<u>Helping Hands Caregiver Resource</u> <u>Volunteer Hand Book</u>

MISSION STATEMENT

The "Helping Hands Caregiver Resource" program is organized as a community service program for charitable and educational purposes, more specifically to establish an adult day social program within Nevada County by providing a safe environment for dependent adults and to allow respite for their adult caregivers.



"Holding Your Heart in Our Hands"

Questionnaire

1.	What is your main reason for wanting to volunteer at "Helping Hands"?
2.	What are qualities you believe a volunteer should have?
3.	What experience or skills do you have that will benefit our program?
4.	What expectations do you have from us?
5.	To what level are you willing are you to befriend the participants in our program?someincreasingly as I learn howas much as possible
6.	In your opinion, how important is cooperating with program staff?somewhat importantFairly importantVery important
7.	To what degree do people with impaired memory or dementia problems bother you?Not at allsomeVery much
8.	How well do you feel you are at communicating with elderly or disabled individuals?poorfairgoodexcellent
9.	What other volunteer opportunities have you been involved with?
10	Please list any educational classes or training programs you have attended that have helped improve your communication skills?

Policies for Volunteers

Volunteers will...

- Be respectful to staff and participants at all times
- Follow instructions
- Speak in a calm and reassuring manner
- Wear name tag at all times
- Dress appropriately; closed toed shoes, shorts or skirts that are modest only
- Keep personal belongings in designated area(Center is not responsible for lost or stolen property)
- Lunch is provided, however participants and staff come first and seconds may not be available
- No smoking on the property, in or near the building
- Not be under the influence of drugs or alcohol
- Must have TB test and fingerprint clearance
- Always address participants by first name
- Escort participants to rest room area when guidance is needed and alert staff if assistance is needed
- · Assist with lunch set up, food delivery, clean up
- Assist with activities, play games, etc.
- Dance with physically stable participants- ask staff if unsure or when gait belt is needed
- Escort participants on walks with staff member approval
- Assist participants to find seating or recliners to rest
- Assist with specific tasks as indicated by staff
- Be aware of behavioral issues with clients and alert staff when needed
- Inform staff when taking a break or leaving the center for the day
- Ask supervisor or staff for direction when needed

Volunteers will not...

- Assist participants <u>in</u> the bathrooms unless staff has given prior approval
- Lift or transfer participants who are in wheelchairs
- Dance with fall risk participants
- Make decisions regarding participants abilities without consulting supervisor or staff first
- Make efforts to "fix" program computers or other physical equipment without asking first
- Lend to or borrow money or any personal property from participants, staff, or other volunteers while at the center

Understanding the Participants

Clients in our program are referred to as participants. In an Adult Day Care (ADC) participants generally need personal care, assistance with activities, companionship, and supervision for safety during the day.

As part of the normal aging process, older persons experience physical, emotional, and mental changes. Physical changes affect health, senses, and memory. As physical health is affected by age, many persons may also have to deal with illnesses that are incurable but can be treated and controlled by ongoing medical care and medications.

*Diabetes *High blood pressure *Arthritis *Urinary tract infection *Kidney disease *Liver disease *Heart disease *Cancer *Parkinson's disease *Many others

<u>Dementia</u> is the loss of intellectual functions (such as thinking, remembering, and reasoning) of sufficient severity to interfere with a person's daily functioning. It is a group of symptoms which may be caused by certain diseases or physical conditions. Some causes of dementia are reversible, while others have no cure.

<u>Alzheimer's</u> disease is the most common form of dementia. This is a progressive and degenerative disease that attacks the

brain. There is no known cure, though there are medications which may slow down the progress of the symptoms.

NOT ALL PARTICIPANTS WITH DEMENTIA HAVE ALZHEIMER'S

Many of our participant's experience common health problems which can lead to confusion or complications. If you notice a <u>sudden change</u> in a participant's behavior, be sure to tell your supervisor or other staff member on duty immediately. It Could Be Important.

Communication

Communication is the exchange of information, the "give and take" interaction between persons. Whatever the task at hand is, if you are able to communicate with the participants at the center, you will be able to make the day a more pleasant one for them and for you.

One approach is to practice an <u>"other-focus"</u> <u>communication</u> style. This simply means that your main interest is on the other person's needs, concerns, emotions, and reality. Your face-to-face contact and conversation with a participant should tell them that you care about them.

You must be <u>genuinely interested</u> in a person in order to build a relationship. Every person has a story to tell. Learning about the life of a participant will help you understand and appreciate him. It will also provide you with clues to his concerns, interests, likes, and dislikes.

Listening requires patience, acceptance, and concentration. You need to give participant's time to speak what is on their mind. Persons with reasoning difficulties and memory loss may also have trouble saying what they mean. It is quite common that their words are jumbled in confusing sentences. They may also use words incorrectly. You will need to listen carefully to hear what they are saying.

If you are unable to understand what a participant is saying, ask questions to clarify. Be sensitive to their feelings.

If your inability to understand them is upsetting them, stop and redirect their thoughts to another subject.

When a participant is unable to verbalize their needs they will often become anxious. This can be interpreted as anger, confusion, fear, depression, frustration, or anxiousness. A persistent and caring attitude can help a participant become less anxious and less concerned about a problem. Feelings are not to be judged but understood and accepted.

Wandering

Wandering is often a common repetitive behavior among dementia participants and can be seen in several ways:

- Constant and aimless pacing
- A desire to go home to "feed the children" etc.
- Boredom
- Wanting to go to a familiar place from their past
- Being lost, or trying to find a place- like the rest room

Volunteers and Staff have a shared responsibility In dealing with wandering:

- All dementia participants should be considered potential wanderers, except those who are unable to walk away.
 While at the center, participants are under the care and responsibility of the staff and volunteers. If participants leave the center unnoticed, they are in danger of becoming lost and putting themselves at risk of injury, accident, or crime.
- The center has a plan for locating missing wanderers. Prevention is the best way to prevent a wanderer from becoming a missing participant. KEEP YOUR EYES OPEN and BE AWARE of the participants at the center while you are volunteering. If you are concerned about where a participant is, ask a staff member to help you locate them. Most often they will be somewhere in the room, the quiet room or the rest room. You can never be too concerned about keeping participants safe from wandering.

The Alzheimer's Association has the "Safe Return" program in which some participants are enrolled. Should a participant go missing, ask how you can assist with a search and how to cooperate with the authorities.

When a participant is obviously missing from the program, all available staff and volunteers will be utilized to search the building, grounds, and immediate neighborhood for them. The director will notify the local sheriff to enlist their assistance in looking for the person, and the participant's family or caregiver will be called to come to the center as soon as possible and to give ideas on where the person would try to go. All persons looking for the individual will have a cell phone on them for communication and a staff member at the program will be assigned the job of keeping track of all incoming information and relaying it to those searching.

Common Difficult Behaviors

As you work with adults who suffer from cognitive (mental) impairments, you are most likely going to face some behavior problems. Recognizing ahead of time that these behaviors are to be expected, and that it is <u>you</u>, not the participant who is capable of adapting in order to modify the behavior, will hopefully prevent some frustrating moments.

When you encounter a difficult behavior, there are steps that can help you manage it and reduce frustration.

- First make an effort to identify the behavior. (Is it wandering, yelling, crying, etc.)
- Next try to understand the cause. (Is it noisy, confusing, too busy, too bright, too difficult, etc?)
- Then adapt the environment or what you are doing. (change rooms, turn music down, new activity, take a walk)

New volunteers sometimes wrongly assume that participants will always be compliant, grateful, and pleasant toward those they are trying to assist. However, participants may act out in disruptive and inappropriate ways that lead to frustration and conflict at the center.

Some of these more challenging behaviors are:

- Repetitive actions and speech
- Suspicious thoughts
- Anxiety or agitation
- Aggression such as hitting, yelling, or swearing
- Refusal to comply with instructions
- Inappropriate touching, removal of clothing, or urinating in public

Inappropriate behaviors are embarrassing to staff and volunteers who may be caught by surprise. Sometimes these behaviors are quickly judged and labeled as wrong, immoral, or inconsiderate. Visitors or other uninformed people may not understand that a person with dementia does not always have proper judgment of what is acceptable behavior. They may blame the staff or volunteers for not preventing or supervising a participant's behavior.

Guidelines for handling inappropriate behavior are:

- **Minimize the immediate impact** by protecting the participant. Remove them from the room, or shield from others eyes while redirecting them.
- Firmly redirect participants. Say something like "Shall we play another game" while taking the difficult participant's hand and saying "Please come with me, I have something to tell (or show) you."
- Avoid overreacting or judging. Remember they are not doing this on purpose. Don't argue or scold or pass moral judgment. Some behaviors may simply be one-time impulse actions. A volunteer who responds in anger, surprise, or panic will only add to the disruption.
- Prevent the behavior. This may be possible if the behavior is due to a specific cause you can identify or from an unmet need. Sometimes a pattern becomes obvious and a solution can be implemented.

Developmentally Disabled Participants

Adults who are developmentally disabled (DD) need the care, the services, and activities that adult day centers offer to remain as active and healthy as possible. However, the reasons for their impairments or disabilities are different from older persons with dementia.

Developmental disabilities refer to one's decreased abilities to perform mental, social, and work tasks for themselves. These disabilities have been with the person from an early age, often since birth.

Older adults with developmental disabilities have different needs from younger people with similar disabilities and from participants with dementia. Physical disabilities, mental and functional impairments often become more difficult with aging.

Older developmentally disabled adults tend to have had a limited education compared with younger adults having the same disability. This is because our society has become more aware and can provide better instructional opportunities than previous generations. Unfortunately many disabled older adults continue to have difficulty with writing skills and mathematical counting. Society has often labeled individuals with DD as mentally retarded, and while this is a clinically correct term, it is not appropriate to use this terminology when interacting with them or their caregiver. The use of the term MR has negative connotations and staff/volunteers need to be sensitive to the response of participants and their families to such labels.

Volunteer Informatio	<u>n</u>	
Name		
Address		
Phone	Cell	
Email		
Emergency Contact		
Phone		
Volunteer Agreemen	<u>t</u>	
By my signature below I acknowledge that I have received and read the Volunteer Hand Book and that I agree to abide by the volunteer policies set forth by "Helping Hands Caregiver Resource".		
	Signature	
	Date	
	Supervisor or Center Director	