164
- Medication errors 165
- Medicines 42, 130, 156, 157, 158, 159, 161, 162, 163, 164, 165, 166, 240 (Helping service users with medication 156-166)
- Medicines, covert administration 164
- Medicines, hiding 164
- Mental capacity 103-106, 174, 200
- Mental Capacity Act 104
- Mental health 96-106, 122, 188, 238, 241
- Menu planning 174, 195
- Microwave 175, 181
- Milk 66, 77, 161, 172, 222
- Minerals 168, 171, 173
- Mirrors 223, 231
- Mobile phone 21, 24, 56
- Mobile tray 229
- Mobility 38, 46, 72, 86, 124, 145, 169, 200
- Money 27, 28, 102
- Money and household tasks 218-223
- Monitored dosage system 159, 161, 164
- Mood 18, 65, 102, 103
- Mood swings 102
- Motor insurer 190
- Motor neurone disease 118

Mouth 75, 92, 93, 109, 149, 151, 169, 170
Moving and handling 32, 43, 46-51, 198, 213
Multiple sclerosis 48, 82, 118-119
Muscles 49, 70, 71, 74, 76, 80, 83, 98, 110, 111, 112, 118, 119, 168, 169, 170, 210, 211, 212, 226, 240
Muscle wasting 71, 110, 169
Myocardial infarction (see also Heart attack) 117

N

Nebulisers 157
Neglect 7, 28
Nerves 82, 88, 91, 118, 119
Nervous system 82, 83, 112, 118, 210
Neuropathy 82
Non-slip mat 204, 205, 228, 232
'No reply' procedures 67
Nose 81, 91, 111, 157, 159, 205
Nose drops 157, 159
Nutrition 75, 129, 168, 238 (Food and nutrition 168-185)

O

Obese service users 48
Obsessive compulsive disorder (OCD) 99
Occupational therapist 200, 226, 232, 233, 239
Occupational therapy departments 233
Older people, supporting the needs of 140

Ophthalmic practitioners 239
Optician 239
Optometrists 239
Orthotist 240
Osteoporosis 70
Outcomes 22
Overdoses 158
Overflow incontinence 210
Over the counter (OTC) medication 156, 157, 163, 164
Overweight service users 48
Oxygen 36, 37, 77, 78, 114, 144, 157, 240

P

Page turner 232
Pain 48, 57, 63, 71, 72, 79, 80, 82, 83, 89, 99, 108, 110, 116, 117, 118, 127, 148, 151, 152, 163, 169, 206, 211, 227
Parkinson's disease 82, 119, 132
Passive smoking 43, 44
Pasta 171, 173
Pegs 227, 228
Pelvic floor muscles 80
Personal alarm 35, 67
Personal carer 4
Personal choice 6
Personalisation 21
Personal relationships 27, 194
Pharmacist 156, 160, 161, 162, 163, 166, 240
Phobias 99
Physiotherapist 72, 240
Planning healthy meals 174
Pneumonia 120

- Podiatrist 237
- Poisons 63
- Police 39, 68
- Policies and procedures
- *child protection* 135, 137, 138
 - *confidentiality* 23, 134, 136
 - *emergency* 54
 - *food hygiene* 182
 - *general* 14
 - *gifts* 27, 220
 - *grooming* 203, 204
 - *health and safety* 32, 33
 - *infection control* 40
 - *lone-working* 21
 - *medication* 156, 157, 159, 162
 - *medicines* 42
 - *mental capacity* 105
 - *mobile phones* 24
 - *money handling* 222
 - *moving and handling* 47
 - *no reply* 67
 - *placing bets* 220
 - *relationships with families* 136
 - *reporting abuse* 29
 - *smoking* 43, 44
 - *water temperature* 201
- Post-traumatic stress disorder 99
- Potatoes 171
- Power of Attorney 149
- Prescription medication 156, 157, 163, 164
- Pressure areas 48, 240
- Pressure sores 28, 72
- Principles of good practice 6, 18, 156, 198
- Privacy 7, 13, 23, 24, 128, 131, 156, 195, 198, 200, 202, 208, 213
- PRN medication 157, 158, 163
- Professional boundaries 27, 220
- Professional relationships 27, 195
- Prostate gland 80, 210
- Prosthetist 240
- Protective clothing 33, 178, 199
- Protein 168, 171, 172
- Psychiatric nurse 238
- Psychiatrist 241
- Pulses (food) 172, 173, 180
- R**
- Record keeping 22, 132, 158, 164, 185
- Records 14, 22, 23, 24, 129, 130, 160, 162, 165, 166, 185, 219, 222
- Reflex incontinence 210
- Regulation and Quality Improvement Authority (RQIA) 10
- Regulation of careworkers 8, 9
- Regulation of workforce 8, 9
- Regulator 6, 8, 9, 10, 23, 29
- Regulatory body 6, 8, 9, 10, 23, 29
- Rehabilitation engineer 241
- Relationships 27, 102, 194, 195
- Relationships with service users 27, 195
- Religion 7, 124, 175, 190, 191
- Remote control 232
- Reporting 13, 29, 32, 98, 100, 101, 103, 158, 165
- Reporting accidents or injuries 32

Reporting errors and incidents 165
Respect 6, 141, 144, 148, 153, 168, 174
Respiratory and circulatory system 77
Respiratory problems 57
Respite care 25
Responsibilities 8, 14, 32, 33, 34, 46, 209
Restricted movement 110, 112, 118, 119, 230, 232
Reviews (of service) 25
Rice 171, 173
Rights 6, 8, 12, 106, 144, 160, 198
Risk assessment 23, 33, 34, 46, 47, 201, 203, 221
RQIA 10
Rubber fingers / Rubber thimbles 229

S

Safe 7, 14, 20, 46, 47, 49, 50, 54, 56, 57, 68, 72, 126, 149, 157, 159, 166, 223
Safe environment 14
Safety 14, 15, 25, 32-44, 46, 47, 67, 68, 128, 138, 198, 200 -201
Saturated fat 172
Scalds 61
Schizophrenia 100, 132
SCSWIS 9
Security 23, 24, 56
Self-employed careworker 3, 34
Self-expression 194
Self-harm 97

Self-neglect 97
Sensory difficulties 48, 84-93
Service user (definition) 4
Service user records 22, 23, 24, 129, 130, 160, 162, 165, 166, 185, 219, 222
Sex organs 79, 80
Sexual health 195
Sexuality 27, 194-196
Sexual orientation 7, 194
Shaving 204, 205
Sheepskin 229
Shingles 41, 42
Shock 36, 56, 57, 61, 63, 67
Shoes (careworkers) 50
Shopping 146, 174, 176, 185, 190, 219, 221, 222
Shower 198, 200, 201, 205
Simple carbohydrates 173
Skeleton 70
Skin 28, 41, 57, 61, 62, 70, 71, 72, 73, 74, 78, 81, 83, 110, 149, 151, 152, 159, 163, 165, 169, 170, 200, 201, 203, 205, 215, 226
Skin creams 42, 61, 73, 159, 163, 164, 165, 166
Sliding board 229
Smoke alarms 37, 38
Smoking 25, 43, 44, 78, 240
Social life 188
Social worker 241, 242
Soluble fibre 173
Sores 28, 72, 75, 108, 240
Special dietary needs 174, 176
Specialist professional, continence advisor 80

Speech and language therapist 242

Speech problems 59

Spinal discs 71

Stairs 39, 50

Starchy food 171, 172

Stocking or sock gutter 205, 231

Stoma 214

Stopcock 39, 55

Stress incontinence 211

Stroke 59, 78, 79, 82, 115, 120, 122, 131, 172, 242

Suction mats 231

Suicide 97

Supervisor (definition) 4

Support worker 4

Suppositories 157, 159

Surveillance 29

Survey 25

Swallowing 76, 119, 242

Symptoms (for)

- *angina* 116
- *arthritis* 110
- *asthma* 111
- *bi-polar disorder* 102
- *cystic fibrosis* 113
- *dehydration* 170
- *dementia* 113, 123
- *diabetes* 65
- *diabetes (type 2)* 115
- *end of life* 148, 149, 151
- *gangrene* 116
- *heart attack* 117
- *heart failure* 117
- *hypothermia* 118
- *infections* 108

- *malnutrition* 169
- *mental health problems* 96
- *motor neurone disease* 118
- *multiple sclerosis* 119
- *Parkinson's disease* 119
- *pneumonia* 120
- *schizophrenia* 100
- *stroke* 59, 120

T

Talcum powder 81, 201

Talking 15, 19, 90, 100, 102, 122, 124, 125, 127, 131, 189

Talking therapies 96, 98, 102

Tall stools 229

Tap fittings, long handled or enlarged 230

Tasks

- *general* 3, 6, 12, 13, 26, 103, 126, 242
- *household and money* 218-223
- *intimate or personal* 13, 131, 198, 200, 204, 205-206, 237
- *moving* 46, 47, 48, 49
- *people with learning disabilities* 144, 145
- *supporting service users to do tasks* 103, 125, 141, 199, 226, 227, 239

Taste 75, 83, 91, 92, 93

Team leader (definition) 4

Team members 236

Teeth 64, 75, 77, 169, 185, 205

Telecare 233

Telehealth 233

Telephone 73, 90, 189, 228, 232

Telephone receiver stand 232
Terminal care 148-154
Thermostatic mixing valve 200
Thrombosis 79
Time-sheets 21
Tinnitus 89
Toilet, using the 205-206, 208-216
Toenails 74, 203
Tongue 92, 169
Toothpaste dispenser 231
Toilet seats 231
Toothbrush handles 231
Trachea 78
Transfer sling 229
Transport 44, 169, 190
Tray 228, 229, 232
Tremor 119
Trip hazards 39
Trolley 229
Tumours 82, 92, 112, 115, 132
Tunnel vision 85, 86
Turban 191

U

UKHCA (United Kingdom Homecare Association) 1, 3, 8, 25
Unconscious 57, 64, 66, 112, 118
Unsafe equipment 47
Unsaturated fat 172
Urge incontinence 210
Urinary incontinence 208, 210-211, 212
Urinary infection 28, 109, 211
Urinary system 79
Urine 79, 81, 92, 109, 170, 206, 208, 210, 211, 214, 215, 216, 230

Urine bottle 214, 230
User satisfaction survey 25

V

Vagina 80
Vascular dementia 114, 122
Vegetables 42, 170, 171, 173, 177, 178, 182
Violent behaviour 34, 66, 67, 123, 127, 128
Vitamins 168, 171, 173
Vitamin B1 deficiency 132
Vocational qualification 6, 24
Vomiting 42, 169

W

Walking 110
Walking aids 73, 240
Walking frame 73
Walking stick 72, 229
Washing

- *clothes* 81
- *eyes* 84
- *food* 42, 178, 182
- *hands (careworkers)* 40, 41, 109, 178, 182, 199
- *kitchen utensils* 42, 179, 182
- *service users* 74, 81, 125, 146, 198, 200-201, 205, 215, 229
- *service users - checklist* 205-06
- *service users in bed* 204
- *wheelchair cushions* 215

Washing Machine 41

Water

- *for bathing* 201, 204, 205
- *for burns* 61
- *for cleaning* 41, 179
- *for cleaning food* 178
- *for drinking* 151, 161
- *hand washing (careworkers)*
40
- *hazards* 38-39
- *in foods* 170
- *leaks, flooding and spills* 39,
55, 200, 205
- *providers* 73
- *stopcock* 39, 55
- *supply (into the property)* 39,
55
- *water carried infection* 108
- *temperature* 201, 205

Waterproof

- *bedding* 215
- *dressings (for a cut)* 40
- *gloves and aprons* 41

Webcam 29**Wheelchair**

- *accessible* 190
- *advice* 240
- *assessments* 239
- *use* 213, 215, 229, 230

Wheelchair commode 231**Wheezing** 111**Wills and bequests** 220**Windpipe** 78**Witnessing wills and documents**
220**Workforce regulator** 8, 9**Y****Young people** 134-138, 241**Z****Zimmer frames** 39**Zip Hook** 231



United Kingdom Homecare Association (UKHCA) is the national professional and representative association for organisations who provide care, including nursing care, to people in their own homes. UKHCA members benefit from a range of services designed to help them make a difference, including:

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