Appendix C: Caregiver Training Competency Checklist

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SAFE TRANSFER TECHNIQUES

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Bed-to-Chair Transfer

- Preparation: Lock wheels, position chair at 45° angle
- Patient position: Sitting edge of bed, feet flat on floor
- Caregiver stance: Wide base, bend knees not back
- Execution: Pivot on stronger leg, control descent
- Safety: Use gait belt, never pull on arms

Toilet Transfer

- Approach: Back patient up to toilet, feel with legs
- Clothing: Manage before transfer, maintain dignity
- Support: Use grab bars, not caregiver's body
- Completion: Ensure stability before letting go

Car Transfer

- Positioning: Seat height level with patient's hips
- Technique: Sit first, then swing legs into car
- Equipment: Transfer board if needed, remove obstacles
- Safety: Protect head, secure seatbelt

Mechanical Lifts

- Sling placement: Proper positioning, check weight limits
- Operation: Smooth movements, clear pathways
- Communication: Explain process, maintain eye contact
- Maintenance: Regular inspection, proper storage

PROPER GAIT ASSISTANCE METHODS

Guarding Techniques

- Position: Stand slightly behind and to weaker side
- Gait belt: Secure fit, hand placement on back
- Support: Guide don't lift, allow natural movement
- Stairs: One step at a time, "up with good, down with bad"

Assistive Device Support

- Walker: Check height, inspect wheels/glides
- Cane: Opposite side of weakness, proper technique
- Crutches: Ensure proper fit, check tips
- Wheelchair: Lock brakes, footrest positioning

Environmental Awareness

- Surfaces: Identify hazards, clear pathways
- Lighting: Ensure adequate illumination

- Distances: Plan rest stops, realistic goals
- Weather: Adjust for outdoor conditions

Communication During Mobility

- Verbal cues: Clear, simple instructions
- Encouragement: Positive reinforcement
- Pacing: Allow adequate time, no rushing
- Feedback: Acknowledge effort, correct gently

RECOGNITION OF WARNING SIGNS

Immediate Danger Signs

- ✓ Chest pain: Stop activity, call emergency services
- ✓ Severe shortness of breath: Sit patient down, monitor
- ✓ Dizziness/fainting: Lower head, check vitals
- ✓ Severe pain: Assess location, intensity, duration

Cardiovascular Indicators

- ✓ Vital signs: HR >100 or <60, BP changes
- ✓ Fatigue: Excessive tiredness, needs frequent rest
- ✓ Skin color: Pallor, cyanosis, excessive sweating
- ✓ Confusion: Sudden mental status changes

Musculoskeletal Warnings

- ✓ New pain: Location, intensity, character
- ✓ Swelling: Joint inflammation, warmth
- ✓ Weakness: Sudden loss of strength
- ✓ Range of motion: Decreased mobility, stiffness

Neurological Alerts

- ✓ Balance issues: Increased falls risk, unsteadiness
- ✓ Coordination: Difficulty with familiar tasks
- ✓ Speech changes: Slurred, unclear communication
- ✓ Vision problems: Blurred, double vision

Skin/Wound Concerns

- ✓ Pressure areas: Redness, heat, breakdown
- ✓ Infection signs: Fever, drainage, odor
- ✓ Healing delays: Non-progressing wounds
- ✓ Medication reactions: Rash, itching, swelling

PROPER USE AND MAINTENANCE OF EQUIPMENT

Mobility Aids

- Daily inspection: Check for damage, wear patterns
- Height adjustment: Regular verification of proper fit
- Cleaning: Appropriate disinfection methods
- Storage: Proper positioning, avoid damage

Transfer Equipment

- Gait belts: Inspect buckles, webbing integrity
- Transfer boards: Check weight limits, smooth surface
- Mechanical lifts: Battery charge, sling inspection
- Grab bars: Tighten loose fittings, check mounting

Monitoring Devices

- Blood pressure cuffs: Calibration, proper cuff size
- Pulse oximeters: Battery level, sensor cleanliness
- Thermometers: Accuracy check, probe covers
- Scales: Level surface, zero calibration

Safety Equipment

- Bed rails: Proper positioning, gap assessment
- Alarm systems: Battery check, volume adjustment
- Lighting: Bulb replacement, battery backup
- Emergency supplies: First aid kit, emergency contacts

RETURN DEMONSTRATION REQUIREMENTS

Competency Assessment Levels

- Level 1: Requires constant supervision and prompting
- Level 2: Requires intermittent supervision
- Level 3: Requires minimal supervision
- Level 4: Independent performance with confidence

Transfer Demonstrations

- Bed mobility: Rolling, sitting up, positioning
- Sit-to-stand: Proper technique, safety measures
- Pivot transfers: Smooth execution, balance control
- Mechanical lifts: Complete process, safety checks

Gait Training Demonstrations

- Guarding: Proper positioning, appropriate support
- Device use: Correct technique with each aid
- Stair navigation: Up and down techniques

- Fall recovery: Safe assistance methods

Emergency Response

- ✓ Vital sign assessment: Accurate measurement
- ✓ First aid: Basic techniques, when to call help
- ✓ Equipment malfunction: Troubleshooting steps
- ✓ Communication: Clear reporting to healthcare team

COMPETENCY CHECKLIST FRAMEWORK

Initial Assessment

- Baseline knowledge: Previous experience, comfort level
- Physical capability: Strength, mobility, health status
- Learning style: Visual, auditory, kinesthetic preferences
- Confidence level: Anxiety, willingness to learn

Training Components

- Demonstration: Show proper technique, Pay attention to the need of rest
- Practice: Hands-on learning with supervision
- Feedback: Immediate correction, positive reinforcement, (Touch can be used to help movement during walking by placing a hand on their shoulder or by taking their hand, Use of a mirror to facilitate viewing of posture and position corrections facilitate the physiotherapist)
- Repetition: Multiple practice sessions

Evaluation Criteria

- Safety: No risk to patient or caregiver
- Technique: Proper body mechanics, correct method
- Confidence: Comfortable performing independently
- Problem-solving: Adapts to unexpected situations

Documentation Requirements

- Skills checklist: Date, skill, competency level achieved
- Signatures: Trainer and trainee verification
- Re-assessment: Schedule for skill maintenance
- Continuing education: Advanced training needs, Guide for homeowrk

ONGOING COMPETENCY MAINTENANCE

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Regular Re-assessment

- Monthly reviews: Observe performance, provide feedback
- Quarterly evaluations: Formal competency testing
- Annual updates: New techniques, equipment changes
- Incident review: Learning from near-misses

Continuing Education

- Workshops: Attend relevant training sessions
- Online modules: Complete certification programs
- Peer learning: Share experiences with other caregivers
- Professional development: Stay current with best practices

Quality Improvement

- Feedback loops: Regular communication with healthcare team
- Performance metrics: Track outcomes, identify trends
- Best practices: Share successful techniques
- Continuous improvement: Adapt based on results

Remember: Competency is not a one-time achievement but an ongoing process requiring regular assessment, practice, and reinforcement.