MAE001

Health Care Assistant Program

PROVINCIAL CURRICULUM 2015

BRITISH COLUMBIA

Ministry of Advanced Education

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INTRODUCTION

As a result of the revised Health Care Assistant (HCA) Core Competency Profile of March 2014, the Ministry of Advanced Education (AVED) requested BCcampus' expertise to project manage revisions to the BC Health Care Assistant (HCA) Curriculum Guide (2008). Revisions to the Guide were carried out during the fall of 2014 with the guidance of a Steering Committee comprised of representatives from various stakeholder groups (see Appendix I). Consultation also occurred with other stakeholders, such as the HCA Articulation Committee. The revised Guide, as recommended by the Steering Committee, was then presented to AVED and the Ministry of Health (MoH) for final approval.

Background

In December 2006, the former Ministry of Health funded the development of **The Care Aide Competency Project** (CACP). The goal was to develop occupational competencies and standards for Health Care Assistants (HCAs)[1] in British Columbia. Known by a variety of titles, including Community Health Workers (CHWs) and, at that time, Resident Care Attendants (RCAs), HCAs were, and continue to be, the front-line care providers in a variety of settings. In 2006, most HCAs were employed in Home and Community Care (including residential and assisted living) settings.

Because HCAs are neither licensed nor monitored by a regulatory body, they have no legally defined scope of practice. There needed to be a clear understanding of the roles and responsibilities of these positions. Descriptions of how people go about their work and the education needed to perform in a safe and competent manner had not been previously undertaken for this sector. The resulting Framework of Practice document provided a comprehensive picture of the work done by HCAs and identified the competencies required for safe, proficient performance of the job role.

The HCA Program Provincial Curriculum (2008) built on the 1992 Provincial Home Support/Resident Care Attendant (HS/RCA) Curriculum Guide and incorporated the basic HCA competencies and practice standards identified in the Care Aide Competency Project (CACP) completed in July 2007. The Curriculum addressed the changes in the health care system and practice environment for HCAs. The client populations they cared for were increasingly medically fragile, cognitively complex, and diverse in age and

[1] In BC, the term HCAs is used to describe a variety of workers including, but not limited to, the following job titles: Assisted Living Workers, Community Health Workers, Resident Care Attendants, Care Aides, Home Support Workers, and Personal Support Workers.

personal care requirements. This older population was increasing in numbers and becoming sicker, many with multiple chronic health challenges. In addition, acute care facilities were beginning to utilize HCAs in an increasingly wide variety of roles within hospitals, including personal care provision to acutely ill patients. Finally, with the move to assisted living, HCAs were being asked to take on additional tasks, many of which the previous curriculum did not prepare them to perform.

The HCA Program Provincial Curriculum Guide (2008) provided clearly stated standards for education in terms of curriculum and a mechanism for the standardization of HCA education within the province.

Current Guide Revisions

Since 2008, the working environments of HCAs have continued to evolve. The complexity of client populations continues to increase. More HCAs are being employed in acute care settings and they are providing care for more acute clients than in the past.

As part of the Ministry of Health's policy work, it is responsible for reviewing HCA competencies on a regular basis to ensure that basic competencies are meeting the needs of clients,[2] families and the health care system as a whole (excerpt from the *Core Competency Profile 2014, p.3)*. An updated B.C. Health Care Assistants Core Competency Profile was completed in March, 2014.

The Competency Map Working Group, a subgroup of the HCA Curriculum Guide Revisions Steering Committee, examined the BC Health Care Assistant Curriculum Guide (2008) and identified gaps in relation to the 2014 Competency Profile. An environmental scan was conducted of the current education available to HCAs in relation to the acute care settings, as this was a clearly identified gap.

Through a process of stakeholder consultation and discussions, the Steering Committee produced recommendations which outlined the needed revisions to the Guide. Additional content includes an introduction to acute care settings through theory and laboratory practice. A practice education experience in acute care is not included in the current curriculum revisions. The recommended changes are included in this document, the BC Health Care Assistant Curriculum Guide (2015).

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[2] The term *client* is used throughout this document to indicate an individual or group of individuals who require personal care and support services from HCAs. It is used inclusively in this document with an understanding that, in some clinical settings, the client may be referred to as a patient or a resident. Where this term is used, it should be taken to mean anyone receiving care.

A Health Care Assistant Program Provincial (2015) Ancillary Resources Supplement has also been produced to support the delivery and assessment of required learning outcomes[3]. In this separate accompanying document, sections include:

1. Suggested learning strategies, approaches to assessment and resources for each course.
2. Supportive materials for the development of HCA students' fundamental computer literacy skills.
3. Additional acute care content and recommended course curriculum adjustments.

[3] Minimum educational delivery standards have been set out in the published Health Care Assistant Program Recognition: A Guide for Educators, providing a framework for the assessment and recognition of BC HCA programs.

VALUES, BELIEFS AND PRINCIPLES

Health Care Assistants

HCAs are prepared to work in a variety of health care facilities and community agencies. They are important and valued members of the health care team.

> *HCAs promote and maintain the health, safety, independence, comfort and well-being of individuals and families. HCAs provide personal care assistance and services in a caring manner that recognizes and supports the unique needs, abilities and backgrounds of clients and their families. They work as members of a health care team in a variety of settings with direction and supervision from regulated health care professionals.*[1]
>
> (Excerpt from B.C. Health Care Assistants Core Competency Profile, Government of British Columbia, March, 2014, p. 5)

The work done by HCAs is based on a set of fundamental values, beliefs and ethical principles that are consistently reflected in all aspects of their work with clients, families, team members and others. Amongst these core values, beliefs and principles, which serve as foundations of HCA practice, are those related to:

- Human Beings
- Older Adults
- Health and Healing
- Health Care
- Caring and Caregiving
- The Family in Health and Healing

Human Beings

All individual humans are holistic beings consisting of physical, cognitive, psychological, social and spiritual dimensions. All people have unique perceptions of themselves and others that shape their experiences, responses and choices. Factors that may influence a person's perceptions include one's life experiences, values, socio-cultural/ethnic background, gender, abilities, resources and developmental level.

Humans, of all ages, are constantly changing as they interact with others and with the world around them. As well, people move through definable developmental transitions as they grow and change across a lifespan. Each developmental transition brings forth

certain tasks which are defined and influenced by one's family, culture, gender and social cohort.

Aging is a normal developmental process of human life. It involves a series of physiological, psychological and social transitions that start at birth and continue throughout life. As we age, our abilities, potentials, possibilities and goals can be expected to change. Nevertheless, each person's potential for growth and development exists throughout life.

Older Adults

Later adulthood can be viewed as a potentially fulfilling and enlightened time of life. For many people, aging gives rise to insight, creativity and serenity which can provide the foundation for true self-fulfillment.

As adults move into their later years, they do not become a homogenous group. Despite social perceptions, older people are not all alike. If anything, people become less similar as they get older. Older adults have a wide variety of interests, life experiences, backgrounds and values. Each older person must, therefore, be viewed and valued as a unique individual.

The experience of a long lifetime provides an older person with a special perspective based on years of learning and living. The older adult needs to be valued for the person s/he is as well as the person s/he has been in the past. Every older person has a life story, a wealth of experience, which is part of who that person is today.

Within Western cultural values, independence is valued and viewed as a desired goal for everyone to attain and maintain. This strong societal value sometimes makes it difficult for those older adults who experience declining health to relinquish independence. Paradoxically, however, independence is often fostered through interdependence. Interdependence involves mutually supportive relationships that acknowledge each person's capabilities and potentials while also providing support when and where needed. This sort of interdependency enables older individuals to feel valued and recognized despite their need for assistance.

Negative attitudes and stereotypes about any group of people are detrimental. In the case of our older citizens, negative attitudes and stereotypes may contribute to inaccurate beliefs such as: all older people suffer from markedly diminished physical and/or mental abilities; all older individuals will become dependent on others; older individuals are incapable of change; and older people are a drain on society. How we interact with older people will influence how they see themselves. We all have a role in breaking down stereotypes and unhealthy negative attitudes.

Health and Healing

The World Health Organization's (WHO) definition of health as a complete state of physical, mental and social well-being, and not merely the absence of disease or infirmity has gained widespread acceptance. The WHO further defines health as "the extent to which an individual or group is able on the one hand to realize aspirations or needs and on the other, to change or cope with the environment." Health, in this point of view, is seen as a resource for everyday living, not an objective of living. It is a positive concept which emphasizes psychological, cognitive, social and spiritual resources as well as physical capacity.

Health and healing co-exist. Healing is not simply viewed as movement along a continuum from illness to health. Healing is the process of enhancing health and responding to challenges. Challenges may be in the physical, psychological, cognitive, social and/or spiritual dimensions of health. During the healing process, resources are mobilized, hardiness is enhanced, and vulnerability is minimized.

Health Care

The right to comprehensive health care for all is highly valued by Canadian society.

Health care services include health promotion along with preventive, curative, rehabilitative and supportive services. Health care consumers need to have access to those services that meet their needs at any given time.

People have the right and responsibility to be full participants in making decisions about and looking after their own health and the health of their family. The health care practitioner serves to facilitate the individual and family's ability to make informed choices and be actively involved in decision-making related to health care options.

Caring and Care-giving

Caring, in an interpersonal context, implies a genuine concern for the well-being of another person. Caring may take the form of courtesy, kindness or compassion. It may involve acknowledgement, encouragement and giving genuine praise. It may also show itself through interpersonal warmth, cheerfulness and gentle humour.

A caring act is always an expression of reverence for the basic value and dignity of another person. As such, it will never be possessive or patronizing. Caring never promotes unnecessary dependency.

The need and desire to give and receive care is rooted in our very nature as human beings. Babies who are not adequately cared for have been known to experience developmental delays, physical illness and even death. Caring is essential for optimum human growth and development. Without adequate human caring in our lives, we cannot reach our potentials as human beings.
The human capacity for caring needs to be nurtured in order for it to develop and blossom. In order for us to become caring human beings, we must experience caring interactions with others. Caring brings forth caring.

Within a formalized care-giving role, opportunities to express care are many and they are seldom dramatic. Care providers display caring in a multitude of small ways – a kindly word, a caring touch, a helpful gesture. As caring blossoms, the valuing of the recipient of care is increased, as is the valuing of the care-giving role itself.

In their work with clients and families, HCAs actualize a caring approach in many ways. They:

- View the client as a whole person with a past, present and future. The client is viewed as a member of a family, a community and a culture – an entirely unique human being.
- Strive to understand what is meaningful to the client and assure that the client's values and beliefs are respected.
- Assist clients to meet those basic human needs which the client is unable to meet unaided.
- Respect the client's privacy and confidentiality.
- Communicate effectively, using active listening and empathic responses.
- Respect the client's potential and promote personal growth by offering information, choices, opportunities and assistance.
- Acknowledge the right of each client to participate in their care.
- Include the clients, as much as possible, in decisions which affect them.
- Respect the role that families play in the promotion of healing.
- Act as caring advocates on behalf of the client when necessary and appropriate.
- Display honesty and integrity in all their actions.
- Demonstrate competence, reliability, responsibility and accountability.
- Take responsibility for the safety of themselves and others.
- Display a gentle acceptance of the human imperfections of themselves and others.
- Display a commitment to their own growth and development as care providers.

The Family in Health and Healing

The family is the foundation of society. It is the primary socializing force. It is within the intimacy of the family that we are fed, clothed, sheltered and protected from harm. The family provides us with our first experiences of human caring, acceptance and understanding. Within the family we initially learn values, beliefs and standards of conduct. Many of the lifestyle choices that ultimately determine our physical, psychological, social and spiritual well-being spring from our early family experience.

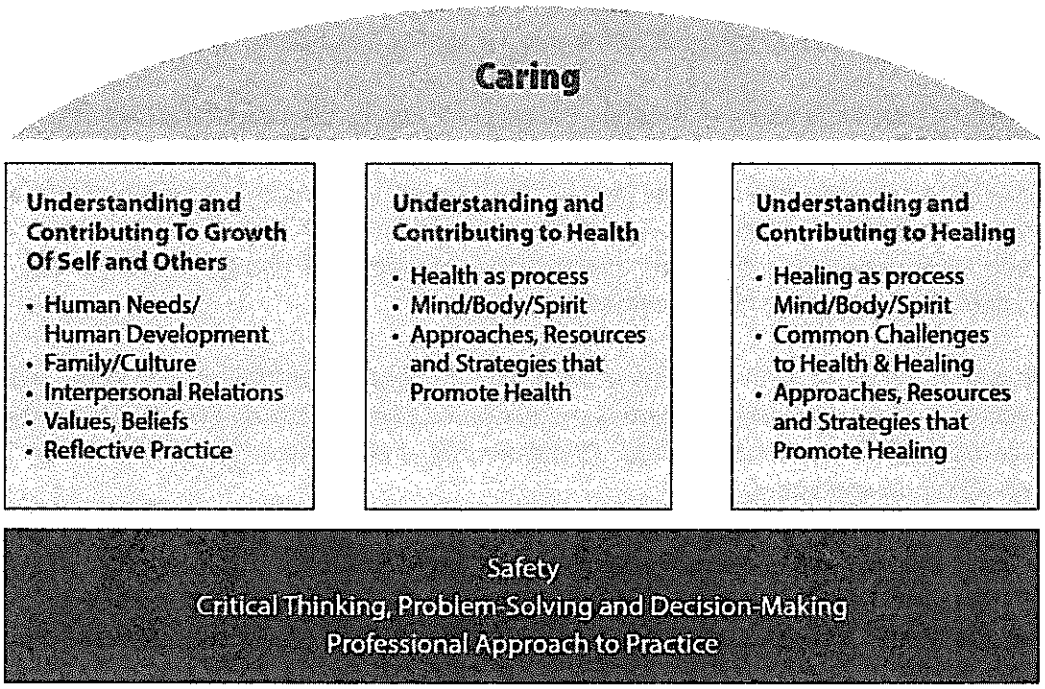
Like individuals, each family is unique. Every family has its own particular set of values, beliefs, standards and goals which are influenced by socioeconomic, environmental, educational, religious and cultural factors. Each family influences and is influenced by its members and the larger socio-cultural community in which it lives and develops. Families also experience definable developmental stages that change the character, functions and size of the family unit over time.

Although families come in a variety of sizes and configurations, the interdependence of members is a constant theme. Family members assume roles and responsibilities that are complimentary and interrelated. Consequently, changes in one family member affect all family members.

Health challenges faced by family members can represent a major demand for change and adjustment within the family unit. The family's response to the situation will influence the way in which the affected person perceives their health. Likewise, the response of the family can greatly influence the course of a health challenge. As a consequence, families must be acknowledged and included as an integral part of care.

Care providers must be sensitive to and respectful of the language, culture, values and preferences of the families with whom they interact. Health care practitioners must recognize the socio-cultural and economic influences on the family, and respect the means by which the family is attempting to cope with increased stress.

CURRICULUM ORGANIZING CONCEPTS



The organizing concepts or themes that are pulled through the HCA curriculum appear on the diagram on the preceding page. The overarching, primary concept is that of caring. This, combined with the foundational concepts, provides the underpinnings for all knowledge and abilities that learners gain within the program. The foundational concepts are: safety, thinking skills (critical thinking, problem-solving, decision-making) and professional approaches to practice.

Caring

Within the statement of Values, Beliefs and Principles underlying this curriculum, there is considerable discussion about what caring is and what it means in care-giver practice. Perhaps the most important statement related to caring is the following:

A caring act is always an expression of reverence for the basic value and dignity of another person.

This simple statement makes it clear that caring involves, always, an approach to care-giving practice that is person-centred. Each individual who is the recipient of care is unique and deserves to be viewed as such. Within a caring philosophy, a "one-size-fits-all" approach to care-giving would never be appropriate. Consequently, with caring as the overarching, primary concept of the HCA curriculum, the emphasis is always on providing care and assistance in ways that are clearly client-centred.

Safety

Safety is a constant and clear priority of practice for HCAs. Through safe practices, the HCA protects both self and others from injury or harm. Attending to the safety of a client is part of being a caring practitioner. Attending to the safety of self is an important part of healthy self-care. A professional approach to practice is, first and foremost, based on clear understandings and applications of principles related to safety and harm reduction.

Critical Thinking, Problem-Solving and Decision-Making

Effective health care practitioners make informed decisions that are based on a sound knowledge base. They use logical, rational, focused, purposeful thinking to come to decisions and to solve problems. They also reflect on their decisions and evaluate their choices so that they are continually gaining knowledge and expertise.

HCAs utilize an informed problem-solving approach in their practice.

The problem-solving approach used by HCAs includes: identifying and analyzing a problem; identifying priorities and options; identifying possible consequences; determining sources of assistance; utilizing the safest, most appropriate action to rectify the problem; and evaluating the outcome.

Professional Approach to Practice

A professional approach to practice is one in which the Health Care Assistant consistently demonstrates respect for self and others. A professional approach is also one in which the HCA maintains safe, competent practice and displays a commitment to responsible and accountable behaviour. HCAs who behave in a professional manner function within their parameters of practice, maintain appropriate boundaries and are dependable, reliable and honest.

A professional practitioner works effectively, constructively and collaboratively with other members of the health care team. Moreover, professional practitioners are self-reflective, regularly identifying personal and professional development requirements and seeking effective ways to meet these needs. Professional practitioners are also those who seek to continually learn, grow and enhance their competence and capability.

PROGRAM PURPOSE

The HCA Program is designed to provide students with opportunities to develop the knowledge, skills and attitudes necessary to function effectively as front-line care-givers and respected members of the health care team. Under the direction and supervision of a health professional, graduates provide person-centred care aimed at promoting and maintaining the physical, emotional, cognitive and social well-being of clients.

Upon completion of the program, graduates are prepared to work in a variety of practice settings including home support, assisted living, residential/complex care, special care units, other home and community care settings and acute care.

PROGRAM LEARNING OUTCOMES

Upon completion of the HCA Program, graduates will be able to:

1. Provide person-centred care and assistance that recognizes and respects the uniqueness of each individual client.

2. Use an informed problem-solving approach to provide care and assistance that promotes the physical, psychological, social, cognitive and spiritual well-being of clients and families.

3. Provide care and assistance for clients experiencing complex health challenges.

4. Provide care and assistance for clients experiencing cognitive and/or mental health challenges.

5. Interact with other members of the health care team in ways that contribute to effective working relationships and the achievement of goals.

6. Communicate clearly, accurately and in sensitive ways with clients and families within a variety of community and facility contexts.

7. Provide personal care and assistance in a safe, competent and organized manner.

8. Recognize and respond to own self-development, learning and health enhancement needs.

9. Perform the care provider role in a reflective, responsible, accountable and professional manner.

Program Learning Outcomes and Performance Indicators

1. Provide person-centred care and assistance that recognizes and respects the uniqueness of each individual client:

    - Describe the characteristics and qualities of caring interactions in a variety of contexts.
    - View each client as a whole, unique individual.
    - Respect the individuality, independence and dignity of clients and families.
    - Display respect and sensitivity to individuals and families from diverse backgrounds and cultures.
    - Display a non-judgmental approach in all aspects of care provision.
    - Support the autonomy and uniqueness of clients and their families.
    - Encourage clients to share their thoughts, feelings and preferences.
    - View the older person as an individual possessing a wealth of experience, knowledge and wisdom.
    - Base care and assistance functions on the client's unique needs, capabilities and interests.
    - Provide clear information to the client about the care or service to be provided and deal with questions or concerns in a calm, caring fashion.
    - Encourage clients to be involved in their own care.
    - Support client independence.
    - Encourage clients to make choices and participate in decisions about their care, as they are able.
    - Encourage family involvement, as appropriate, in the care of their family member.
    - Observe family members for signs of stress and consult with an appropriate health care professional for direction.
    - Recognize and report potential or suspected abusive or neglectful situations (including client's self-neglect) promptly to a health professional for appropriate action.

2. Use an informed problem-solving approach to provide care and assistance that promotes the physical, psychological, social, cognitive and spiritual well-being of clients and families:

    - Assess the client and situation using informed observation, reflection and communication.
    - Observe changes in the client's health status and report these changes to the appropriate health care professional.
    - Identify priorities for care within the care plan.

- Be guided by knowledge of health, healing, human needs and human development.
- Demonstrate an understanding of the interconnectedness of physical, psychological, social, cognitive and spiritual aspects of health and healing.
- Display an understanding of the importance of the family in health and healing.
- Display an awareness of the role of culture, diversity and life experience in health and healing.
- Appreciate the potential value of traditional medicines and alternative forms of healing to the client and their family.
- Utilize appropriate health team members as resources to augment one's own problem-solving and decision-making.
- Follow the care plan for each client.
- Consult with health team members to review and evaluate care and make modifications to the care plan as needed.
- Carry out recording requirements in a timely fashion.
- Use clear, current, factual, objective and relevant language when reporting or documenting client information.
- Utilize creativity when required to adapt care and service to a variety of contexts.

Note: Throughout the guide, *assess*, when referring to performance by the HCA, will be understood to mean observing, gathering data and making reasonable inferences at a level appropriate to the education of a HCA and in accordance with the employer's expectations/policies. For example, the HCA should perform a basic mobility assessment of the client (observe, gather data from the care plan and/or other sources, make a reasoned judgment) before transferring the client. It is necessary to *assess* the appropriateness of the transfer method each time.

3. Provide basic care and assistance for clients experiencing complex health challenges:

    - Base choices and actions on a sound understanding of normal anatomy and physiology and common changes associated with aging.
    - Base choices and actions on a sound understanding of common challenges to health and healing.
    - Base choices and actions on a clear understanding of the interrelationship of the physical, social, cognitive, emotional and spiritual dimensions of health and healing.
    - Organize, administer and evaluate care and service for clients with complex health challenges.

- Assist clients and families to maintain independent functioning within their capabilities.
- Provide caring and supportive end-of-life care for clients in a manner that promotes comfort and dignity.

4. Provide care and assistance for clients experiencing cognitive and/or mental health challenges:

    - Organize, administer and evaluate care and assistance for clients experiencing cognitive and/or mental health challenges.
    - Base choices and actions on a sound understanding of the physical and psycho-social processes of dementia.
    - Base choices and actions on an understanding of environmental influences on behaviours.
    - Base choices and actions on a clear understanding of the interrelationship of the physical, social, cognitive, emotional and spiritual dimensions of health and healing.
    - Tailor interactions and responses based on an understanding of common mental health challenges.
    - Use an informed problem-solving process when caring for or providing assistance for individuals experiencing mental health challenges.
    - Cope constructively with unanticipated or unusual situations.
    - Identify when crisis intervention skills are required and respond appropriately.

5. Interact with other members of the health care team in ways that contribute to effective working relationships and the achievement of goals:

    - Recognize and respect diversity within the health care team.
    - Use caring, respectful communication with all members of the health care team.
    - Base interactions on a clear understanding of the roles and responsibilities of various members of the health care team.
    - Seek clarification, guidance and assistance from other health team members when needed.
    - Contribute observations and information to care planning sessions.
    - Communicate changes in the client's health status to the appropriate health team member so that the care plan is kept current.
    - Communicate with confidence and appropriate assertiveness.
    - Offer support and assistance to other health team members as appropriate.
    - Report and record relevant information in a clear, concise and objective manner.

- Use appropriate lines of communication in accordance with agency, facility or employer standards and policies.
- Identify problems, concerns and conflict within the health team and discuss these with appropriate team members in a timely manner.
- Approach problems or conflict in a non-threatening way.
- Respond non-defensively to feedback, even when provided in a critical or confrontational manner.

6. Communicate clearly, accurately and in sensitive ways with clients and families within a variety of community and facility contexts:

- Demonstrate an ability to write and speak English in a manner that can be easily understood.
- Use English in such a way as to be clearly understood.
- Use appropriate volume, tone and vocabulary.
- Use language and a communication style that is appropriate to the client, family or situation.
- Identify barriers to communication and make efforts to improve communication.
- Describe the relationship between self-awareness, self-concept and communication.
- Recognize how perceptions influence one's reality and experience of situations.
- Interact in a manner that respects the rights, needs, interests and preferences of others.
- Observe common courtesies such as addressing the client and family members by name of choice and speaking in a manner to be readily understood.
- Use touch appropriately and respectfully.
- Use humour appropriately.
- Maintain appropriate interpersonal and professional boundaries.
- Respect and adapt to a family and client's cultural background.
- Recognize non-verbal communication.
- Use non-verbal attending skills including eye contact, body positioning and attentive facial expression.
- Use active listening skills.
- Use appropriate self-disclosure.
- Adapt communication styles/approaches as appropriate to the client or situation.
- Utilize effective approaches to conflict management.
- Demonstrate an understanding of the stressors experienced by clients and families as they are reflected in communication patterns.

- Recognize abusive communication and report in accordance with agency/ facility or employer standards and policies.

7. Provide personal care and assistance in a safe, competent and organized manner:

   - Wear safe and appropriate clothing, including identification.
   - Adhere to the client's care plan.
   - Assess the client and the environment prior to commencing care.
   - Adjust environments, as appropriate, to ensure safety and to promote efficiency.
   - Set priorities or make adjustments to the care process based on client requirements.
   - Organize and implement care according to client needs.
   - Organize time and equipment for safety and efficiency.
   - Base choices and actions on a sound knowledge of asepsis and body mechanics.
   - Adhere to infection control practices.
   - Report, verbally and in writing, unsafe work environments.
   - Encourage independence of the client as much as possible.
   - Encourage family involvement in care whenever possible.
   - Recognize and make wise choices in situations of potential risk to self or others.
   - Encourage client communication and engagement during personal care.
   - Maintain client privacy and dignity.
   - Assist the client with personal hygiene and grooming.
   - Assist the client with movement and ambulation.
   - Use aids to promote comfort, relaxation and sleep.
   - Take and record vital signs (temperature, pulse, and respirations) accurately.
   - Have an understanding of basic nutrition related to the client's health needs and preferences.
   - Use safe eating/feeding techniques for clients who require assistance.
   - Assist the client with medication; administer medications only if the task is delegated.
   - Provide specialized, sensitive care for the dying client in line with palliative care principles.
   - Exhibit flexible and adaptable behaviour.

8. Recognize and respond to own self-development, learning and health enhancement needs:

    - Identify own learning and personal/ professional development needs.
    - Invite feedback from other health team members related to own performance.
    - Collaborate with appropriate health professionals to identify and utilize opportunities for specific learning and training enhancement.
    - Identify and utilize opportunities to learn from clients, families and colleagues.
    - Share new learning with other health team members.
    - Reflect on own choices and behaviours as they contribute to physical, psychological, social, cognitive and spiritual health.
    - Strive to demonstrate increasingly healthful lifestyle and self-care practices.

9. Perform the care-giver role in a reflective, responsible, accountable and professional manner:

    - Demonstrate an understanding of the components of the health care system within the region and province.
    - Comply with legal and contractual parameters of practice for HCAs.
    - Foster and uphold the mission, policies and standards of the organization of employment.
    - Adhere to the expectations and guidelines established in one's job description.
    - Collaborate with other members of the health care team.
    - Use appropriate lines of communication.
    - Clarify one's own role to others when necessary.
    - Demonstrate dependability, responsibility, accountability, reliability, honesty and integrity.
    - Reflect on one's own values, beliefs and standards in relation to care-giving practice.
    - Recognize how one's own beliefs, values, standards and cultural background may be different or similar to those of clients and families.
    - Recognize how one's own beliefs and values influence one's responses to clients, families and situations.
    - Maintain a non-judgmental position in light of difficult or unusual client or family situations.
    - Advocate on behalf of the rights, needs, interests and fair treatment of clients and their families.
    - Maintain client and family confidentiality.

- Set appropriate personal boundaries in interactions with clients and family members.
- Recognize ethical issues in practice and seek appropriate methods for resolving such issues.
- Challenge questionable actions or decisions made by other health team members.
- Promote own personal safety, health and well-being.
- Apply self-reflection and self-appraisal processes in order to recognize and respond to self-development needs.
- Reflect on the benefits and challenges of the HCA role.
- Champion the role of HCAs on the health care team.

PROVINCIAL CURRICULUM MATRIX

The HCA program consists of the following courses:

Course Name	Minimum Course Hours
Health and Healing: Concepts for Practice	70 hours
Health 1: Interpersonal Communications	50 hours
Health 2: Lifestyle and Choices	30 hours
Health Care Assistant: Introduction to Practice	30 hours
Healing 1: Caring for Individuals Experiencing Common Health Challenges	115 hours
Healing 2: Caring for Individuals Experiencing Cognitive or Mental Challenges	60 hours
Healing 3: Personal Care and Assistance	120 hours
Theory/Lab Course Hours	**475 hours**
Practice Education Experience: Multi-level/Complex Care Facility Placement[4] including a placement focused on specialized dementia care. • Instructor-led Clinical (150 hours minimum) • Practicum/Preceptorship (up to 60 hours of the 210 hours of the multi-level practice experience may be other than instructor-led clinical)	210 hours
Practice Education Experience: Home Support/Assisted Living/Group Home • Practicum/Preceptorship	60 hours
Practice Education Hours	**270 hours**
TOTAL MINIMUM PROGRAM HOURS	**745 HOURS**

[4] Practice experiences in other settings, such as units specified as Transitional Care, Discharge Planning, Rehabilitation, Alternate Level of Care, PATH, et cetera may be acceptable if the learning outcomes can be met in these settings.

COURSE CLUSTERS

Courses that develop Foundational Knowledge, Skills and Values	Courses that develop Specialized Knowledge, Skills and Values	Learning Experiences that Require Application of Knowledge, Skills and Values to Practice
• Health and Healing: Concepts for Practice • Health 1: Interpersonal Communications • Health 2: Lifestyle and Choices • Health Care Assistant: Introduction to Practice	• Healing 1: Caring for Individuals Experiencing Common Health Challenges • Healing 2: Caring for Individuals Experiencing Cognitive or Mental Challenges • Healing 3: Personal Care and Assistance	• Practice Experience(s) in Home Support, Assisted Living and/or Group Homes • Practice Experience(s) in Multi-level or Complex Care (includes practice experience focused on specialized dementia care)

LOCATION OF THEORY, APPLICATION AND ASSESSMENTS OF PROGRAM LEARNING OUTCOMES WITHIN COURSES

Program Learning Outcomes	Health & Healing	Health 1	Health 2	Intro To Practice	Healing 1	Healing 2	Healing 3	Practice Experiences
1. Provide person-centred care and assistance that recognizes and respects the uniqueness of each individual client.	***	**	**	*	**	***	*	***
2. Use an informed problem-solving approach to provide care and assistance that promotes the physical, psychological, social, cognitive and spiritual well-being of clients and families.	***	*	**		***	***	***	***
3. Provide basic care and assistance for clients experiencing complex health challenges.	*		*		***		**	***
4. Provide care and assistance for clients experiencing cognitive and/or mental health challenges.	*		*			***	*	***
5. Interact with other members of the health care team in ways that contribute to effective working relationships and the achievement of goals.	**	***		***	**	**	***	***

Program Learning Outcomes	Health & Healing	Health 1	Health 2	Intro To Practice	Healing 1	Healing 2	Healing 3	Practice Experiences
6. Communicate clearly, accurately and in sensitive ways with clients and families in a variety of community and facility contexts.	**	***			**	***	**	***
7. Provide personal care and assistance in a safe, competent and organized manner.	**	*	*	*	**	**	***	***
8. Recognize and respond to own self-development, learning and health-enhancement needs.		*	***	***	*	*		***
9. Perform the care provider role in a reflective, responsible, accountable and professional manner.	*	*		***	*	**	**	***

Key: * This outcome represents an underlying focus within the course.
** This outcome represents a less significant but still important focus of the course
*** This outcome represents a significant focus of the course

OVERVIEW - PROVINCIAL CURRICULUM COURSES

The following section of the curriculum document outlines each of the courses in the HCA Program. The following information is provided:

1. Course Description
   This is a brief overview of the course giving information that will be useful to students and others. The description may be used with college approval bodies, in college calendars or as part of on-line and printed program information materials.

2. Minimum Course Hours
   The *minimum* number of hours required for each course is included.

3. Learning Outcomes for the Course
   The course learning outcomes describe what the student will know and be able to do once he/she has completed the course.

4. Course Content
   The content overview provides a listing of the content of the course. The clustering and sequencing of content provided in this document is intended as a guide. The content in each course may be presented in any sequence or manner so long as the course learning outcomes are met.

HEALTH AND HEALING: CONCEPTS FOR PRACTICE

Course Description

This course provides students with the opportunity to develop a theoretical framework for practice. Students will be introduced to the philosophical values and theoretical understandings that provide a foundation for competent practice as a HCA. The course focuses on concepts of caring and person-centred care; basic human needs and human development; family, culture and diversity as they relate to health and healing. Students will also be introduced to a problem-solving model that will be critical to their practice.

Minimum course hours: 70

Learning Outcomes

1. Display an understanding of person-centred care that recognizes and respects the uniqueness of each individual:

    - Describe the characteristics and qualities of caring interactions in a variety of contexts.
    - Explain the importance of respecting the individuality, independence, autonomy, diverse values and dignity of clients and families.
    - Display an ability to view the older person as an individual possessing a wealth of experience, knowledge and wisdom.
    - Discuss the components of social and community models of care as they relate to person-centred care.

2. Discuss basic human needs and common characteristics of human development as these concepts relate to person-centred care:

    - Describe Maslow's hierarchy of needs, explaining the importance of each level and the interrelationship of needs.
    - Conduct a needs assessment.
    - Discuss the principles of human development.
    - Describe the common characteristics and changes in the older adult.

3. Use an informed problem-solving approach to provide care and service:

    - Describe critical thinking as a caring concept.

- Discuss the relationship between critical thinking, problem-solving and decision-making.
- Describe care planning as a problem-solving process.
- Utilize the steps of the care planning / problem-solving process.
- Describe the role of the HCA in planning care.
- Describe common practices for reporting and recording in various health care settings (residential, community and acute care).

4. Contribute to the safety and protection of self and others within a variety of work environments:

    - Describe individual factors affecting the need for protection and safety (health, age, lifestyle, health challenges).
    - Discuss ways of promoting and maintaining safe environments.
    - Define and describe elements of risk management.
    - Discuss care planning to promote safety of the client and of the HCA.
    - Discuss living at risk issues.
    - Recognize emergency and critical incidents and describe appropriate steps to take during and after the incident.

5. Display an understanding of the role of family, culture, diversity and life experience in aging, health and healing:

    - Discuss changing family structures and diverse family units.
    - Describe common socio-cultural, religious, environmental and economic influences on the family.
    - Understand the impact of stress on family care providers.
    - Identify ways care providers may support the family.
    - Describe how diversity (race, ethnicity, culture, generational differences, socio-economic differences, religious diversity, etc.) influences an individual's experiences of aging, health and healing.
    - Discuss components of culturally sensitive care.
    - Appreciate the potential value of traditional medicines and alternative forms of health care to the client and family.

Course Content

Characteristics of caring and person-centred practice

- Caring as a moral ideal: What is caring?
- What distinguishes a caring from an uncaring act?
- Caring in a health care context.
- Values and beliefs about care and caring.

- Promoting the dignity and worth of self and others.
- Self-building and self-caring as the basis of becoming an effective care provider
- Caring and power: Power positions vs. relational positions with others.
- Independence, dependence and interdependence.
- Independence and self-esteem.
- Promoting self-determination.
- Promoting quality of life – who defines it and who decides what it means to each person.
- Social and Community models of care.
- Supporting personal preferences and choices.
- Recreation/socialization and quality of life.
- Preventing isolation and unnecessary dependence.
- Living at risk – what it is and why it is an option – the right to self-determination and choice.

Basic Human Needs

- Hierarchy of needs:
  - Physiological.
  - Safety and Security.
  - Love and Belonging.
  - Self-esteem.
  - Self-actualization/Self-fulfilment.
- Interrelationship of needs.
- Factors that affect needs and the meeting of needs in older adults.
- Needs assessment.

Human Development

- Principles of human development
- Developmental characteristics and changes in the older adult:
  - Physical changes.
  - Psycho-social challenges.
  - Loss as part of aging.
  - Diversity in older adults.
  - Factors influencing aging.

Family in Health and Healing

- Family development.
- Diverse family units.
- Changing family structures.
- Socio-cultural, religious, environmental and economic influences of the family.
- The role of family in health and healing:
  - Coping and adapting.

    - Influence on health care choices, such as traditional and alternative medicines and treatments.
- Understanding the impact of stress on family care providers.
- Families experiencing conflict or other dysfunction.
- Supporting the family.

Multiculturalism and Diversity

- Race, ethnicity and culture.
- Diversity of backgrounds.
- Gender identity and sexual orientation.
- Generational differences.
- Prejudice and discrimination.
- Effects of culture.
- Culture and family.
- Culture and religion.
- Cultural influences on aging and health.
- Culturally sensitive care.

Critical Thinking and Problem-Solving

- Critical thinking as a caring concept.
- Relationship between critical thinking, problem-solving and decision-making.
- Components of effective problem-solving/decision-making.
- Problem-solving in relation to time management.
- Care planning as a problem-solving process.
- Steps in the care planning / problem-solving process:
    - Assessing – gathering information (including the client's unique personal history, achievements, strengths, and preferences).
    - Consulting with client and health care team.
    - Establishing priorities.
    - Defining the problem or care requirement.
    - Identifying the goal for care.
    - Creating an action plan.
    - Implementing the action plan.
    - Evaluating.
- Care planning process in health care settings (including residential, community, acute care).
- Concepts of client acuity and intensity and how these factors influence the HCA's problem-solving and decision-making regarding care provision and prioritization of tasks.
- Role of HCAs in planning care.
- Reporting and recording – common practices in residential, community and acute care settings, including electronic documentation.

Protection and Safety in Health and Healing

- Factors affecting the need for protection and safety (health, age, lifestyle, health challenges/cognition).
- Realities and challenges.
- Promoting and maintaining safe environments in various health care settings (residential, community, acute care), e.g.:
    - Reporting unsafe equipment.
    - Maintaining a clutter-free environment.
    - Recognizing and reporting vermin/vectors.
- Roles and parameters of practice in relation to safety.
- Risk management – definitions and approaches.
- Care plans which address safety of the client and of the HCA.
- Safety when working alone.
- Living at risk issues: respecting the client's choice to live at risk when an informed choice has been made.
- Emergency and critical incidents:
    - Recognizing critical incidents.
    - Recognizing situations where critical incident debriefing is warranted.
    - Recognizing appropriate actions by the HCA in response to emergency situations, for example cardiac arrest, in residential and community settings.
    - Recognizing emergency codes used in acute care settings, specifically Codes Blue, White, Yellow and Red.
    - Recognizing the HCA's role during emergency codes (activating help, assisting other team members as directed, communicating and collaborating with other team members).

HEALTH CARE ASSISTANT: INTRODUCTION TO PRACTICE

Course Description

This course provides an introduction to the role of the HCA within the British Columbia health care system. Students will be introduced to the health care team and the roles and functions of HCAs within the team. Students will also have opportunities to develop self-reflective skills required for competent practice and will be introduced to effective job-finding approaches

Minimum course hours: 30

Learning Outcomes

Upon successful completion of this course, students will be able to:

1. Display an understanding of the roles and responsibilities of HCAs within the health care system in British Columbia:

    - Describe the Health care Systems in British Columbia and Canada.
    - Describe the processes by which individuals in British Columbia become eligible for long term care.
    - Discuss the goals, philosophy, and approaches used in assisted living facilities and how these might also be applied in other contexts.
    - Describe the purpose and functions of employer standards, policies and procedures.
    - Discuss the importance of maintaining client and family confidentiality.
    - Describe the roles and responsibilities HCAs within the health care team.
    - Describe the role of labour unions in health care in relation to membership, responsibilities, and implications for HCAs.
    - Describe the role and mandate of bodies with oversight of HCAs in BC.

2. Contribute to the effective functioning of the health care team:

    - Discuss basic concepts of team development and group processes.
    - Outline the benefits and challenges of working in a team, including diversity within the team.
    - Describe principles of collaboration and cooperation that contribute to effective team functioning.

- Describe the roles and responsibilities of various members of the health care team.
- Discuss lines of communication.

3. Function in a responsible, accountable fashion recognizing legal and ethical parameters of the HCA role:

    - Discuss human rights as they relate to the provider and the recipient of care.
    - Discuss elements of responsible and accountable behaviour.
    - Delineate the legal and contractual limitations and obligations of HCAs.
    - Delineate the legal implications of the written word.
    - Discuss how to recognize ethical issues in practice and methods for resolving such issues.
    - Discuss appropriate responses when a situation exceeds legal or employer-defined parameters of one's role.
    - Describe what is meant by professional boundaries in relation to relationships with clients and families.

4. Apply self-reflection and self-appraisal processes in order to recognize and respond to own self-development needs as a care provider:

    - Discuss reflective practice: what it is, why it is important, how to become a reflective care provider.
    - Discuss how personal competence of the care provider is a component of caring practice.
    - Describe how self-assessment relates to self- development.
    - Discuss the importance of lifelong learning for all care providers.

5. Confidently conduct a job-search process:

    - Describe the challenges and rewards of specific work environments.
    - Discuss criteria for selecting a work environment that fits one's strengths, values, preferences and lifestyle.
    - Identify the components of applying for a job:
        - Preparing a clear, attractive resume and letter of application.
        - Completing a job application form.
        - Effectively participating in a job interview.
        - Finding resources to support the process of applying for a job.

Course Content

Workplace Settings and Contexts

- Introduction to the Health care System in British Columbia and Canada.
- Long Term Care Assessment (how it is done and outcomes).
- Models of care – creating community, actualizing person-centred care.
- Assisted Living – goals, philosophy, approaches – how these might also be applied in other contexts.
- Working in various health care settings (residential, community and acute care) – challenges and opportunities.
- Agency/ facility/ employer standards, policies and procedures – purpose and function.
- Standards of care.
- Importance of maintaining client/family confidentiality.
- Reporting and recording – when, what, how.
- Legal implications of the written word.
- Organizing within the work environment: managing time effectively.
- Use of workplace technology (computers).

Teamwork in Health care Settings

- The health care team in various health care settings (residential, community and acute care).
- Roles and responsibilities of various members of the health care team.
- The roles and responsibilities of HCAs; how these may differ in different settings.
- Legal limitations and obligations of HCAs.
- What to do when a situation exceeds legal or employer-defined parameters of one's role
- Supervision in various health care settings.
- Assigned and delegated tasks; how these may differ in different settings.
- Responsibilities of the HCA and the health care professional in delegated tasks.
- Lines of communication.
- Basic concepts of team development and group processes.
- Benefits and challenges of working in a team, including diversity within the team.
- Facilitating effective team functioning – principles of collaboration.
- Maintaining a respectful workplace.

Legal and Ethical Issues

- Human rights: World Health Organization.
- Basic human rights in Canada.
- Rights of people receiving health care services.
- Rights of HCAs.
- Relevant contractual obligations that guide HCA practice.

- Ethical and legal parameters of HCA roles.
- Ethical standards and decision-making within one's practice.
- Abuse – recognizing and reporting.
- Occupational health and safety.
- Employment standards.

Professional Approaches to Practice

- Responsible and accountable behaviour.
- Unions – membership, rights and responsibilities.
- Professional relationships with clients, family members and other members of the health team:
  - Roles and professional boundaries
  - Principles of professional self-disclosure
- Accountability and ethical behaviour in working relationships.
- Aspects of confidentiality in shared information and appropriate use of personal information.
- Inappropriate use of mobile devices and social media, i.e. related to client confidentiality and unprofessional behaviour (discussion of work place issues or conflicts and/or client information, personal phone use during work hours).

Self-reflective Practice

- Reflective practice – what it is, why it is important, how to become a reflective care provider.
- Personal competence as a component of caring.
- Impact of personal values, beliefs and principles on practice.
- Self-assessment and self-development.
- Challenges and rewards of specific work environments.
- Selecting a work environment that fits own strengths, values, preferences and lifestyle.
- The importance of lifelong learning.
- The function of motivation and commitment in on-going learning and personal development.

Employability Skills

- Choosing an employer.
- Preparing a resume and letter of application.
- Completing a job application form.
- Effectively handling the job interview.
- Employer expectations.

HEALTH 1: INTERPERSONAL COMMUNICATIONS

Course Description

This course focuses on the development of self-awareness, increased understanding of others and development of effective interpersonal communication skills that can be used in a variety of care-giving contexts. Students will be encouraged to become more aware of the impact of their own communication choices and patterns. They will have opportunities to develop and use communication techniques that demonstrate personal awareness, respect and active listening skills.

Minimum course hours: 50

Learning Outcomes

Upon successful completion of this course, students will be able to:

1. Identify the characteristics and qualities of effective interpersonal communications:

    - Discuss the basic elements of any interpersonal communication processes – sender, receiver, message, feedback.
    - Describe common barriers to communication.
    - Describe the characteristics of effective communication.
    - Discuss characteristics of culturally sensitive communication.
    - Differentiate between caring and non-caring communications in a variety of job-related situations.

2. Discuss the interrelationship between self-awareness, self-esteem and perception as these relate to communication choices and patterns:

    - Discuss the interrelationship between self-concept, self-esteem and interpersonal communications.
    - Describe how perception influences one's reality and experience of situations.

3. Demonstrate effective, caring interpersonal communications with clients, colleagues and others:

- Utilize effective non-verbal communication, including non-verbal listening skills.
- Describe the characteristics of effective use of touch.
- Display an ability to be attuned to the non-verbal communications of clients and others.
- Use open-ended questions.
- Utilize active listening responses including paraphrasing and perception checking.
- Display an ability to listen and respond empathically.
- Use listening and responding skills to defuse anger and conflict.
- Utilize assertive communications appropriately.
- Determine when a situation is unsafe and it is important to leave.

4. Apply self-reflection and self-appraisal processes in order to increase own effectiveness in interpersonal contexts:

    - Reflect on how one's personal beliefs and values influence perceptions, self-concept and behaviours.
    - Use self-reflection to determine one's choices and patterns of communication.
    - Reflect on interpersonal interactions in order to increase own effectiveness.
    - Invite feedback and suggestions from others in order to increase own effectiveness.

Course Content

Introduction to Interpersonal Communication

- Elements of interpersonal communication processes – sender, receiver, message, feedback.
- Barriers to communication.
- Characteristics of effective communication: open, supportive, positive, understanding.
- Importance of common courtesies.
- Warmth, respect, empathy.
- Appropriate use of humour.
- Appreciating diversity of backgrounds: generational differences.
- Culturally sensitive communication.
- Communicating with people who speak a different language from yours.
- What a caring response looks like.

- Differentiating between caring and non-caring communications in a variety of job related situations.
    - Recognize how different health care settings or health concerns may impact communication with the client, e.g. at home (in residential or community setting) vs. acute care hospital admission

Knowledge of Self

- Interrelationship between self-concept, self-esteem and interpersonal communications.
- Recognizing how perception influences one's reality and experience of situations.
- Societal, cultural and experiential influences on perceptions and self-concept.
- Using self-reflection to determine one's choices and patterns of communication.

Non-Verbal Communication

- Gestures, postures, facial expressions.
- Use of space.
- Use of objects.
- Positioning of self in relation to the other person.
- Tone and volume of speech.
- Non-language sounds.
- Personal choices and what these communicate.
- Appropriate and caring use of touch.
- Reflecting on one's own non-verbal communications.
- Being attuned to the non-verbal communications of clients and others.
- Electronic communications, e.g. appropriate email communication, on-line etiquette (netiquette).

Responding to Others

- Non-verbal listening skills.
- Using open-ended questions.
- Using paraphrasing/perception checking.
- Listening and responding empathically.
- Respond non-defensively to feedback, even when provided in a critical or confrontational manner.

Conflict Management and Resolution

- Value of conflict in interpersonal relations.
- Applying skills (e.g. listening and responding skills) to defuse anger and conflict.
- Assertive communications: assertive vs. aggressive responses.
- How and when to say "no."
- Factors that signal it's time to remove self from a situation.

HEALTH 2: LIFESTYLE AND CHOICES

Course Description

This course introduces students to a holistic concept of health and the components of a health-enhancing lifestyle. Students will be invited to reflect on their own experience of health, recognizing challenges and resources that can impact lifestyle choices. Students will be introduced to a model that can be applied in other courses to understand the multi-faceted aspects of health and healing.

Minimum course hours: 30

Learning Outcomes

1. Discuss the interrelationship of physical, social, cognitive, emotional and spiritual dimensions and the Determinants of Health:

    - Describe health as process i.e. a journey not a destination.
    - Discuss the physical, psychological/emotional, cognitive, social and spiritual dimensions of health.
    - Describe the interrelatedness of the dimensions of health.
    - Discuss health as it relates to lifestyle choices.
    - List and describe the Determinants of Health and how they impact health.

2. Display an understanding of how lifestyle choices and behaviours contribute to physical, psychological, social, cognitive and spiritual health:

    - Discuss the positive effects of regular exercise and physical self-care.
    - Describe the elements of a nutritious diet.
    - Discuss elements of healthful weight management.
    - Describe the adverse effects of common harmful substances (tobacco, alcohol, caffeine, drugs).
    - Discuss the interaction between emotions/perceptions and physical well-being.
    - Describe the effects of stress.
    - Recognize aspects of the HCA role which could lead to unhealthy stress.
    - Describe a variety of approaches to stress management.
    - Discuss the cognitive (thinking) components of health.

- Describe how one's ability to think, reason, interpret, remember, assess, and solve problems is related to health.
- Discuss the importance of social support in personal wellness.
- Recognize cultural and societal influences on lifestyle choices.
- Describe the spiritual components of health.
- Discuss how clarification of one's values and beliefs might relate to lifestyle choices.
- Identify personal focuses and activities that enrich, refresh and create meaning in one's life.
- Describe how one's choices affect one's environment.
- Discuss environmental influences on health.

3. Display an understanding of the complexity of the change process in relation to health promotion:

    - Describe how critical thinking and problem-solving relate to lifestyle change.
    - Display how to set achievable goals, use appropriate motivators, and set a realistic change agenda.
    - Discuss the complexities involved in lifestyle change

Course Content

Understanding Health

- Health as a process i.e. a journey not a destination.
- Physical, psychological/emotional, cognitive, social and spiritual dimensions of health. Interrelatedness of all aspects of health: introduction of the health wheel.
- Health as it relates to lifestyle and choices.
- Determinants of Health and how they affect health.

Components of Health

- Physical components of health:
    - Physical activity.
    - Physical self-care.
    - Sleep and rest.
    - Nutrition: Nutrition throughout the life cycle; factors that affect eating and nutrition; Canada's Food Guide.
    - Weight management.
    - Avoiding or limiting harmful substances – licit and illicit drugs, alcohol, tobacco and caffeine.

  - Environment
- Psychological/emotional (feeling) components of health:
  - Interaction between emotions/perceptions and health.
  - Psychologically safe environments.
  - Stress and stress management.
    - Common responses and effects of stress.
    - Common stressors related to work of the HCA.
    - Burnout and compassion fatigue.
    - Strategies for self-assessment and wellness intervention.
- Cognitive (thinking) components of health:
  - Rational thinking and perceiving.
  - Ability to reason, interpret and remember.
  - Ability to sense, perceive, assess and evaluate.
  - Problem-solving ability.
  - Creativity.
- Social (interactive) components of health:
  - Social bonds and social supports in relation to health.
  - Cultural/societal/traditional influences on lifestyle and choices.
- Spiritual components of health:
  - Personal values and beliefs.
  - Clarification of values and beliefs that are personally significant.
  - Meaning-making.
  - Activities that enrich and refresh.

Lifestyle Change

- Complexity of the lifestyle change process.
- Critical thinking and problem-solving as it relates to lifestyle and choices.
- Self-reflection and self-evaluation in relation to challenges and resources.
- Setting achievable goals, using motivators, setting a realistic change agenda.
- Recognizing difficulties inherent in personal change.

HEALING 1: CARING FOR INDIVIDUALS EXPERIENCING COMMON HEALTH CHALLENGES

Course Description

This course introduces students to the normal structure and function of the human body and normal bodily changes associated with aging. Students will explore common challenges to health and healing in relation to each body system. Students will also be encouraged to explore person-centred practice as it relates to the common challenges to health and, in particular, to end-of-life care.

Minimum course hours: 115

Learning Outcomes

1. Display an understanding of the structure and function of the human body and normal changes associated with aging:

    - Describe the organization of the human body: cells, tissues and organs.
    - Describe the structure and functions of the major body systems.
    - Discuss the natural changes in each system associated with aging.

2. Display a sound understanding of common challenges to health and healing:

    - Discuss the experience of illness, disability and common challenges to healing.
    - Discuss the experience of chronic illness and implications for care.
    - Describe common health challenges related to each body system:
        - Integumentary.
        - Musculo-skeletal.
        - Cardiovascular.
        - Respiratory.
        - Digestive.
        - Urinary.
        - Reproductive.
        - Endocrine.
        - Neurological.
        - Sensory Challenges.
        - Multi-organ (cancer, AIDS).

- Describe common developmental health challenges.

3. Discuss nutrition as it relates to healing:

   - Discuss nutrition in relation to common health challenges.
   - Identify components of common special diets.
   - Identify community resources to support clients' dietary needs.

4. Describe ways to organize, administer and evaluate person-centred care and service for clients experiencing common health challenges:

   - Discuss person-centred/caring approaches appropriate for specific health challenges.
   - Describe aspects of critical thinking and problem-solving that should be utilized when caring for individuals experiencing common health challenges.

5. Demonstrate an understanding of the components of person-centred, end-of-life care for clients and families:

   - Discuss the philosophy and principles of care used in hospice and palliative care settings.
   - Describe caring and problem-solving as these relate to end-of-life care in facilities and in community settings.
   - Discuss elements of legal/ethical practice in end-of-life care.
   - Describe common reactions/experiences as people approach death.
   - Discuss physical, emotional, cognitive and spiritual needs of the dying person and appropriate interventions.
   - Discuss common reactions of family members and ways to support the family.
   - Describe processes involved in the care of the body after death.
   - Discuss the effects of a client's death on the health care workers involved in the dying process.
   - Display an understanding of the importance of and ways to provide self-care for the care-giver following a death.

Course Content

Medical Terminology

- Word elements.
- Abbreviations.

Structure and function of the human body

- Organization of the human body: cells, tissues and organs.
- Major body systems:
  - Integumentary.
  - Musculo-skeletal.
  - Cardiovascular.
  - Respiratory.
  - Digestive.
  - Urinary.
  - Reproductive.
  - Endocrine.
  - Nervous.
  - Immune.
- Natural changes associated with aging.

Challenges to health and healing

- The experience of illness and disability
- Common challenges to healing:
  - Transitions.
  - Loss.
  - Pain.
  - Illness.
  - Death.
- Broad effects on the individual and family of health challenges (i.e. changes in physical health can be expected to also affect social, emotional, cognitive and spiritual health).
- Common disorders related to each body system (relevant examples in parenthesis):
  - Integumentary (pressure ulcers, pain).
  - Musculo-skeletal (falls, fractures, contractures, arthritis, osteoporosis, pain).
  - Cardiovascular (hypertension, hypotension, edema, coronary artery disease, blood clots, heart failure, CVA-stroke).
  - Respiratory (cyanosis, dyspnea, apnea, orthopnea, hyperventilation, hypoventilation, COPD, asthma, pneumonia, TB).
  - Digestive (vomiting, diarrhea, dysphagia, lack of appetite, dehydration, constipation, obesity, hiatal hernia, diverticular disease, irritable bowel syndrome, celiac disease).

  - Urinary (urinary tract infections, renal failure, hepatitis).
  - Reproductive (BPH, STIs, erectile dysfunction).
  - Endocrine (diabetes, hyper/hypothyroidism).
  - Neurological (stroke, Parkinson's disease, multiple sclerosis, ALS, acquired brain injuries, spinal cord injuries).
  - Sensory Challenges:
    - Normal sensory changes of aging.
    - Speech and language challenges (aphasia, apraxia, dysarthria).
    - Hearing and visual challenges.
  - Multi-organ (cancer, AIDS).
- Developmental health challenges (Down's syndrome, autism spectrum, fetal alcohol, fragile X, PKU)
- Chronic illness:
  - Basic definition and concepts
  - Implications for care
  - Focus on self-care
  - Community and consumer resources related to various health challenges
- Applying critical thinking and problem-solving when caring for individuals experiencing common health challenges in various health care settings (residential, community, acute care):
  - Gathering information.
  - Sources of information (e.g. care plan, health care team, client).
  - Observing changes in the client.
  - Establishing priorities for care with consideration given to client acuity.
  - Carrying out plan of care.
  - Evaluating effectiveness of care.
  - Reporting and recording.

Nutrition and Healing

- Nutrition in relation to health challenges.
- Cultural differences.
- Special diets:
  - Modified diets.
  - Restricted diets.
  - Diabetic diet.
  - High protein diet.
  - Liquid and pureed diets.
  - Community resources to support clients' dietary needs.

End-of-Life Care

- Hospice and palliative care – philosophy and principles of care.
- The journey of dying – understanding and coming to terms with death and dying.

- Caring and problem-solving as related to palliative care in facilities and in community settings.
- Legal/ethical practice and safety in palliative care.
- Quality of life issues – honouring the individual and family/rituals.
- Common reactions/experiences as people approach death.
- Physical, emotional, cognitive and spiritual needs and appropriate interventions.
- Comfort measures for:
  - Pain.
  - Breathing challenges.
  - Challenges with eating and drinking.
  - Dehydration.
  - Bowel function.
  - Restlessness.
  - Delirium.
- Common reactions of family members and ways to support the family.
- The moment of death and care of the body after death.
- Grief and grieving.
- Self-care for the care-giver:
  - Personal and professional boundaries.
  - Recognizing the impact of loss on the care-giver.
  - Recognizing signs of and preventing stress and burnout.

HEALING 2: CARING FOR INDIVIDUALS EXPERIENCING COGNITIVE OR MENTAL CHALLENGES

Course Description

This course builds on content from other courses to assist students to explore concepts and care-giving approaches that will allow them to work effectively with individuals experiencing cognitive or mental challenges. The emphasis in this course is on supporting clients with dementia, recognizing responsive behaviours and identifying person-centred intervention strategies.

Minimum course hours: 60

Learning Outcomes

1. Describe ways to organize, administer and evaluate person-centred care and assistance for clients experiencing cognitive health challenges (dementia):

    - Use an informed problem-solving process when caring for individuals experiencing cognitive health challenges.
    - Base choices and actions on a sound understanding of the physical, cognitive and psycho-social processes of various kinds of dementia.
    - Base choices and actions on an understanding of environmental influences on behaviours.

2. Describe ways to organize, administer and evaluate person-centred care and assistance for clients experiencing mental health challenges (other than dementia):

    - Use an informed problem-solving process when caring for or providing assistance for individuals experiencing mental health challenges.
    - Identify factors that influence the mental health and well-being of individuals.
    - Tailor interactions and responses based on an understanding of common mental health challenges.
    - Cope constructively with unanticipated or unusual situations.

3. Demonstrate an understanding of effective approaches to disruptive or abusive behaviours:

- Describe types of abuse/abusive relationships and the cycle of abuse.
- Identify behavioural indicators that an individual or group is becoming disruptive, abusive or out-of-control.
- Utilize calming non-verbal techniques to prevent or de-escalate disruptive or out-of-control behaviours.
- Utilize appropriate verbal techniques to prevent or de-escalate disruptive or out-of-control behaviours.
- Know when to exit a potentially unsafe or abusive situation.

Course Content

Cognitive Challenges in Older Adulthood

- Confusion and dementia.
- Common causes of reversible changes in mental functioning.
- Primary forms of irreversible dementia:
  - Alzheimer's disease.
  - Other dementias.
- Forms and causes of various dementias – pathology, processes and characteristics.
- Philosophies and models of care.
- Importance of life review in care of individuals with dementia.
- Stages of dementia and common behavioural manifestations and unique responses.
- Myths and stigmas associated with dementia.
- Cultural differences in perceptions of dementia.
- Effective communication strategies for clients with dementia
- Responsive behaviours – factors precipitating behaviours.
- Importance of environment in relation to behaviours.
- Strategies for working with individuals exhibiting responsive behaviours.
- Appropriate activities for individuals experiencing differing levels of dementia.
- Working effectively with individuals experiencing early, moderate or severe dementia.
- Assessing situations and individuals.
- Responding to or preventing responsive behaviours, including client to client behaviour.
- Knowing when to exit a potentially unsafe situation.
- Supporting family members experiencing grief and loss.
- Caregiver needs and support

Abuse

- Types of abuse:
  - Physical, sexual, financial, emotional, neglect.
  - Self-neglect.
- Abusive relationships:
  - Caregiver/Client.
  - Client/Client.
- Cycle of abuse.
- Responding to or preventing abuse.
- Recognizing and reporting signs of abuse.

Mental Health Challenges

- Causes and common treatment of mental health challenges.
- Common mental health disorders:
  - Anxiety disorders.
  - Affective or mood disorders.
  - Schizophrenia.
  - Personality disorders.
  - Substance abuse disorders.
  - Dual or multi-diagnoses.
- Myths and stigmas associated with mental health challenges.
- Cultural differences in perceptions of mental health challenges.
- Caring for the person and family.
  - Principles and approaches used to plan and implement effective care.
  - Person-centred care.
  - When and what to report.
- Implications of Involuntary Admission under the Mental Health Act.
  - Alteration of client's right to leave the care setting or to refuse treatment.
- Suicide risks and prevention.

HEALING 3: PERSONAL CARE AND ASSISTANCE

Course Description

This practical course offers students the opportunity to acquire personal care and assistance skills within the parameters of the HCA role. The course is comprised of class and supervised laboratory experiences which assist the student to integrate theory from other courses to develop care-giver skills that maintain and promote the comfort, safety and independence of individuals in community and facility contexts.

Minimum course hours: 120

Learning Outcomes

1. Perform personal care skills in an organized manner ensuring the comfort and appropriate independence of the client:

    - Organize and implement care according to client needs.
    - Encourage independence of the client as much as possible.
    - Encourage client communication and engagement during personal care.
    - Maintain client privacy and dignity.
    - Assist the client with personal hygiene and grooming.
    - Assist the client with movement and ambulation.
    - Use aids to promote comfort, relaxation and sleep.
    - Take and record vital signs accurately (temperature, pulse, respirations).
    - Assist the client to meet nutritional needs.
    - Assist the client with medication.
    - Provide specialized, sensitive care for the dying client in line with palliative care principles.

2. Apply an informed problem-solving process to the provision of care and assistance:

    - Assess the client and situation.
    - Observe changes in the client's health status.
    - Set priorities or make adjustments to the care process based on client requirements.
    - Identify priorities for care within the care plan.