

6

Safety and Body Mechanics

1. Explain the principles of body mechanics

Back strain or injury is a serious problem for home health aides. Using proper body mechanics is an important step in preventing back strain and injury. **Body mechanics** is the way the parts of the body work together when a person moves. Using proper body mechanics helps save energy and prevent injury.

Alignment: Alignment is based on the word *line*. When a person stands up straight, a vertical line could be drawn right through the center of his body and his center of gravity (Fig. 6-1). When the line is straight, the body is in alignment. Whether standing, sitting, or lying down, the body should be in alignment and should have good posture. Alignment means that the two sides of the body are mirror images of each other, with body parts lined up naturally. **Posture** is the way a person holds and positions his body. A person can maintain correct body alignment when lifting or carrying an object by keeping the object close to his body. His feet and body should be pointed in the direction he is moving. He should avoid twisting at the waist.

Base of support: The base of support is the foundation that supports an object. The feet are the body's base of support. The wider the support, the more stable a person is. Standing with the feet shoulder-width apart allows for a greater base of support. This is more stable than standing with the feet together.

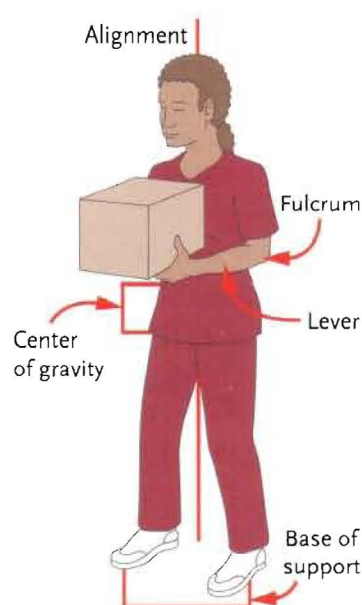


Fig. 6-1. Proper body alignment is important when standing and sitting.

Fulcrum and lever: A **lever** moves an object by resting on a base of support, called a fulcrum. For example, on a seesaw, the flat board a person sits on is the lever. The triangular base the board rests on is the fulcrum. When two children sit on opposite sides of the seesaw, they easily move each other up and down. This is because the fulcrum and lever of the seesaw are doing the work.

Thinking of the body as a set of fulcrums and levers can be helpful when trying to find smart ways to lift without working as hard. For example, an arm is a lever and the elbow is the fulcrum. When a person lifts something, he can rest it against his forearm. This will shorten

the lever and make the item easier to lift than it would be if he were holding it in his hands.

Center of gravity: The center of gravity in the body is the point where the most weight is concentrated. This point will depend on the position of the body. When a person stands, weight is centered in the pelvis. A low center of gravity gives a more stable base of support. Bending the knees when lifting an object lowers the pelvis and, therefore, lowers a person's center of gravity. This gives more stability and makes the person less likely to fall or strain the working muscles.

2. Apply principles of body mechanics to daily activities

By applying the principles of body mechanics to daily activities, injury can be avoided and less energy used. Procedures for properly transferring, positioning, and ambulating clients are located throughout this textbook. These procedures include instructions for maintaining proper body mechanics. In addition, the following guidelines are helpful:

Guidelines: Using Proper Body Mechanics

- G** Assess the situation first. Clear the path and remove any obstacles.
- G** Use both arms and hands to lift, push, or carry objects.
- G** When lifting a heavy object from the floor, spread your feet shoulder-width apart. Bend your knees. Use the strong, large muscles in your thighs, upper arms, and shoulders to lift the object. Raise your body and the object together (Fig. 6-2).
- G** Hold objects close to you when you are lifting or carrying them. This keeps the object closer to your center of gravity and base of support (Fig. 6-3).



Fig. 6-2. In this illustration, which person is lifting correctly?

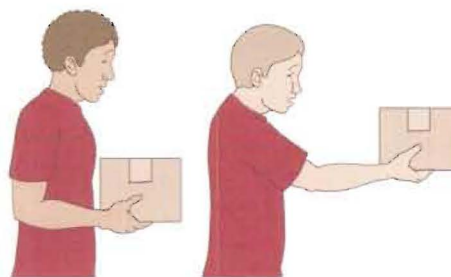


Fig. 6-3. Holding things close to the body moves weight toward the center of gravity. In this illustration, who is more likely to strain his back muscles?

- G** Push or slide objects rather than lifting them.
- G** Avoid bending and reaching as much as possible. Move or position furniture so that you do not have to bend or reach.
- G** If you are making an adjustable bed, adjust the height to a safe working level, usually waist high. If you are making a regular bed, lean or kneel to support yourself at working level. Avoid bending at the waist.
- G** When a task requires bending, use a good stance. Bend your knees to lower yourself (squat), rather than bending from the waist. This uses the big muscles in your legs and hips rather than the smaller muscles in your back.
- G** Do not twist when you are lifting or moving an object. Instead, turn your whole body. Pivot your feet instead of twisting at the waist. Your feet should point toward what you are moving or lifting.

- G** Get help when possible for lifting or assisting clients.
- G** Talk to clients before moving them. Let them know what you will do so they can help if possible. Agree on a signal, such as counting to three. Lift or move on three so everyone moves together.
- G** To help a client sit up, stand up, or walk, place your feet shoulder-width apart. Put one foot in front of the other, and bend your knees. Your upper body should stay upright and in alignment. Do this whenever you have to support a client's weight.
- G** Never try to catch a falling client. If the client starts to fall, assist her to the floor (Fig. 6-4). If you try to reverse a fall in progress, you could injure yourself and/or the client.

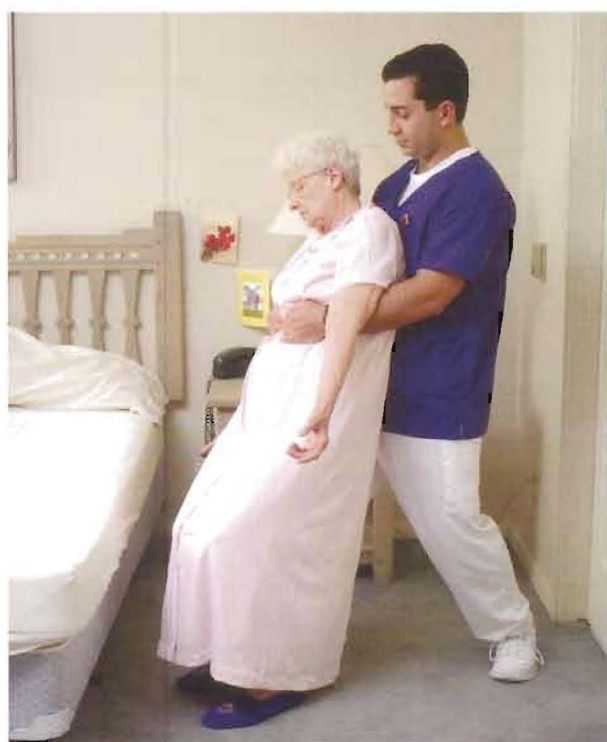


Fig. 6-4. Maintaining a wide base of support and low center of gravity will enable you to help a falling client.

- G** Report to your supervisor any task that you feel you cannot safely perform. Never try to lift an object or a client that you feel you cannot handle.

3. List ways to adapt the home to principles of proper body mechanics

Following are several guidelines for applying proper body mechanics in the home:

Guidelines: Using Proper Mechanics in the Home

- G** Have the right tools for the job. For example, if you cannot reach an object on a high shelf, use a step stool rather than climbing on a counter or straining to reach.
- G** Have footrests and pillows available. Tasks that require standing for long periods can be more comfortable if you rest one foot on a footrest. This position flexes the muscles in the lower back and keeps the spine in alignment. When sitting, using a footrest allows for a more comfortable leg position. Crossing the legs disrupts alignment and should be avoided. Use pillows behind the back to keep the back straight.
- G** Keep tools, supplies, and clutter off the floor. Keep frequently used items on shelves or counters where they can be easily reached without lifting. Keeping things organized will also help you find what you need without straining.
- G** Whenever you can sit to do a job, do so. Chopping vegetables, folding clothes, and other tasks can be done easily while sitting. For jobs like scouring the bathtub, kneel or use a low stool. Avoid bending at the waist.
- G** Use transfer belts when assisting clients with ambulation or transfers, as described in Chapter 12.
- G** Make sure the homes you work in are safe for your clients, their family members, and you. Working in a home that is neglected puts you at risk for injury. Do remember, however, that you are a visitor in the client's home. Unless

an immediate danger exists, check with your supervisor and the client before making any significant changes. A nurse or case manager will assess the safety of the homes in which you work. However, you will spend more time in the home than any other member of the care team. Look for safety hazards. Immediately report to your supervisor any hazards you observe.

4. Identify five common types of accidents in the home

There are many factors that put clients at risk for injury, which is why it is very important to try to prevent accidents *before* they occur. Prevention is the key to safety. As home health aides work, they should observe for safety hazards and report unsafe conditions to the supervisor promptly. Common types of accidents that occur in the home include the following:

Falls: A fall is any sudden, uncontrollable descent from a higher to a lower level, with or without injury resulting. Falls can be caused by an unsafe environment, loss of abilities, diseases, and medications. Problems resulting from falls range from minor bruises to fractures and life-threatening injuries. A **fracture** (*FRAKT-chur*) is a broken bone. Falls are particularly common among the elderly. Older people are often more seriously injured by falls because their bones are more fragile. Hip fractures are one of the most common types of fractures from falls. Hip fractures cause the greatest number of deaths and can lead to severe health problems. HHAs should be especially alert to the risk of falls with elderly clients. HHAs must report all falls to their supervisor immediately and get further instructions. A client should not be moved before the HHA contacts the supervisor. An incident report must be completed, even if the client says he or she is fine.

These factors increase the risk of falls:

- Clutter
- Throw rugs
- Exposed electrical cords
- Slippery or wet floors
- Uneven floors or stairs
- Poor lighting

Personal conditions that increase the risk of falls include medications, loss of vision, gait (walking) or balance problems, weakness, paralysis, and disorientation. **Disorientation** means confusion about person, place, or time.

Guidelines: Preventing Falls

- Clear all walkways of clutter, throw rugs, and cords (Figs. 6-5 and 6-6).

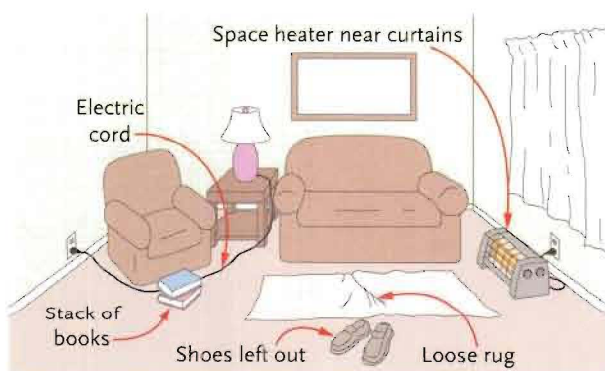


Fig. 6-5. Be aware of unsafe conditions in clients' homes. This living room contains many hazards.

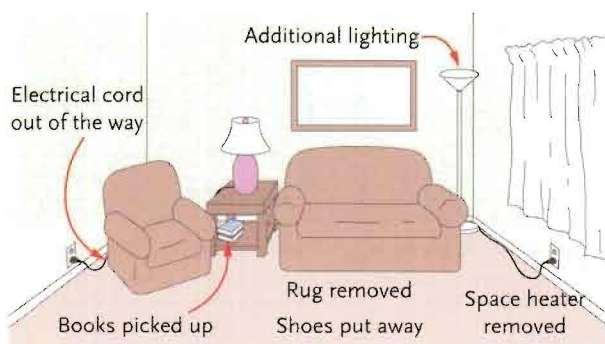


Fig. 6-6. The hazards shown in Figure 6-5 have been removed. Help prevent accidents. Talk with your client about changes that need to be made to avoid hazards.

- G** Avoid waxing floors, and use mats or rugs with a nonslip backing where appropriate.
- G** Have clients wear nonskid, sturdy shoes. Make sure shoelaces are tied.
- G** Have clients wear clothing that is not too long and does not drag on the floor.
- G** Keep personal items that are used often close to clients.
- G** Immediately clean up spills on the floor.
- G** Mark uneven flooring or stairs with tape of a contrasting color to indicate a hazard.
- G** Improve lighting where needed.
- G** Lock wheels and move footrests out of the way before helping clients into or out of wheelchairs.
- G** Lock bed wheels before helping clients into and out of bed or when giving care.
- G** Before giving care, you will often need to raise adjustable beds to make your job easier and safer. After completing care, return beds to their lowest position.
- G** When possible, get help when moving clients. Keep clients' walking aids, such as canes or walkers, within their reach.
- G** Offer help with elimination needs often. Respond to requests for help immediately.
- G** Leave furniture in the same place as you found it.

Burns/Scalds: Burns can be caused by dry heat (e.g., a hot iron, stove, other electrical appliances), wet heat (e.g., hot water or other liquids, steam), or chemicals (e.g., lye, acids). Small children, older adults, or people with loss of sensation (such as from paralysis or diabetes) are at the greatest risk of burns.

Scalds are burns caused by hot liquids. It takes five seconds or less for a serious burn to occur when the temperature of a liquid is 140°F. Coffee, tea, and other hot drinks are usually served

at 160°F to 180°F. These temperatures can cause almost instant burns that require surgery. Preventing burns is very important.

Guidelines: Preventing Burns and Scalds

- G** Roll up sleeves and avoid loose clothing when working at or near the stove (Figs. 6-7 and 6-8).
- G** Check that the stove and appliances are off when you leave.
- G** Suggest that the hot water heater be set lower than normal. It should be set at 120°F to 130°F to avoid burns from scalding tap water.
- G** Always check water temperature on the inside of your wrist before using.
- G** Keep space heaters away from clients' beds, chairs, and draperies. Never allow space heaters to be used in the bathroom.
- G** Use low settings on hair dryers.
- G** Immediately report frayed electrical cords or appliances that look unsafe. Do not use these appliances.
- G** Let clients know that you are about to pour or set down a hot liquid.
- G** Pour hot drinks away from clients. Keep hot drinks and liquids away from the edges of tables. Put a lid on them.
- G** Make sure clients are sitting down before serving them hot drinks.

Poisoning: Homes contain many harmful substances that should not be swallowed. These include cleaning products, paints, medicines, toiletries, and glues. These products should be locked away from confused clients, clients with limited vision, and children. HHAs should check medication for expired dates. Clients who have a diminished sense of taste or smell due to stroke or head injury might eat spoiled food. HHAs should check the refrigerator and

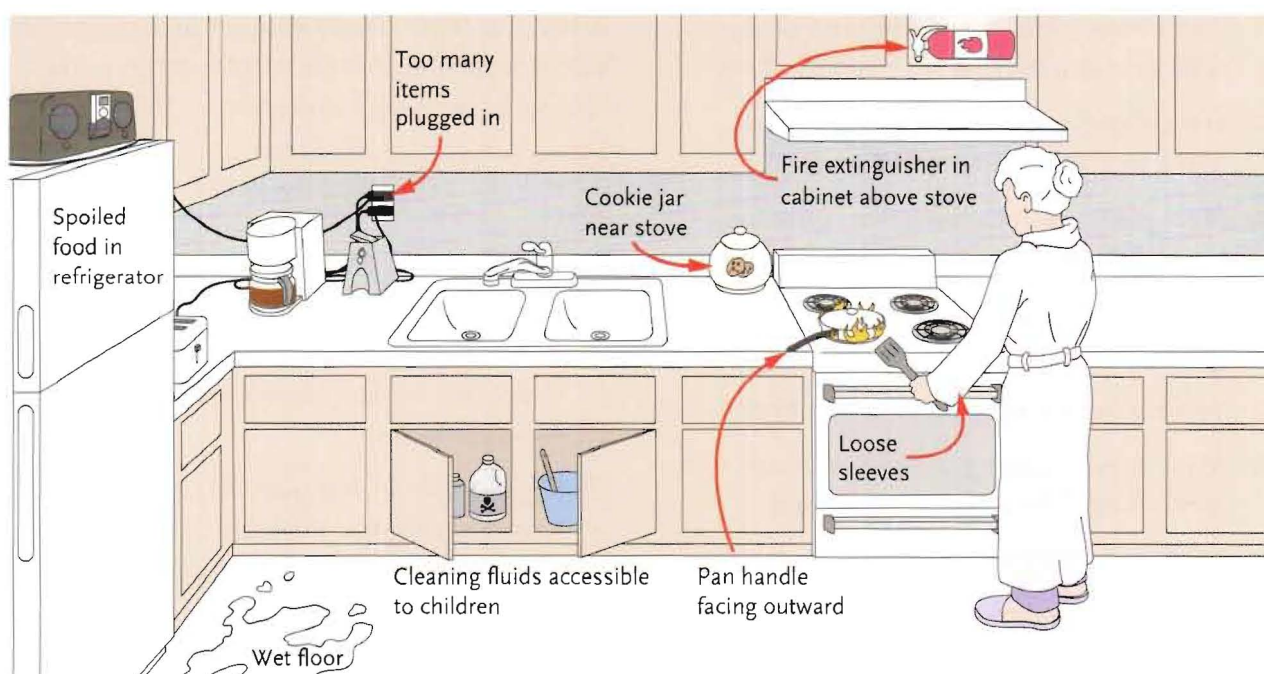


Fig. 6-7. Unsafe working conditions in the kitchen can lead to burns and other injuries.

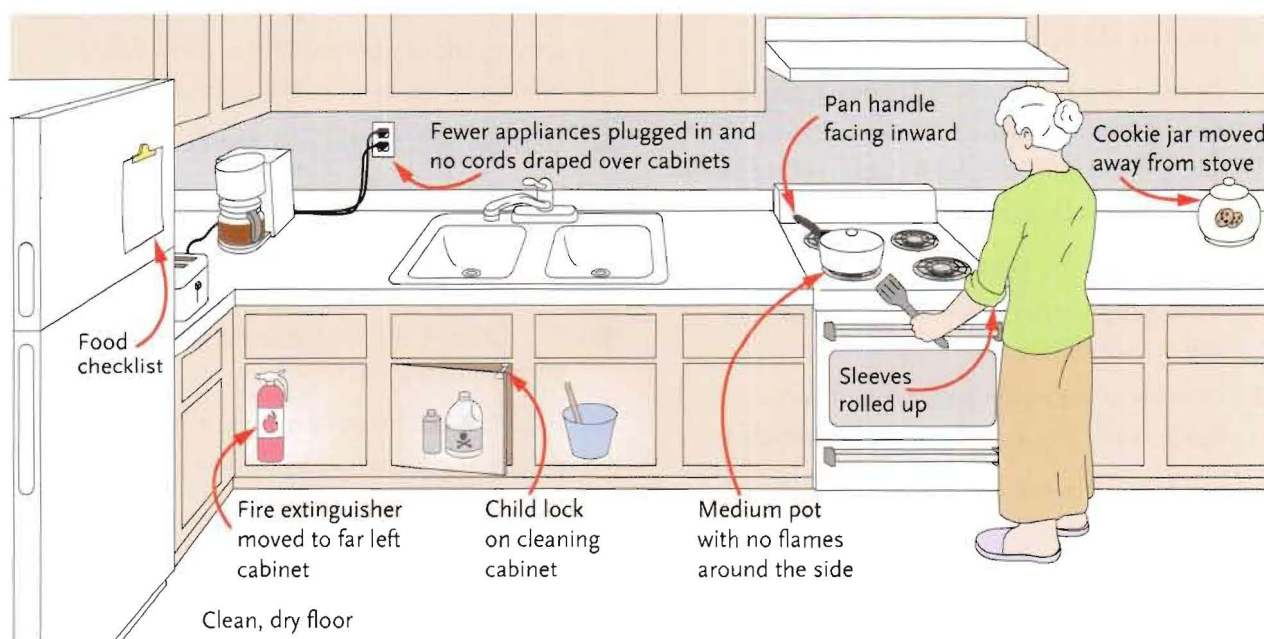


Fig. 6-8. Following safe practices in the kitchen can help prevent burns, other injuries, and fires.

cabinets frequently for foods that are moldy, sour, or spoiled. They should investigate any odors they notice. Clients with dementia may hide food and let it spoil in closets, drawers, or other places. The number for the Poison Control Center should be kept handy (the website for the American Association of Poison Control Centers is aapcc.org).

Cuts: Cuts typically occur in the kitchen or bathrooms. Sharp objects, including knives, peelers, graters, food processor blades, scissors, nail clippers, and razors must be kept out of the reach of children. Sharp objects should also be locked away if there is a confused client in the home. When preparing food, an HHA should cut away from herself, use a cutting board, and keep

her fingers out of the way. She must also know proper first aid for cuts (Chapter 7).

Choking: Choking can occur when eating, drinking, or taking medication. Babies and young children who put objects in their mouths are at great risk of choking. People who are weak, ill, or unconscious may choke on their own saliva. A person's tongue can also become swollen and obstruct the airway.

Babies and small children should never have access to small objects. HHAs should keep in mind that any object small enough to fit inside a toilet paper roll is small enough for a child to put in his mouth and could cause choking. Clients who have trouble with utensils and children who are too young to manage utensils on their own need their food cut into bite-sized pieces. Infants should sleep on their backs to reduce the risk of sudden infant death syndrome (SIDS). Pillows, small toys, and other objects should never be placed in a crib with an infant. Clients should eat in as upright a position as possible to avoid choking. Clients with swallowing problems may have a special diet with liquids thickened to the consistency of nectar, honey, or syrup. Thickened liquids are easier to swallow. (Chapter 22 contains more information.)

Household Tips for Preventing Accidents

The majority of accidents occur in bathrooms and kitchens. Home health aides should be vigilant to prevent accidents.

Bathroom

Falls: Nonskid bathmats in tubs and showers can reduce the risk of falls. Grab bars for the tub, shower, and toilet are also helpful if the client is weak and unsteady (Figs. 6-9 and 6-10). A shower chair may be used for clients who are weak. Chapter 13 contains more information.

Burns: HHAs must always check water temperature on the inside of the wrist. Electrical appli-

ances should not be used near a water source and should be put away when not in use.

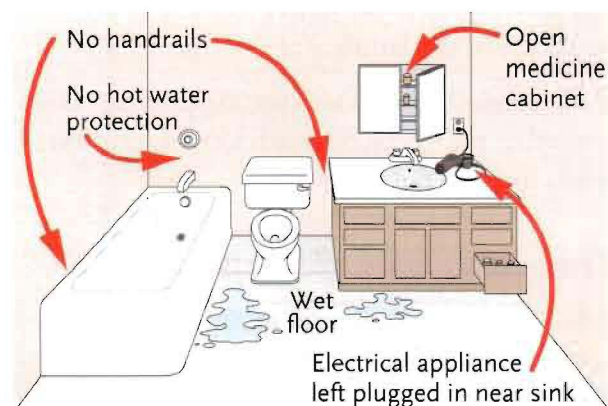


Fig. 6-9. The bathroom is full of safety hazards if it is not properly maintained.

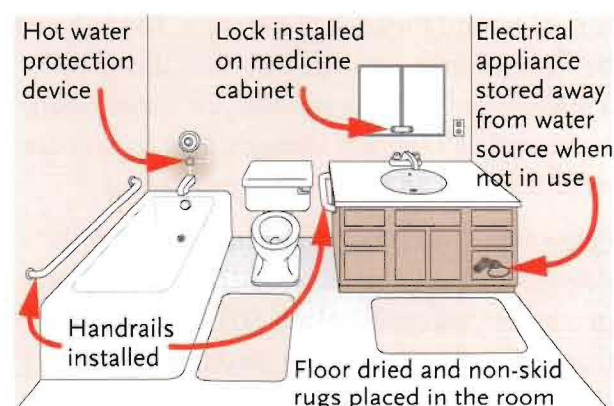


Fig. 6-10. This bathroom has been made safer by using special devices and by cleaning and straightening.

Drowning: Young children must never be left unattended near any water. This includes bathtubs, swimming pools, buckets or basins of water, puddles, ponds, drainage ditches, toilets, and sinks. An HHA should not leave anyone who is ill and weak alone in a tub. Clients who are dizzy or confused should not be alone in the tub or shower.

Poisoning: Home care providers can suggest that all medications be stored safely in containers with childproof caps and in locked cabinets. Children should never be told that medication is candy. Part of the HHA's job is to be sure that the client reads medicine labels carefully before taking a medication. If a medicine is not labeled,

the HHA should report the situation to a supervisor. The client's medications should be stored separately from medications taken by other members of the family.

Cuts: Home health aides should put away razors and other sharp objects (such as nail scissors) when they are not in use.

Kitchen

Falls: If the HHA cares for an infant or small child who uses a high chair or booster seat, she should make sure safety belts are securely fastened.

Burns: It is important that pot handles be turned toward the back of the stove. Food should be stirred before serving, especially if cooked in a microwave. This ensures that the temperature is the same all the way through. Hot liquids can be cooled with an ice cube before serving.

Poisoning: Emergency numbers, including the Poison Control Center's number, should be kept in a visible, accessible place. HHAs can suggest that all household cleaning products and other chemicals be locked away.

Cuts: Cutlery should be put away when not in use. If an HHA is using a knife and puts it down for a moment, she should place it away from the edge of the counter or table, making sure the blade is pointed away from the counter or table edge. Other sharp kitchen tools should also be stored in safe places, out of the reach of children and confused clients.

Choking: Popcorn, peanuts, hard candy, gum, and foods such as hot dogs and grapes are easily inhaled and pose a choking hazard to small children. HHAs should cut all foods into small, bite-sized pieces suitable for the age of the child. For elderly clients who have difficulty swallowing, the HHA can serve softer foods and foods cut into small pieces. When the HHA serves meals, she can encourage clients to take small bites of food, chew thoroughly, and eat slowly. Plastic

storage bags should be kept out of reach, and dry-cleaning and other large plastic bags should be recycled or discarded.

Bedroom

Falls: A nightlight can illuminate pathways and reduce the risk of falls. It is very important that an HHA never leave children unattended on high surfaces. These surfaces include beds, changing tables, high chairs, and playpens. An HHA should not even turn his back when changing a child on a high surface. Movable crib rails are no longer considered safe, but some homes may still have cribs with rails that lower. If an HHA encounters a crib that has such rails, he should make sure they are raised before leaving a child's room.

Burns: Clients should not smoke in bed. It is especially important that clients and family members never smoke around oxygen tanks or equipment.

Cuts: Sharp objects should always be put away.

Choking: An HHA should report any cribs that have wide spaces between the slats. The infant's head could become wedged between them. Cribs should be positioned away from drapes and blinds, as infants and toddlers can become entangled in the cords. Pillows and loose bedding in cribs can pose a risk of suffocation. HHAs should not prop up bottles for infants and toddlers, and they should examine toys for loose or removable parts.

Living Area

Falls: HHAs should request walkers or canes for clients who need support when walking. A supervisor can talk to a client or the client's family about having handrails installed where necessary. Floors should always be kept clear, and electrical and extension cords should be out of the way. Loose rugs should be removed. A client's shoes should be sturdy and the shoelaces

should be kept tied. Homes with small children should have safety gates installed at the tops and bottoms of stairs if possible. The gates should be kept closed. Hardware-mounted gates should be used at the tops of stairs.

Burns: HHAs or supervisors should suggest that electrical outlets be covered with baby-proof plugs. Nobody should smoke around children, and lighters and matches should be kept out of reach and out of sight.

Poisoning: Plants should be placed out of children’s reach, as many common plants are poisonous.

Cuts: Sharp objects must be kept out of children’s reach, and children should not be allowed to run, jump, or play roughly with any toy or object that could stab them.

Choking: Young children should not be permitted to play with balloons or rubber bands. These objects are easily inhaled. Children should not run or jump with food in their mouths.

Garage and Outdoors

An HHA should not leave children at home alone or alone in a vehicle. If an HHA transports children for any reason, she must make sure they are fastened into an appropriate car seat. Child car seats should be placed in the back seat of the automobile. Children under 12 should never sit in the front seat of a car. Airbags can kill children riding in the front seat. It is important that an HHA supervise children at play. Walkways should be kept clear of toys and other obstructions, and free of snow and ice.

Chapter 10 contains more information about safety in the home for clients with dementia.

5. List home fire safety guidelines and describe what to do in case of fire

It is essential for home health aides to recognize and report fire hazards. Any of the following can be a fire hazard:

- Wood stoves and kerosene, gas, or electric heaters that appear old, damaged, or faulty
- Unvented heaters used in small, enclosed areas or sleeping areas
- Space heaters used near fabrics such as draperies, bedspreads, or towels, or used to dry clothing or towels
- Flammable materials such as gasoline, kerosene, or paint thinner stored near stoves, heaters, furnaces, hot water heaters, or other appliances
- Frayed or exposed electrical wires
- Matches or lighters left within reach of children or incapacitated adults
- Careless smoking; smoking in bed; cigarettes, pipes, or cigars left burning; or clients who are confused who are smoking

Guidelines: Reducing Fire Hazards and Responding to Fires

- G** Never work wearing loose or flowing clothing, especially around the stove. Roll up clients’ sleeves and avoid loose clothing when client may be cooking or around the stove.
- G** Stay in or near the kitchen when anything is cooking or baking.
- G** Store potholders, dish towels, and other flammable kitchen items away from the stove.
- G** Never store cookies, candy, or other items that may attract children above or near the stove.
- G** Discourage careless smoking and smoking in bed. If clients must smoke, check to be sure that cigarettes are extinguished after use. Empty ashtrays frequently. Before emptying an ashtray, make sure there are no hot ashes, matches, or cigarette butts in the ashtray.
- G** Clients may use electronic cigarettes (e-cigarettes, e-cigs). Matches or lighters are not needed to light this type of cigarette; they use

a battery to turn the nicotine solution into a vapor. To reduce the risk of fire, e-cigarettes should only be charged using the appliance supplied by the manufacturer. Batteries may need to be turned off manually and may need to be removed from chargers after they are fully charged. Follow your supervisor's instructions.

- G** Do not leave the clothes dryer on when you leave the house. Lint can catch fire. Empty lint traps each time you use the dryer.
- G** If you smell gas, report it immediately.
- G** Turn off space heaters when no one is home or everyone is asleep.
- G** Be sure there are working smoke alarms in the home. Check monthly to see that smoke alarms are working. Replace batteries when needed.
- G** Have fire extinguishers on hand. Every home should have a fire extinguisher in the kitchen. Do not store the kitchen fire extinguisher near or above the stove, because you need to be able to get to it if the stove is on fire. Check that fire extinguishers have not expired. Know where the extinguisher is stored and how to operate it (Fig. 6-11). The PASS acronym will help you understand how to use it:
 - P**ull the pin.
 - A**im at the base of the fire when spraying.
 - S**queeze the handle.
 - S**weep back and forth at the base of the fire.
- G** In case of fire, the RACE acronym is a good rule to follow:
 - R**escue anyone in danger if you are not in danger.
 - A**ctivate 911.
 - C**ontain the fire if possible by closing doors and windows.
 - E**xtinguish the fire with a fire extinguisher, or evacuate the area if the fire is too large for an extinguisher.



Fig. 6-11. Know where the fire extinguisher is stored in the home and how to use it.

In addition, follow these guidelines for helping clients and family members exit the home safely:

- G** Remain calm. Do not panic.
- G** Be sure all family members know how to exit in case of fire, and have a designated meeting place outside the home.
- G** Do not try to put out a large fire. All household members should leave the house and call the fire department immediately.
- G** If windows or doors have locking bars, keep keys in the lock or nearby. Mark windows of children's rooms outside with stickers that indicate a child sleeps in the room.
- G** Remove anything blocking a window or door that could be used as a fire exit.
- G** Stay low in a room to escape a fire.
- G** Do not use elevators.
- G** If a door is closed, check for heat coming from it before opening it. If the door or door-knob feels hot, stay in the room if there is no safe exit. Plug the doorway (use wet towels or clothing) to prevent smoke from entering. Stay in the room until help arrives.
- G** Use the "stop, drop, and roll" fire safety technique to extinguish a fire on clothing or hair. Stop running or stay still. Drop to the ground, lying down if possible. Roll on the ground to try to extinguish the flames.

- G Use a damp covering over the face to reduce smoke inhalation.
- G After leaving the home, move away from it, to the designated meeting place.

6. Identify ways to reduce the risk of automobile accidents

Because home health aides may be driving to and from clients' homes, they must be careful to protect themselves from possible dangers.

Guidelines: Traveling Safely

- G Plan your route. Study the directions before beginning. If you are using a phone's GPS for navigation, turn up the volume so you can hear the voice instructions and will not have to look at the device while you drive.
- G Minimize distractions. Paying attention to the road can help avoid accidents. Keep your eyes on the road and your hands on the steering wheel. If music is distracting, do not listen to it in the car. Do not talk on your phone. Do not send or read text messages or emails while driving.
- G Use turn signals. Using your turn signals lets other drivers know what you are planning to do. Always use turn signals when preparing to turn or change lanes.
- G Use caution when backing up. Many accidents occur when drivers back up. When you back up, look around carefully, even if you have a rearview camera. Turn your head to both sides and look behind your car.
- G Drive at a safe speed. Follow speed limits to be sure you are not driving too fast. Road conditions such as ice or heavy rain may make it necessary to drive at a slower speed.
- G Always wear your seat belt. Although it may not help you avoid an accident, it will certainly help protect you if an accident occurs.

Always buckle up, no matter how short the distance you must drive. Require your passengers to wear their seat belts as well.

7. Identify guidelines for using a car on the job

When using a car while working, home health aides should keep the following guidelines in mind:

Guidelines: Using a Car on the Job

- G Park in safe, well-lit areas.
- G Lock car doors when you enter and exit your vehicle. Keep them locked while driving.
- G Do not leave valuables in the car. If you must leave something in the car, put it out of sight.
- G Have valid car insurance and carry the insurance card with you.
- G Keep your proof of registration or registration card with you, not in the car. If your car is stolen, you do not want the thief to have this important document.
- G Keep track of the miles you drive for work. Document them accurately. Lying about your mileage is the same as stealing from your employer.
- G Keep your car in good working order. Get it serviced at the appropriate times. Make sure you have good tires. Keep a spare tire that is in good condition in the car in case you get a flat tire. Keep the gas tank full.

8. Identify guidelines for working in high-crime areas

If an assignment takes a home health aide to an area where crime is a problem, she should use caution. If she is using public transportation, she should be alert at all times. The following tips can help avoid trouble:

Guidelines: Staying Safe in High-Crime Areas

- G** Park in well-lit areas, as close as possible to the home you are visiting.
- G** Try to leave valuables at home when you must work in a dangerous area.
- G** Hold your home care bag tightly, close to your body. There are also special security and anti-theft bags available.
- G** Lock your car and do not leave any valuables in it.
- G** Walk confidently. Look as though you know where you are going (Fig. 6-12).

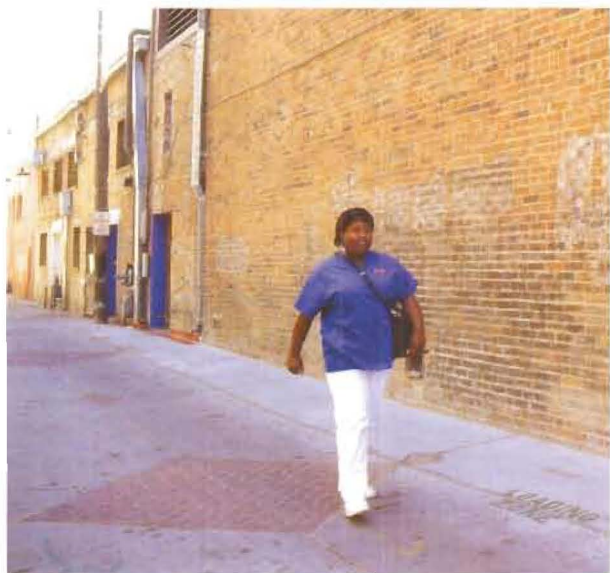


Fig. 6-12. Be cautious but look confident if you enter a high-crime area.

- G** Carry a whistle so you can make a loud noise to startle any potential attacker and get help.
- G** Carry your keys in your hand to unlock your car as soon as you arrive. If necessary, you can also use them as a weapon.
- G** Do not sit in your car, even with the doors locked. Drive away as soon as you reach your car.
- G** Try to avoid unsafe areas after dark.

- G** If you are concerned about your safety in a particular area, leave the area immediately. Contact your supervisor.
- G** Do not approach a home where strangers are hanging around. Go to your car and drive to a safe area. Use your phone or the nearest phone in a safe area, and call your supervisor.
- G** Call your client before you visit so he knows approximately when to expect you.
- G** Never enter a vacant home.
- G** If necessary, ask your supervisor to arrange for an escort or another care provider to go with you.
- G** Be sure someone knows your schedule. Call the office at the end of your work day.

Chapter Review

1. What does the term *body mechanics* mean?
2. The foundation that supports an object is called the _____.
3. The point where the most weight is concentrated is called the _____.
4. When the two sides of the body are mirror images of each other, the body is in _____.

True or False. Mark each statement with either a *T* for true or an *F* for false.

5. ____ By applying the principles of proper body mechanics to his work, an HHA can avoid injury and save energy.
6. ____ To lift a heavy object from the floor, an HHA must first place his feet together and keep his knees straight.
7. ____ When moving an object, an HHA should pivot his feet instead of twisting at the waist.

8. ____ It is a good idea to hold an object away from the body, because this helps balance the weight more evenly.
9. ____ An HHA should never try to catch a falling client, as he could seriously injure himself and/or the client.
10. ____ Bending from the waist allows the HHA to use the big muscles in his legs and hips rather than smaller muscles in his back.
11. Name three things an HHA can do while working in a client's home that will help him use proper body mechanics.
12. Why may older people be more seriously injured by falls?
13. How long can it take for a serious burn to result from contact with a hot liquid?
14. In what position should clients eat to avoid choking?
15. Identify what the acronyms *RACE* and *PASS* stand for.
16. Why should a person not talk on her phone while driving?
17. Why should car registration documents not be left in a person's car?
18. If an HHA approaches a house where strangers are hanging around, what should he do?
19. Why should an HHA carry her keys in her hand as she walks to her car?