



新北市政府職業訓練中心

Vocational Training Center, New Taipei City Government

E-learning for new immigrants

新住民 網上學



Single-level certificate for caregivers

contents

01 Exam Tips for Aspiring Care Workers P01

02 Vital Signs Measurement P03

03 Adult Choking First Aid P05

04 Adult Cardiopulmonary Resuscitation (CPR) P07

05 Meal Preparation, Feeding, and Medication Assistance P09

06 Washing Hair and Changing Clothes P11

07 Perineum Washing and Urinary Catheter Cleaning P13

08 Assisting with Getting In and Out of Bed and Sitting in a Wheelchair P15





In today's aging society, becoming a care worker is a highly valuable career. It is open to all genders and nationalities. Everyone can learn this skill. Once you obtain a valid care certificate, you can work in medical institutions and long-term care systems. These places allow you to fully utilize your skills. Now, I will teach you how to obtain this certificate and what preparations you need. First, to become a care worker, proper attire is crucial for our convenience at work and to avoid unnecessary harm when interacting with clients. Wear well-fitting short-sleeved tops, casual long pants, an apron, and closed shoes. For convenience, carry a watch with a second hand in your pocket. Regarding grooming, hair should be neatly tied, long hair should be securely tied back to avoid contamination

during operations, which could lead to point deductions. Nails should be of moderate length, and avoid wearing accessories or bracelets. First, let's look at the adult choking model. This manikin will be used for the adult foreign object choking rescue test. The model features a passage from the mouth to the trachea to simulate a client's trachea with a foreign object lodged. We must use the correct pressing method to remove the foreign object. Next, let's get to know the adult CPR manikin. This is used for the adult CPR test. The model includes a monitor to identify if the pressing position, pressure, and ventilation volume are correct and adequate. Next, we introduce the meal preparation, feeding,



and medication assistance manikin. The manikin has a nasogastric tube. This nasogastric tube directly reaches the stomach for practical medication administration during the test. Finally, let's talk about the general manikin. This is used for exam questions, including perineal washing, catheter cleaning, and helping clients move to and from bed, and into a wheelchair. The perineal washing and catheter cleaning manikin will be provided according to the test. Besides manikins, the test site will provide tools for various tasks. In the vital signs measurement test, a real person will act as the client. We'll need to learn to use a blood pressure monitor and ear thermometer. Note that for tests of meal preparation, feeding, and medication assistance, many tools will be used,



similar to those
in your home kitchen.
For bed transfer
and wheelchair tests,
keep the client warm
after the client is transferred to the wheelchair,
and don't forget socks and shoes.
Lastly,
let's talk about the hair washing test.
We will use a shampoo basin,
pay special attention to the water outlet,
and remember to place a wastewater bucket to
catch the water.
I believe that during the pandemic,
everyone has developed good handwashing
habits.
Besides keeping those habits,
it is essential for professional care workers
to practice proper
handwashing techniques.
Now, I will explain
the steps for correct handwashing.
The steps are:

First, turn on the faucet,
wet your hands,
turn off the faucet,
then apply one or two drops of liquid soap in
your palms.
Next, rub your palms together
for 5 to 10 times.
We can use the shorthand memorization tip, or
inside-outside-between-knuckles-thumbs-
fingertips-wrists, to remember the steps.
Next, rub the back of each hand
with the soap foams
for 5 to 10 times.
Then, wash between your fingers
for 5 to 10 times.
Pay special attention to the folds of your fingers,
as most people often miss them.
Bend your fingers,
rub the back of your fingers in your palm for 5 to
10 times,
switch hands and repeat.
Then clean your thumbs by wrapping one hand
around the thumb of another hand,

rub for 5 to 10 times.
Switch hands
and repeat for 5 to 10 times.
Then, your fingertips.
First, place them
in the other palm,
rub for 5 to 10 times,
and switch hands and repeat the same steps.
Lastly, clean your wrists up to two inches
by rubbing 5 to 10 times.
Ensure that
both wrists are clean.
Then, turn on the faucet,
rub your hands under running water
to rinse off all soap foams.
After you finish,
hold the water
to rinse off the faucet foam,
then turn off the faucet.
Finally, shake off
excess water from your hands.
Be extra careful not to touch the sink.
Next, take a paper towel

ideally, one sheet at a time.
Thoroughly dry your hands,
and then dispose of the towel in the trash.
Pay attention that you need to
keep your clean hands
away from unnecessary contact
to avoid contamination.
Lastly, I want to remind everyone that
regardless of age or gender,
anyone could be our client.
Safety, comfort, and care
are essential principles
for every care worker.





Recently, the weather has been unpredictable—sometimes hot, sometimes cold.

Elderly individuals with poor blood circulation are prone to dizziness and discomfort.

Those with elderly family members will certainly understand this well.

How can we regularly monitor our own health?

Today, we will learn about the vital signs measurement test for care worker certification.

This test will be administered by a staff member acting as the client. In addition to performing the measurements, you must also greet the client and accurately explain the condition of the equipment. Be sure to be thorough.

The scenario for this question is: Mrs. Chen feels unwell after waking up, and the care worker needs to measure her vital signs.

Mrs. Chen, I'm the care worker. Are you not well?

I am not feeling well right now.

Alright, I'll take your vital signs.

Let me get the equipment ready. Please rest for a moment.

The items used in the exam room include...

When you get to the bedside, remember to pull the curtain to ensure the client's privacy.

Next, lower the bed rails

to make it easier to work.

Mrs. Chen, I'll start by measuring your ear temperature.

The ear thermometer looks fine.

The battery is working.

Mrs. Chen, I'm going to gently pull your ear backward and upward to make sure the ear canal is clear.

If there's any earwax, I'll clean it.

The ear canal is clear.

Temperature is 37.1°C, which is normal.

Now, I'll check your pulse.

Locate the radial artery.

Let's get started.

For measuring the pulse, use a watch with a second hand and count for one minute.

All done.

Mrs. Chen, we'll check your pulse again.

When measuring respiration, we will be sure to check the pulse again to avoid letting the person know we're measuring their breathing.



Since people can control their breathing, we do this to ensure accuracy and typically don't let them know we're checking their breathing. Measure for one minute.

Done.

You should measure the client's breathing for one minute.

Next, we'll measure blood pressure.

Locate the brachial artery.

The blood pressure monitor looks fine.

Make sure the battery is working.

Attention, students:

When measuring blood pressure, pay attention to the marker line.

Make sure to align the marker line on the cuff with the brachial artery we located earlier.

This alignment is crucial for accurate readings.

After placing the cuff, ensure that the marker line is straight

and check that there's enough room—about a two-finger width—between the cuff and the elbow.

This is the most accurate approach.



You'll get two numbers
when measuring blood pressure:
the systolic pressure
(the higher number)
and the diastolic pressure
(the lower number).
Make sure to record both values on your chart.
The measurement unit
is mmHg.
Mrs. Chen, we've finished measuring your
blood pressure.
I'll now remove the cuff.
If we need to take a second measurement,
please move your arm a bit
before we start again.
Your systolic pressure is 132 mmHg,
and your diastolic pressure is 72 mmHg,
which are within the normal range.
Mrs. Chen,
your temperature is 37.1°C,
your pulse is 70 beats per minute,
your respiration rate is 15 breaths per minute,
and your blood pressure is 132 mmHg systolic

and 72 mmHg diastolic—
all within normal limits.
I'll report these values to the nurse shortly.
I'm going to clean up the equipment now.
Please rest for a moment,
and I'll come back to keep you company.
Pulling up the bed rails is an important measure.
Students, remember,
this is essential for ensuring our client's safety.
Grandma, look -
your blood pressure is a bit low.
You really shouldn't skip breakfast.
I want to stay slim,
and I'm afraid that eating breakfast will make me
gain weight.
No, you need to have breakfast.
Skipping it will only make you feel dizzy.
Alright, I'll eat breakfast next time.
And having breakfast won't make you gain
weight, you know.
Really?
Yes.
I thought it would.

No, it won't.
How about this: you can drink some milk.
Have an extra glass.
Okay.
That way, your blood sugar won't drop,
and you won't feel dizzy.
Got it.
Breakfast ...
won't make you gain weight.
In your daily life,
it's helpful to monitor things like
your heart rate, pulse,
breathing, blood pressure,
and even temperature.
By tracking these over time,
any changes
can give you useful information
about your health.
After today's lesson, I'm sure you'll
understand your body better,
which will help improve your well-being
and that of your family.





Many of us have experienced choking on something in our daily lives. Today, we're going to learn about adult choking first aid for the care worker certification. This training will use a special manikin to simulate the scenario. Pay particular attention to the position and force of the compressions. Although this simulation uses a manikin, verbal expressions are also a crucial aspect. Amidst various candies and snacks, we sometimes overlook chewy jelly, mochi, and even nuts. These foods can easily cause choking. Especially for people with poor teeth, they usually swallow such food directly, which can lead to it getting stuck in the throat or even blocking the airway. So, when eating these foods, cutting them into small pieces can greatly reduce the risk of choking. The scenario for this test is that Mr. Wang, the client, is sitting in a chair eating lunch

when he suddenly chokes on something. Although he is conscious, he cannot speak or cough out the object. The care worker suspects a choking incident. Students, please note that when introducing this choking first aid method, you must not wash your hands at the beginning. If you wash your hands at the start, you will fail. Only wash your hands after finishing the test. Mr. Wang, what's wrong? Are you choking? Let me help you. I'll move you to a chair without armrests. At this time, it's important to remember that the rescuer must wrap their arms around the client's upper abdomen. Be careful not to drop the manikin to the floor during this process. If it falls, you will not pass. When positioning the manikin on a chair without armrests, the rescuer can use either a single-kneeling or a double-kneeling position, depending on their preference.



then use the other hand to find the xiphoid process along that line. The thumb and index finger of the hand on the navel should press against the upper abdomen. Cover the fist with the other hand, placing it between the xiphoid process and the navel. Ensure your chin is braced against the client's shoulder to maintain stability. Next, perform a series of quick, inward and upward thrusts. We will remove the manikin's shirt to demonstrate the correct position for the compressions. Students, make sure to locate the navel on the manikin. Place both hands above the navel, then extend one hand... either one of the hands will do just the one you are comfortable with... extend the hand upward to find the xiphoid process.



Where is the xiphoid process?
It's located at the top of the ribcage where there's a slight dip.
That is the xiphoid process.
Make a fist with the hand closest to the navel.
As you make a fist, ensure that the thumb and index finger are pressing against the abdomen.
Once the position is confirmed, cover the fist with the other hand.
Perform quick, forceful, inward and upward thrusts.
You have to ensure that your chin is braced against the client's shoulder.
Okay, this is the way to perform the thrusts.
Students, if the foreign object isn't expelled after the first thrust, don't worry.
Take a breath,

reposition your hands and try again.
Ensure your chin is locked against the client's shoulder to make the compressions effective.
Mr. Wang, the object has been removed.
I'll move you back to your original chair now.
Students, be careful not to drop the manikin when lifting it.
If it falls, you will not pass.
Gently place the manikin back on the chair.
Once settled, provide some health education to the manikin.
Mr. Wang, the object has been removed.
In the future, be sure to cut your food into small pieces before eating.
This is especially the case with soft and chewy

foods, and you have to cut them into even smaller pieces, and chew slowly and swallow carefully.
Rest here while I wash my hands and return to accompany you.
Grandma, I'm sorry.
In the future, I'll cut these foods into small pieces for you so you can enjoy them without worry.
It will give me peace of mind while you eat.
Alright.
I'll eat in small bites and chew slowly.
I was really scared just now.
Really!
I was shocked too.
I must have taken too big of a bite.
That's why I'll cut your food smaller.
It was so tasty that I took too big of a bite, which caused the choking.

Sorry I scared you and I was scared too.
Finally, a reminder to all students: when performing the abdominal thrusts for an adult seated client, you must use quick, forceful compressions to expel the foreign object from the airway.
Even though this test uses a manikin, showing empathy and concern for the client after the object is expelled is also crucial.





When the temperature drops suddenly, people with cardiovascular diseases often faint suddenly. If someone around us experiences this situation, how should we handle it? Today, we will learn adult cardiopulmonary resuscitation, or CPR, for the care worker certification. This training will use a special manikin to simulate the scenario. Everyone should pay special attention to the position of the compressions. Only by performing each action correctly can you pass the test successfully. The scenario for this test is that the care worker enters Mrs. Chen's bedroom and finds her bedridden with purple lips and no apparent breathing. Mrs. Chen, how are you today? Mrs. Chen... Mrs. Chen's lips are purple, and she seems to not be breathing. Please call 119 and prepare the AED. Since Mrs. Chen's home has a spring mattress, CPR cannot be performed there.

So I will move her to a flat surface. Find the correct position: The midpoint of the line connecting the nipples, just above the sternum. One, two, three, four, five, six, seven, eight, nine, ten, eleven, twelve, thirteen, fourteen... Students, please note: When your hands are fixed on the client's chest, do not bounce or move. The arms should not bend, and the body should not sway during the procedure. The palms and fingers on the client should not be completely pressed against the client's chest. The compression depth should be about 5 to 6 cm, using the force from the back and shoulders, pressing vertically down. Maintain steady pressure without using sudden force, then release. When releasing, allow the chest to fully recoil



without lifting your hands off the sternum. The compression rate should be 100 to 120 times per minute. Perform 30 compressions in a sequence. One, two, three, four, five, six, seven, eight, nine, ten, eleven, twelve, thirteen, fourteen, fifteen, sixteen, seventeen, eighteen, nineteen, twenty, twenty-one, twenty-two, twenty-three, twenty-four, twenty-five, twenty-six, twenty-seven, twenty-eight, twenty-nine, thirty. Tilt the head back and lift the chin, check for breathing. I feel no breathing. Check for any foreign objects in the mouth. If there are foreign objects, clear them. There are no foreign objects in the mouth. Tilt the head back and lift the chin. Pinch the client's nose tightly and place the face shield over the client's mouth. Make sure the face shield's non-woven fabric aligns with the client's mouth. Open your mouth wide



and cover the client's mouth completely.
Give two breaths,
each lasting about one second.
Make sure to give these breaths intermittently,
not continuously.
If the chest doesn't rise with each breath,
it might mean there's an obstruction.
You will need to recheck
if there are any foreign objects in the mouth.
Next, check the carotid pulse.
If there's no pulse,
continue with CPR:
with the 30:2 rate -
meaning 30 chest compressions
followed by 2 breaths.
Complete a total of 5 cycles.
Out of these 5 cycles,
you need to achieve at least 3 cycles
with 20 effective compressions (green lights)
per cycle to pass.
The goal of chest compressions is that
through our effort,
we can help the heart

pump blood throughout the body.
A quick reminder:
CPR should only be
used for cases of cardiac or respiratory arrest.
It should not be performed
on someone with normal vital signs,
as it could
put them at risk.
So,
practice
on manikins,
not on real people.
Check the carotid pulse.
Confirm breathing,
and look for any slight movements in the limbs.
Check if there are pulses,
keep performing CPR if there are no pulses.
If there is a pulse but no breathing,
give artificial respiration
at a rate of 12 breaths per minute.
For unconscious individuals, use the recovery
position.
Students,

mastering this technique
will not only help you pass your exam
but also enable you
to assist others
in life-threatening situations.
Students,
here you have to note this -
After you finish the CPR test,
remember to use
the recovery position.
For the recovery position,
you need to fully straighten both the hand and
foot
that are touching the ground.
Your elbows should be on the floor,
and any arms not touching the ground
should be bent
with elbows flat on the floor.
Place your mouth against the back of your hand.
For your feet-
The knees should be flat on the floor,
and the ankle should be crossed over the other
leg on the floor.

This position
is called the recovery position.
It helps ensure
the patient
can breathe more easily.
Next,
wait
for the ambulance to arrive
and transport the patient.
Keep warm and transport to the hospital.
During transport,
keep an eye on the patient's breathing and
pulse.
A special reminder:
Before we suspect someone needs CPR,
we must first assess their consciousness.
CPR should only be performed
if the person is unconscious
or in shock.
Never perform CPR
on someone with normal vital signs.





When faced with elders at home who cannot swallow normally or even have a nasogastric tube, do you feel troubled about how to prepare meals?

Today, we will learn about meal preparation, feeding, and medication assistance in the care worker certification exam. There are many details in the video, so please watch carefully.

Grandma Sun,
I'm your caregiver.

Today, I will help you with meal preparation. I'll cook your favorite fish and vegetable porridge.

I'll go get the things ready. Please wait here for a moment.

First,
we need to wash all our ingredients and utensils,
all of them,
before using them.

Place the pot
on the stove
and add one and a half bowls of water.

Heat the water first.

Next, we take our rice...
the exam supervisor will provide the rice,
so we don't need to prepare it ourselves...

and dissolve the rice completely in the water and cook it.

For this cooking task,
follow the order to first add the rice,
then the fish,
and finally the vegetables.

Before cooking the fish,
give it a quick rinse,
then cut it
into 0.2 cm pieces.

When adding the fish to the pot,
make sure
to stir it a bit.

After that,
prepare the vegetables by washing them.

Usually,
bok choy will be provided in the test.

When washing bok choy,
you will need to
start by
washing the stems first,
then the leaves.

Each piece should be washed individually,
not together.

There is no strict rule about
whether to cut the stems or leaves first.

While chopping the vegetables,
be careful to
monitor the pot
to ensure it doesn't overflow.



Once the vegetables
are finely chopped,
they can be added to the pot.

When adding the vegetables,
be cautious
not to drop them outside the pot.

Be careful
when adding salt.

It's important
not to add too much or too little.

Since Grandma Sun has high blood pressure
and high blood sugar,
the food should be light.

After cooking
and seasoning,
we start the taste test.

For the taste test,
remember that
our test now requires
students to actually
taste the food
to confirm its taste.

We'll then serve Grandma Sun
an appropriate portion size,
which is generally about 80% full.

We'll get a cup
and filling it with water.



We also need to prepare a bib for Grandma Sun. Grandma Sun, it's time to eat. Today, I made your favorite fish and vegetable porridge. The temperature is just right. Let's begin. First, let me put this bib on you. There, eat carefully and don't choke. During the test, students should remember that while we scoop rice, we should scoop only half a spoonful of it at a time. In the test, you'll be evaluated based on five spoonfuls. Grandma, we're done eating now. Let's rinse your mouth. Here, spit into this bowl. After eating, you should rest for thirty minutes without lying down flat. Stay seated here while I prepare your vitamins. Keep the bib on for now, and I'll be back shortly to give you your vitamins.

When handling medication, always observe and check for any signs of deterioration, abnormality, or moisture. Make sure the medication is safe before crushing it. Be very careful during this process to avoid spilling the medication outside the pill crusher. Once the medication is crushed into powder, transfer it to a medicine cup and use a medicine spoon to carefully scrape off any remaining powder from the pill crusher. The instructor will inspect the pill crusher and spoon for any leftover medication. Afterward, fill the cup with water up to about 80% to completely dissolve the medication. When getting ready to give Grandma Sun her medication, prepare a syringe, the medication, a medicine spoon, and a water bottle, and bring them to her bedside. Then, provide Grandma Sun

with her medication. Grandma Sun, it's time for your vitamin C. I'll start by removing your nasogastric tube. First, we will need to note that before administering medication through the nasogastric tube, use the syringe to withdraw to check that the tube is functioning properly. Once the tube is confirmed to be working, pour 30cc of water to ensure it's clear before administering the medication. When giving the medication, make sure to check the right person, right time, right dose, and right method – this is the crucial "three checks and five rights" technique. Finally, flush with at least 30cc of water to ensure the medication is fully dissolved in the stomach. After confirming everything, remove the syringe and secure

the nasogastric tube back to her collar. Grandma Sun, we've finished your vitamin C. Let me take off your bib now. Students, In this series, we'll handle the post-care tasks at the end. This way, we can manage our time effectively. After finishing the tasks, clean and restore all items and wipe the table clean before informing the instructor, Instructor, I have completed this topic. I believe that after today's lesson, you'll have a better understanding of preparing meals for the elderly and you'll be more organized and less flustered during meal prep.





When caring for someone who has been bedridden for a long time, you often need to change their clothes and wash their hair.

Today, we'll go over the hair washing and clothing changing tasks for the care worker certification exam. In this exam, a real person will act as the patient, so make sure to explain what you're doing and keep an eye on the patient's condition to do well.

You'll use these items for the exam...

For today's scenario: Grandma Wang has been bedridden for years due to a stroke and left-side paralysis. She hasn't washed her hair in several days and usually uses conditioner.

Hello, Grandma.

I'm your caregiver.

Since it's been a while since your last hair wash,

I'll help you with that and apply some conditioner.

I'll also change you

into fresh clothes.

Let me get everything ready.

Please wait a moment.

Pull the curtain for privacy.

Make sure to wash your hands

before setting up.

Place a rolled-up large towel and a plastic sheet

under the patient's head to keep the bed dry.

When setting up the shampoo basin, to ensure the wastewater can flow smoothly into the waste bucket, we place a towel folded into a rectangle under one side of the shampoo basin. This helps elevate the basin, allowing the water to flow out more easily.

The water temperature is just right. Be sure it is around 41 to 43 degrees Celsius. Grandma, is this water temperature okay? I'm going to wet your hair now.

Once the hair is wet, take an appropriate amount of shampoo and lather it in your hands until it forms foam. Then, start washing the hair. Remember to use your fingertips to gently massage the scalp, not your nails.

Then, be sure to start with the left side, then move to the right side, and finally wash the back of the head. Make sure to clean the entire scalp thoroughly.



At the same time, check the health of the scalp. Grandma, your scalp looks good—no dandruff, no sores, and it's very healthy. Is there any other area you think needs more attention? It's okay. After rinsing the foam off your hands, rinse the foam from the patient's hair. While rinsing, be mindful of the water temperature and the amount of water used. Avoid splashing water on the patient's face, body, or forehead. If any water splashes, make sure to wipe it off and keep an eye on the water level in the basin to prevent overflow. Always ensure the wastewater flows into the waste bucket. There's no more foam.



I'll apply conditioner.
After rinsing out the foam,
take a small amount of conditioner
and rub it in your hands.
Apply the conditioner
to the patient's hair,
gently massaging it in,
and then rinse it out thoroughly.
As before,
rinse the foam from your hands first,
then rinse the conditioner from the patient's
hair.
Pay special attention
to the forehead
and around the ears during rinsing.
Use your hands to block the water to prevent it
from getting into the patient's eyes
or ears,
which could be uncomfortable.
Take your time while washing
to ensure all the foam
is thoroughly rinsed out.
If there isn't enough clean water,

just go get more,
but always
keep the patient's safety in mind.
Once you're done rinsing,
make sure there is no foam left.
Then, wrap a towel
around the patient's head
to keep them warm.
After that, move the shampoo basin away.
Next, use the towel to gently dry
the patient's hair,
getting as much moisture off as you can.
Students, you can use a hairdryer
to help dry the patient's hair,
but be cautious that the temperature can not be
too high.
Focus on
drying the hair roots of the patient,
and avoid making the patient's scalp too hot,
as that can be uncomfortable.
After tidying up the hair,
remove the large towel and plastic sheet.
Start changing the clothes

from the healthy side of the patient's body.
While changing clothes,
always keep the patient warm
and avoid exposing them unnecessarily.
Respect their privacy throughout the process.
Let's turn your body over.
Hold onto this side with your hand.
When dressing the patient,
begin with the injured arm.
Be gentle
when turning the patient.
Fasten the buttons.
Finally, remember to put the pillow
back in its original position
so the patient can lie down comfortably.
Grandma, we've finished washing your hair
and changing your clothes.
How do you feel?
Great, then take a rest.
I'll tidy up
and come back to keep you company.
Pull the curtain back.
In the end,

after you've completed everything,
use a mop to check
if the floor is dry
and make sure all items are put back in their
place.
That wraps up the test.
Washing hair in bed isn't easy.
Be gentle with your movements.
If water splashes,
it could affect your score.





Today, we will learn about perineum washing and urinary catheter cleaning in the care worker certification exam. We will use manikins of different genders for simulation. This test is one of the most important tasks in our caregiving services. Grandpa Tang, since you use a catheter, I will help you with perineal cleaning and catheter disinfection today. After explaining today's tasks to the patient, wash your hands thoroughly and prepare the necessary items. The items we need to read out loud the expiration dates for include: Large cotton swabs, manufacturing date May 2, 2022, expiration period 3 years, still within the valid period. After preparing all items, move to the patient's bedside and draw the curtain for privacy. Draw the curtain. Lower the bed rail. Place a waterproof sheet

between the waist and hips. Grandpa, I'm going to take off your pants now. Remove the patient's pants to the knee position, then fold the catheter tube and pass the urine bag and catheter through the right pant leg. Place the bedpan under the patient's hips. Make sure the upper garment is tucked under the bedpan, take a pillow to support the left leg, raise the head of the bed, bend the patient's right leg, wrap a towel around the calf, and place the emesis basin next to the bedpan. Then tear four pieces of breathable tape, stick them at the foot of the bed for later use, remove the tape fixed on the catheter, take an appropriate amount of toilet paper, place it over the perineum, put on gloves, and prepare to start cleaning. Open the end of the large cotton swab pack, take out a cotton swab, dip it in basin water and soap, and start cleaning.



Gently pull back the foreskin to expose the glans, clean around the glans in one complete circle. Then, use a new cotton swab dipped in clean water to rinse. Note: Cotton swabs should not be reused. Next, dampen the towel in the basin, wring it out, fold it to the width of a palm, apply soap, and while narrating, wipe the area clean. Wash the penis, top, left, right, bottom, left scrotum, right scrotum, and then to anus. After cleaning, pour water from the kettle to rinse again. Make sure not to scrub back and forth. Finally, use a tissue paper to wipe off any moisture on the inner thighs. Next, put on new gloves. Open the small cotton swab package from the end and take out five to six cotton swabs. Dip the swabs in iodine.



Using a circular motion, disinfect the catheter from the urethral opening, extending five centimeters along the catheter, using one cotton swab each time. Then, take out five to six more cotton swabs, moisten them with saline, and clean along the catheter in the same way, extending five centimeters from the urethral opening. Grandpa, I'm going to remove the bedpan now. After disinfection, remove the bedpan and use tissue papers to wipe any moisture from the buttocks. Then, secure the catheter to the patient's body. Make sure to remove your gloves so the breathable tape doesn't stick to them, which can hinder the operation. After securing the catheter, lower the bed head, put the pillow back, and remove the emesis basin and towel. Finally, help the patient put on their pants, cover them with a blanket, draw back the curtain,

and document the patient's condition. Dispose of the bedpan contents and gloves in the infectious waste bin. After all items are put back in place, remember to wash your hands. Next, we will demonstrate female perineal cleaning and urinary catheter cleaning. As always, explain the tasks we will be performing today to the patient. Confirm that the water temperature is between 41 to 43 degrees Celsius. Grandma, let's check the water temperature. Is this okay? Once the water temperature is confirmed, proceed with rinsing from top to bottom. The first cotton swab: from the urethral opening to the anus. The second swab: from the far labia minora to the anus. The third swab: from the near labia minora to the anus. The fourth swab: from the far labia majora to the anus.

The fifth swab: from the near labia majora to the anus. Remember, used cotton swabs cannot be reused. Then take new cotton swabs, repeating the same sequence, and gently pat the perineal area dry. After checking the urine bag, open the small cotton swab package from the end, take out five to six cotton swabs, and moisten them with iodine. Gently pull out the catheter about 0.5 centimeters and disinfect it in a circular motion. Then clean from the catheter to the urethral opening, extending five centimeters, using one swab each time, repeating five to six times in total. Afterwards, use five to six cotton swabs moistened with saline to remove any remaining iodine, just like in the previous step. Wipe off any moisture on the inner thighs.

Be sure to do this in one direction only. Finally, remember to secure the catheter with breathable tape in a crisscross pattern. After securing, lower the bed head, put the pillow back, and remove the emesis basin and towel. Help the patient put on her pants, cover her with a blanket, draw back the curtain, and document the patient's condition. Grandma, we've finished the perineal wash today. I'll clean up the tools and come back to keep you company. This test is quite complex. While practicing, be sure to pay attention to all the details to pass the exam successfully.



Single-level certificate for caregivers

Assisting with Getting In and Out of Bed and Sitting in a Wheelchair

p15

Today, we're going to learn about assisting with getting in and out of bed and sitting in a wheelchair, which is part of the care worker certification exam.

The main focus of this exam is on the correct use of a wheelchair and how to safely help someone get in and out of bed.

Mr. Wang, hello.

I'm your care worker.

The weather is perfect today, and I'd like to take you outside to enjoy the sun.

Please give me a moment to get everything ready.

Prepare a wheelchair, and there are five steps to check the wheelchair.

First, we do a test push to make sure everything is working smoothly.

Second, check the brakes

and make sure they're engaged on both sides.

Third, check the tire pressure.

Both sides should have adequate pressure.

Fourth, we should sit in the wheelchair ourselves to see if the seat cushion is stable and comfortable.

Once we're comfortable with the seat, we check the footrests to ensure they're secure.

After confirming that everything is in good working order, we provide the patient with outdoor shoes and clothing.

Then, we move to the bedside.

Usually, we position ourselves at the foot of the bed on the patient's stronger side.

After setting up the items in their proper places, we need to wash our hands.

After washing our hands...

Mr. Wang, everything is ready now.

I'm going to help you get out of bed.

I'll move the blanket to the side.

Mr. Wang,

I'm shifting you to the edge of the bed.

Let's make sure your fingers are holding together.

We usually ask our care recipients to hold their injured hand with their good hand.

Please hold on tight.

When we're moving the care recipient into a sitting position, we need to be very careful



to avoid any bumps or falls. Mr. Wang, let's sit up now. I'll check how you're doing. Your face looks good, your pulse is steady, and your breathing is regular. I'm getting ready to move you to the wheelchair. Wrap your arms around my head. At this point, you need to be very careful. There's a chance the recipient's hand might slip, which could lead to a fall. So, let's stay attentive. When lifting, be sure not to let the recipient's feet hit the floor. And be extra careful not to bump the feet against the wheelchair during the transport. Mr. Wang, your face looks good, pulse and breathing are all steady. Once we're sure everything's in place, we need to lower the wheelchair footrests. Grandpa, let's get you dressed with your jacket.



When dressing the care recipient,
we'll put on the injured side first,
which is the left side.
After that,
we'll put on the right side, which is healthier.
After putting on the clothes,
first smooth out
any wrinkles in the back.
We'll zip up
or button the jacket
so it fits well
and keeps our manikin properly dressed and
warm.
Once the clothes are smooth,
place a pillow
on the manikin
to stabilize
its position.
After confirming everything is in place,
we will start to
put on the shoes and socks for the outing.
Grandpa, we've got your shoes and socks on.
Let's head outside and enjoy the sunshine.

Release the brakes.
Grandpa,
look at the sun today!
The flowers are blooming,
the birds are chirping,
butterflies are fluttering around,
and kids are playing on the beach.
Are you tired, Grandpa?
If so,
we can head back and get you some rest.
I'll help you back into bed in a second.
When returning to the bed,
make sure the wheelchair and the bed
are aligned at a 45-degree angle or parallel.
Grandpa, let me take off your jacket first.
When removing clothes,
we start with the healthier side—
the side with more movement.
The injured side
will come off later.
Grandpa, we're getting ready to get into bed.
Let's cross your hands and hold your fingers
together.

Students, be cautious.
Here,
the manikin's fingers are delicate,
so avoid pulling to prevent any breaks.
Use gentle pressure
to ensure the fingers are securely interlocked.
The interlocking must be firm;
otherwise, the fingers
may come apart during the move.
Fold up the footrests.
This is crucial because the footrests
need to be folded before moving.
Now, let's get into bed.
At this stage, the caregiver must be very careful
to avoid dropping the manikin.
Make sure the feet don't hit the floor.
Keep one hand on top and the other below.
Move backward.
Take two steps back, then turn to the bedside.
Once the position is secure,
place the manikin on the bed.
Grandpa, we're now on the bed.
Your face looks good,

and your breathing is steady.
Let me take your pulse.
Your pulse is regular.
Let's lie down now.
Next, remove the shoes and socks.
Grandpa, we're all settled in bed.
I'll cover you with your blanket,
then clean up the items
and wash my hands before coming back to keep
you company.
Students should
organize used items
in the waste area
and wash their hands afterward.
A reminder from the teacher:
When assisting the patient in getting in and out
of bed,
be thorough
and take precautions to avoid falls
or injuries from excessive force,
both for the patient and yourself.

