There is assistance available if a person speaks a language other than English. Interpreting and translating services can be accessed, such as those offered by the Government’s Translating and Interpreting Service (TIS National).

**Adjust your style of communication**

If a person with care needs is hearing impaired, you may need to rely on an interpreter, depending on the severity of the impairment. You can use gestures and body language, such as pointing to the site of discomfort. You can also use pictures and simple diagrams, but make sure the person can see your face – they may be relying on facial gestures and lip-reading to understand what you are saying.

You may work with people who have intellectual disabilities, which can also affect your style of communication. Use clear verbal and body language, and assistance from another person (possibly a family member), so the communication between you and the person is unambiguous. Details about how to communicate with the person should be included in their care plan, if applicable.

**Review of documentation**

Accessing the person’s past medical and health history records may provide some valuable information to assist you in obtaining accurate information about their health status. Check with your supervisor about the access you have to this material.

A medical or health history includes information of any previous disease or illness. When a person is assessed for care a medical history is recorded, which includes a description of any previous disease or illness. This information may be obtained through a questionnaire or interview process.

Check the dates on the document to see when the recording was completed. It is important to read the details of past illness and disease, as there may be a relationship between a past experience of illness and a present condition. Medications that the person has taken, or is currently taking, will be included in the medical history as well as any allergies.

The information provided in these documents provides accurate details on the health status of the person at the time of the assessment. Clarifying the person’s medical and health history is a very important step to take before any intervention is undertaken or a service delivered.

Medical and health history may include the following:

- History of a presenting problem
- History of actual or potential problems associated with activities of daily living
- A person’s concerns and beliefs regarding their problem
- Past health history
- Medications taken or currently being taken
- Allergies
- Family circumstances
- Basic dietary information
Blood

Blood is made up of plasma, red and white blood cells. Plasma is a watery substance that carries blood cells, food, chemicals, hormones and waste products throughout the body.

Red blood cells (erythrocytes) assist in the transportation of oxygen throughout the body. White blood cells (leukocytes) protect the body against infection.

Platelets are also found in the blood and assist in the clotting process.

Blood vessels

Blood is carried from the heart and through the body by blood vessels, which include arteries, veins and capillaries. Arteries carry blood away from the heart. From the aorta, the arteries branch into smaller channels throughout the body, the smallest of which is an arteriole.

From the arterioles, blood travels into capillaries; tiny channels that carry blood to the cells and tissue. Veins then carry the blood back towards the heart, via the smallest veins (venules), which are connected to capillaries. Branches of venules form veins that travel back to the heart. The inferior vena cava and the superior vena cava are the two main veins that empty deoxygenated blood back into the right atrium of the heart.

Common cardiovascular problems

Some common problems associated with the cardiovascular system are outlined below.

Angina and angina pectoris

Angina may indicate the presence of coronary artery disease. The discomfort of angina is caused by an insufficient flow of blood to the heart.

Cardiac arrest

Cardiac arrest occurs when the heart stops beating, causing failure of blood circulation, which restricts oxygen delivery to the rest of the body. Brain damage can result if not treated immediately. Cardiac arrest is best prevented by healthy lifestyle choices, but if it occurs, it must be treated immediately; for example, performing cardiopulmonary resuscitation (CPR) in combination with using a defibrillator.

Congestive cardiac failure (CCF)

Congestive cardiac failure (CCF) is a common heart problem where the pumping of the heart cannot meet the needs of the body. CCF is caused by many diseases and its course varies depending on the individual and their circumstances. CCF causes fatigue, difficulty breathing, difficulty exercising and swelling. CCF can be treated with medication, by altering lifestyle choices or by a heart transplant.

Cardiomyopathy

Cardiomyopathy refers to the condition where a person’s heart is not working efficiently and effectively. The signs and symptoms of cardiomyopathy vary depending on the severity of the disease.
Gallstones

Gallstones are hard deposits in the gallbladder that vary in size. Gallstones can be either cholesterol or bilirubin, which is formed when blood cells are destroyed. Ageing, being a woman, family history of gallstones, diabetes, bone marrow transplants and rapid weight loss can contribute to the risk of developing gallstones. Gallstones can be removed surgically, but can be prevented by healthy lifestyle choices.

Gastroenteritis

Gastroenteritis (gastro) is inflammation of the stomach, which causes vomiting, diarrhoea and cramping. Virus, bacteria or parasites can cause gastroenteritis. The immune system can naturally treat gastroenteritis; however, fluid intake needs to be kept high to avoid dehydration.

Gastro-intestinal bleeding

Gastro-intestinal bleeding affects either the upper or lower digestive tract. Bleeding occurs from the rectum or the pharynx. The causes of upper and lower gastro-intestinal bleeding vary, but include haemorrhoids, ulcers, cancer, polyps, infection or gastritis. Treatment options vary depending on the cause of the bleeding.

Common dental problems

Some common dental problems can be associated with the digestive system. These are outlined below.

Gingivitis

- Gingivitis is inflammation of the gums where they become red or purple, bleed and are very tender. It is caused by long-term plaque deposits that become hard (tartar) and irritate the gums. Bacteria are therefore attracted to the site. Gingivitis can be caused by poor dental health, pregnancy, uncontrolled diabetes and some illnesses. To prevent gingivitis, teeth should be brushed often and regular visits to the dentist should be made.

Halitosis

- Halitosis (bad breath) is caused by bacteria from food debris at the back of the tongue. Mouthwash and good dental hygiene can be used to prevent and manage halitosis.

Urinary system

The functions of the urinary system are to manage the fluid of the body, essential for the workings of all cells and body systems. The urinary system processes and expels waste fluids and toxins from the body, helps to maintain blood pressure, levels of chemicals in the blood and blood volume.

When considering the urinary system, reference is also often made to the genitourinary system, which is the organ system of the reproductive organs and the urinary system. These are grouped together due to their proximity to each other.
Polycystic ovary syndrome

Polycystic ovary syndrome (PCOS) is a hormonal condition that can lead to women:
- developing the male sex characteristic of facial hair
- gaining weight and becoming obese
- ceasing menstruation
- becoming infertile.

Reproductive system problems during pregnancy

During a pregnancy and childbirth, the following health problems can occur.

Ectopic pregnancy

- Ectopic pregnancy occurs when the fertilised egg is implanted in the fallopian tube rather than the uterine wall. Ectopic pregnancies need to be terminated early to protect the mother’s health.

Placental abruption

- A placental abruption may occur in the third trimester of pregnancy when the placenta and the foetus separate prematurely, causing bleeding and contractions.

Placenta previa

- Placenta previa is when the placenta blocks the mouth of the uterus by attaching over the cervix. A caesarean section is usually required if a mother has this condition.

Pre-eclampsia

- Pre-eclampsia is serious during pregnancy and includes high blood pressure, protein in the urine and swelling of the hands, feet and face.

Premature membrane rupture

- During labour, premature rupture of membranes may occur when the amniotic sac breaks early (before labour has started) and releases fluid into the uterus.

Integumentary system

The integumentary system is made up of the skin, glands, hair and nails. This system plays a number of roles. The skin in particular acts as a barrier to protect the internal organs, helps make use of vitamin D, an essential vitamin that helps build and maintain bones, and allows us to sense heat, cold, sharp surfaces and other environmental factors that need to be reacted to.

Skin is the largest organ of the body and covers and protects the body. It contains sweat glands that help maintain body temperature, which is essential for survival. Skin regulates water leaving the body. Nerve endings in the skin are used for sensing pressure, pain, touch, temperature and help prevent injury.
Hearing

The ears are responsible for processing aural (sound) information as well as maintaining balance. Hearing, like vision, is important for communicating.

Taste

The sense of taste is the ability to detect the flavours of food and other substances. Taste is a chemical sense, meaning that chemical particles move directly into the body to be received by taste receptors.

Smell

Smell is closely related to taste as it is also a chemical sense, and taste and smell affect each other. Without smell it is difficult to taste, for instance. Chemical compounds enter the nose and are received by the olfactory bulb. The olfactory nerve sends the messages to the brain to interpret what is being smelled.

Equilibrium

Equilibrium means balance. The ears play a role in creating and maintaining equilibrium. The inner ear contains fluid, which along with our vision, helps us determine whether we are moving, stationary, upright or lying down.

Touch

Touch is another sense, although it is not considered a ‘special sense’, and refers to the ability to sense heat, cold, pain and contact. Nerve endings in the skin and other parts of the body send messages to the brain to interpret what is being felt.

Immune system

The immune system protects the body from disease, illness and infection caused by pathogens including bacteria, viruses and parasites.

To be immune is to be protected from illness, disease and infection. Specific immunity protects against specific threats. Non-specific immunity is a reaction to any substance the body does not recognise.

Some people develop auto-immune diseases that occur when the body attacks its own immune cells. Some common auto-immune diseases include: AIDS, lupus, Addison’s disease, diabetes mellitus, celiac disease, Crohn’s disease, fibromyalgia, multiple sclerosis, and rheumatoid Arthritis.

Cells and substances important in the function of the immune system are listed below.

Cells and substances important to the immune system

- Antibodies – parts of the body that detect and destroy abnormal substances
- Antigens – unwanted substances which stimulate greater production of phagocytes and lymphocytes to fight the infection
- Phagocytes – white blood cells that ingest and destroy abnormal or unwanted substances
<table>
<thead>
<tr>
<th>Body system</th>
<th>Interaction with other body systems</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Endocrine</strong>&lt;br&gt;One of the major functions of the body’s systems is to keep the body in balance. The medical term that describes the processes used to regulate the body is homeostasis. One of the systems that play a major role in homeostasis is the endocrine system.</td>
<td><strong>Cardiovascular</strong> – The hormones of the endocrine system regulate and impact on heart rate.&lt;br&gt;<strong>Respiratory</strong> – The hormones of the endocrine system assist with air flow to the respiratory system.&lt;br&gt;<strong>Musculoskeletal</strong> – The endocrine system helps maintain and develop muscles and releases adrenaline to the muscles of the body.&lt;br&gt;<strong>Nervous</strong> – The endocrine system makes sure the cells in the body have the required balance of minerals, enabling the nervous system to function effectively.&lt;br&gt;<strong>Digestive</strong> – Hormones from the endocrine system affect the way food is digested within the body.&lt;br&gt;<strong>Urinary</strong> – Hormones from the endocrine system regulate urinary excretion.&lt;br&gt;<strong>Reproductive</strong> – Hormones from the endocrine system facilitate puberty, impact on sex drive and regulate pregnancy and lactation.&lt;br&gt;<strong>Integumentary</strong> – The endocrine system affects the growth and distribution of hair.&lt;br&gt;<strong>Lymphatic</strong> – The endocrine system helps activate the lymphatic system’s immune response.</td>
</tr>
<tr>
<td><strong>Nervous</strong>&lt;br&gt;The nervous system is responsible for communicating information received by the senses to the brain. It is responsible for processing information and communicating required responses to the muscles and bones.</td>
<td><strong>Cardiovascular</strong> – The nervous system regulates heartbeat within the cardiovascular system.&lt;br&gt;<strong>Respiratory</strong> – The nervous system regulates breathing and respiration within the body.&lt;br&gt;<strong>Musculoskeletal</strong> – The nervous system instructs the muscles how to move.&lt;br&gt;<strong>Endocrine</strong> – The nervous system controls and stimulates glands in the endocrine system.&lt;br&gt;<strong>Digestive</strong> – The nervous system controls appetite and faecal movements.&lt;br&gt;<strong>Urinary</strong> – The nervous system controls urinary functions.&lt;br&gt;<strong>Reproductive</strong> – The nervous system helps with lactation.&lt;br&gt;<strong>Integumentary</strong> – The nervous system regulates sweating and temperature.&lt;br&gt;<strong>Lymphatic</strong> – The nervous system works in conjunction with the lymphatic system to respond to pathogens.</td>
</tr>
</tbody>
</table>
Diet and nutrition

Nutrition affects general health and how the body systems operate. We obtain the energy to live from the food we eat. This energy enables the cells, tissues and organs that make up the systems of our body to function correctly. For example, a diet high in cholesterol can be dangerous for the cardiovascular system, as arteries can become clogged, and result in a disease called atherosclerosis. Diets high in fibre from grains, fruit and vegetables assist the digestive system and prevent constipation. Diets that are high in omega oils (found in fish and some vegetables) may increase brain function and are better than saturated fats for decreasing the incidence of heart diseases like atherosclerosis.

Australia has a very high incidence of obesity. Over 25 per cent of Australian men and women are classified as obese and over 30 per cent are classified as overweight. Obesity has serious health consequences, which affect a number of body systems, including the cardiovascular, respiratory, skeletal and digestive systems. Moods and emotions may also influence the foods we eat such as sugar and fats.

Diet and nutrition are very important factors in maintaining homeostasis and allowing the body to perform its functions to its best capacity. Nutrition Australia recommends the following for a healthy diet.

The Healthy Eating Pyramid

- **Top layer**: Healthy fats in small amounts
- **Third layer**: Lean meat, poultry, fish, eggs, nuts, seeds, legumes and dairy products (milk, yoghurt, cheese and alternatives)
- **Second layer**: Grains (preferably whole grains and wholemeal/wholegrain/high cereal fibre varieties of products)
- **Foundation layer**: Vegetables, legumes and fruit

Source: Nutrition Australia (http://nutritionaustralia.org/national/resource/healthy-eating-pyramid)
2A Make checks of client health status before delivery of health intervention

Before beginning any intervention or delivering any health service, you are required to check the health status of each person you are providing health care services to. Checking health status requires a thorough understanding of the person’s medical and health history to know whether their status has changed. It also involves observing, questioning and recording all relevant information. To do this effectively, you need to use knowledge of the workings of the human body systems, and be able to identify any potential or actual health problems prior to delivery of your health service.

Always seek advice from your supervisor or an appropriate health professional, particularly if you have any doubts or concerns.

Check health information

In order to make decisions regarding a person’s health status you need to have collected and reviewed all relevant information, including observations, questions, and documents completed previously, such as health and medical history and/or care plans. These documents can be updated with current information gained from the appointment.

Once this is done you need to be able to apply the findings, to your knowledge of the workings of the human body. For every body system disorder or problem you identify, you need to check if any action needs to be taken prior to your health intervention or delivery of service. Many common disorders or diseases require some adjustment in the delivery of service. It may mean that in some cases the intervention cannot go ahead. This will depend on your scope of practice and your area of health work – always check with others for clarification. Here are steps to follow in the process of checking the health status of a person.

<table>
<thead>
<tr>
<th>Checking health status to determine health intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obtain health information from observation, questioning and reviewing documentation.</td>
</tr>
<tr>
<td>Interpret information and gather findings.</td>
</tr>
<tr>
<td>Identify any actual or potential health problems.</td>
</tr>
<tr>
<td>Clarify significance of health problem in relation to health intervention. Ask for advice from appropriate person as required.</td>
</tr>
<tr>
<td>Make a decision as to proceed with health intervention in line with job role.</td>
</tr>
</tbody>
</table>
Respiratory system problems and their impacts
The following presents some common health problems relating to the respiratory system and the actions that may be necessary or may need to be considered.

**Asthma**
- Ensure the person has access to medication, according to their individual care plan.
- Ensure the person avoids exertion, if advised.
- If a severe attack occurs, encourage the person to remain calm, and follow emergency procedures.

**Bronchitis**
- Ensure the person follows any prescribed treatments, such as using a bronchodilator, or taking corticosteroids or antibiotics.
- Refer to the person’s individual care plan to know about mutual agreements regarding smoking, or if restrictive practice limits smoking. Giving up smoking is the most important step to assist in treating chronic bronchitis.

Other health problems and their impacts
Below are some other common health problems relating to the different body systems and a description of their significance for different work roles. The actions taken will depend on your job role and health service/intervention.

**Ear health**

**Hearing impairment**
Significance for your position:
- Ensure the person is wearing a hearing aid, if applicable.
- Speak directly to the person so they can see your face while you talk and observe your facial expression – they may lip-read or follow body language to compensate for hearing loss.

**Endocrine system**

**Diabetes**
Significance for your position:
- Refer to the person’s individual care plan for arrangements regarding special diet.
- Ensure the person has access to medication.
- If blood sugar is too high or too low, encourage the person to monitor blood sugar and take insulin if necessary. Blood sugar is measured in millimoles per litre, and normal levels are 4–8 mmol/L.
Steps to help minimise risk in an emergency intervention

1. **Refer to care plan**
   Refer to the person’s care plan and your supervisor before undertaking activities to ensure they are appropriate for the person’s needs and abilities.

2. **Report changes**
   Report any changes or variations from normal health status immediately to your supervisor or a relevant health professional.

3. **Ensure access to medication**
   If a person requires medication, such as ventilation for asthma or insulin for diabetes, ensure the person (or relevant professional) has easy access to the medication.

4. **Check accessibility**
   Ensure destinations for outings are suitable for peoples’ needs; for example, a person in a wheelchair requires ramp access and suitable transport.

5. **Check for hazards**
   Ensure destinations for outings are safe and hazard free; for example, protect a person with osteoporosis from falling by ensuring walkways are flat and not slippery.

6. **Check suitability of food**
   Ensure food provided is suitable for the people you support; for example, a person who has difficulty swallowing should have puréed food; a person with allergies may have special requirements. Health notes should contain notes on allergies, particularly in relation to medications.

7. **Locate first aid equipment**
   Ensure you can locate first-aid equipment; for example, know if there is a defibrillator at the destination of the activity.

**Non-emergency situations**
You may often observe variations from normal functioning when working with people with care needs. These may not be emergency situations, but you must still take timely action to address any variations to ensure the person receives the appropriate treatment and that their condition does not deteriorate or become life threatening. These variations may still impact on the health service you are going to deliver, and may require adjustments for the person with care needs.

Non-emergency situations are described here, along with suggestions about the significance of the observation. For each case, it is advised that you speak to your supervisor or an appropriate health professional, as the person may need to see a doctor immediately.

**Handling items**

**Observation:**
The person is having trouble handling cutlery, pens or tools.

**Significance:**
The person may have joint pain or osteoarthritis.
2C Consult appropriate people

There are times when it is essential that you consult appropriate people to clarify implications and significance of physical health status, especially if you are uncertain about your own capability or authority to take action. The different roles and limitations of a healthcare team or organisation will vary and change over time. It is important for you to perform your job effectively and safely, including knowing what to do when you need clarification or assistance.

Health services environments are usually structured around a team so that no individual staff member is ever alone – you should always have someone to refer to. That person may be physically present or you may need to contact them. It is crucial in your role that you refer to somebody if an incident occurs, or if there is a variation from normal health status and you need to ask for clarification about the health service you are going to provide.

Scope of practice

It is vital that you know the legal and ethical limits of your role or scope of practice. When you first apply for a job, you will refer to a position description that describes the role and responsibilities in detail. Keep your position description at hand until you become familiar with your new role.

Understanding what you can and cannot do is part of your duty of care. During your induction and training, you will become familiar with organisational protocol and exactly what your role entails. You need to understand the specific scope of your role, who to report to and how to report incidents or variations from the norm. Ensure you clarify ambiguous points regarding health status or variations from normal functioning with your supervisor.

Position description

You should read your position description for guidelines on your role. Sometimes a position description needs updating in response to organisational and legislative change. You should discuss this with your manager if this is the case. A position description will include details on who you report to and responsibilities and specifications of the position. It may include goals of the position and salary details. The details of your position description indirectly provide you with information on the limits of your role or authority.
Practice task 7

1. What should you do as soon as you notice changes from a person’s normal functioning?

2. What do you need to understand in order to deal with uncertainty and limits on your own capability or authority?

3. What is an iatrogenic intervention?

4. How do computerised health records protect the confidentiality of people’s health records?

Summary

1. Knowledge of the body systems and how they work helps you understand common health problems and variations from normal functioning.

2. Be aware of common health problems that may present themselves during a health status check.

3. Clarify if health disorders or diseases will affect the health intervention or service.

4. Serious health concerns need to be reported both verbally and in written form.

5. There are basic actions you can take to ensure that a person is safe and comfortable if there is a variation from normal functioning.

6. Precautions can be taken to minimise the risk of an emergency intervention.

7. Know organisational emergency procedures well before delivering a service or intervention.

8. Know who to consult if variation from normal functioning does occur.

9. Seek clarification about your role and scope of practice.

10. Keep a copy of your job/position description noting where it outlines the role you perform and scope of practice.

11. Take the impacts of health intervention seriously.

12. Pay particular notice to health information relating to medications and allergies.
Topic 3
In this topic you will learn how to:

3A Identify signs and symptoms of variations from normal health status

3B Identify potential factors responsible for significant variations from normal health status

3C Identify potential risk factors associated with variations from normal health status

3D Recognise and refer potentially serious issues in line with organisation requirements

Identify variations from normal physical health status

You may be the first to recognise the signs and symptoms of a health problem in a person with care needs. You will have identified variations from normal functioning through using the methods relevant to your job role, taking into account factors that may have been responsible for the variations observed. By determining the level of risk of this variation you will be able to decide on the next course of action. You may need to clarify the situation with a relevant health professional, and in the case of potentially serious issues, call an ambulance. You must know how to respond if you do notice variations from normal functioning. Always refer to organisational policies, procedures and protocols, as this is part of your duty of care in keeping the people you provide care to safe. Ensure you refer to the person’s care plan or other documentation, which should stipulate any specific risks.
**Signs and symptoms common to Types 1 and 2 diabetes**
- Fatigue
- Unexplained weight loss
- Polydipsia (excessive thirst)
- Polyuria (excessive urination)
- Polyphagia (excessive eating)
- Infection
- Agitation
- Blurry vision

**Signs and symptoms of nervous system problems**
Outlined below are some common nervous system problems that affect various body systems, and the signs and symptoms that may indicate the condition.

**Stroke**
- Signs and symptoms depend on the part of the brain affected, but could include:
  - paralysis of part of the body
  - difficulty speaking
  - blurry vision
  - difficulty comprehending
  - confusion
  - disorientation
  - loss of consciousness.

**Dementia**
- Early memory loss:
  - Difficulty finding words
  - Forgetting names and appointments
  - Change of personality
  - Difficulty completing familiar tasks
  - Mood swings
  - Wandering
  - Suspiciousness and paranoia
- Intermediate memory loss:
  - Worsening of symptoms
  - Inability to complete activities of daily living
  - Behaviour disorders
  - Difficulty sleeping
  - Depression
  - Anxiety
- Severe memory loss:
  - Worsening of symptoms
  - Complete dependence for activities of daily living
  - Inability to walk unassisted
  - Difficulty swallowing
  - Poor bladder control

**Seizures**
- Jerking of single part of the body or the whole body
- Lip smacking
- Staring
- Loss of bladder control
- Biting tongue

**Signs and symptoms of eye health problems**
Outlined below are some common eye problems that affect various body systems, and the signs and symptoms that may indicate the condition.
Signs and symptoms of dental problems
Outlined below are some common dental problems that affect various body systems of people with natural teeth and those with edentulous (non-natural teeth), and the signs and symptoms that may indicate the condition.

### Gingivitis
- Red, swollen gums
- Bleeding gums
- Discharge from gums
- Persistent bad breath
- Loose teeth
- Receding gums

### Halitosis
- Constant bad breath
- Inability to taste
- Dry mouth
- Coating on tongue

### Pain caused by ill-fitting dentures
- Gum shrinkage leading to ‘sloppy’ fit
- Rubbing on gums causing a callous
- Ulcerations and fungal infections
- Speaking difficulties
- Eating less or eating only soft foods leading to digestive problems or malnutrition
- Soreness at corners of mouth where mouth doesn’t seal correctly

### Identify a skin problem
Elizabeth works at an aged care home. She has been in this role for 15 years. While arranging and delivering services for the people she supports, Elizabeth is alert to any signs and symptoms which may suggest a health condition. One day, Elizabeth is serving morning tea to the residents. When she brings a cup of tea to Jean, Elizabeth notices that the skin on Jean’s right hand is red and inflamed. She is not sure but suspects Jean may have dermatitis. She asks Jean about the redness and she tells Jean she would like to advise the registered nurse (RN) about it. Jean tells Elizabeth that her hand started itching that morning and that she is finding it hard not to scratch.

When she has finished serving tea, Elizabeth locates the RN (Elizabeth’s supervisor), and tells her about the redness she observed on Jean’s hand. The RN thanks Elizabeth for passing on the information and says she will visit Jean and assess the situation. Elizabeth records her observations in Jean’s progress notes at the end of her shift, so her co-workers are aware of the situation.
Examples

Disease process

Internal factors can influence a person’s health
Karina notices that Audrey, one of the residents, is having difficulty walking when she arrives at the planned activity. Karina goes to assist and notices that Audrey’s legs are quite swollen. When Karina asks how Audrey feels, she says, ‘I don’t feel very well and don’t think I’ll be able to take part in the class today, as I am short of breath and quite tired. I think I’ll just watch today.’ Karina is quite concerned by this description, as she knows these signs can indicate congestive heart failure. Her concern then increases when she hears Audrey have a coughing attack, and notices a marked puffiness around her eye area. She immediately calls the registered nurse, who in turn organises for Audrey to be assessed by a doctor, as this is the first time Audrey has displayed these symptoms.

Emotional response

An emotional response can influence health
Peter, a middle-aged man, presents for a health appointment and appears to be sad and distressed after an appointment with a medical specialist. Donny knows that Peter has multiple sclerosis (MS) and was expecting test results back. Donny approaches Peter and asks if he is okay and if he would like to take part in the tai chi activity that is about to start. Peter replies, ’I suppose I should join in as I won’t be able to for much longer’, and then bursts into tears. Donny takes him aside and asks what has upset Peter so much. He tells Donny that he is finding it hard to come to terms with his recent diagnosis of MS, and that it is progressing more rapidly than the doctors hoped. He says that he doesn’t feel too bad physically, but that he is constantly upset at the thought of his future and what he will not be able to do, and often does not want to get out of bed in the morning. Donny talks with Peter for a while, before again suggesting that he take part in the tai chi, as he knows Peter enjoys and is good at it. He also asks Peter if he would mind if he tells his supervisor, Carol, about their conversation, as he knows Carol will be able to provide him with advice and assistance to help him come to terms with his diagnosis.
Fractures

- Osteoporosis
- Ageing

Osteoporosis

- Female gender
- Family history
- Ageing
- Osteoporosis,
- Alcohol consumption
- Lack of physical activity
- Bed rest
- Diet low in food containing vitamin D and calcium
- Dieting excessively
- Female athletes

Risks that increase the likelihood of endocrine system problems

The factors that increase the likelihood of diabetes-related health problems associated with other body systems are summarised below.

<table>
<thead>
<tr>
<th>Diabetes Type 1</th>
<th>Diabetes Type 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family history</td>
<td>Family history</td>
</tr>
<tr>
<td>European ethnicity</td>
<td>Hypertension</td>
</tr>
<tr>
<td>Slightly more common in males</td>
<td>Alcohol consumption</td>
</tr>
<tr>
<td></td>
<td>Inactivity</td>
</tr>
<tr>
<td></td>
<td>Obesity</td>
</tr>
<tr>
<td></td>
<td>Ageing</td>
</tr>
</tbody>
</table>
Risks that increase the likelihood of integumentary system problems

The risks that increase the likelihood of common integumentary system health problems associated with other body systems are summarised below.

**Burns**
- Exposure to heat
- Exposure to chemicals
- Exposure to radiation

**Dermatitis**
- Family history
- Allergies
- Exposure to detergents and soaps

**Impetigo**
- Exposure to bacteria
- Open wounds that cause infection to spread

**Open wounds**
- Exposure to sharp implements, including sharp corners or objects
- Falls
- Surgery

**Wound infection**
- Diabetes
- Surgery
- Poor immunity

Risks that increase the likelihood of dental health problems

The information provided below summarises the risks that increase the likelihood of common dental health problems associated with other body systems.

**Gingivitis**
- Smoking
- Family history
- Female gender
- Diabetes
- Stress
- Diet low in vitamins
Here is a simple incident report form that records an incident in an aged care home.

### Incident report form

<table>
<thead>
<tr>
<th>Report compiled by:</th>
<th>Contact phone number: 9999 0000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of incident:</td>
<td>Time of incident: 1900 hrs</td>
</tr>
<tr>
<td>Name/s of person/s injured/person/s involved:</td>
<td>Mr Keith Wales</td>
</tr>
<tr>
<td>Staff/resident:</td>
<td>Resident</td>
</tr>
<tr>
<td>If client, where was staff member at time of incident?</td>
<td>In Mr Wales’s room</td>
</tr>
<tr>
<td>Part of body injured (tick the correct box and enter L for left side or R for right side, if applicable)</td>
<td></td>
</tr>
<tr>
<td>Head/neck</td>
<td>Shoulder/arm</td>
</tr>
<tr>
<td>Eyes</td>
<td>Mouth</td>
</tr>
<tr>
<td>Ankle</td>
<td>Feet/toes</td>
</tr>
<tr>
<td>Description of incident:</td>
<td>Sleeping tablet given to wrong resident</td>
</tr>
<tr>
<td>Cause of incident:</td>
<td>I was asked to give the sleeping tablet to ‘Keith’ and I did not check which Keith. I was only looking after Keith Wales today, so thought the tablet was meant for him. I did not check the care plan to see if sleeping tablets were part of his care until after I had given him the tablet. When I realised my mistake, I verbally reported it to RN Kath Williams, supervisor on my shift.</td>
</tr>
<tr>
<td>Treatment given:</td>
<td>None</td>
</tr>
<tr>
<td>Witnessed by:</td>
<td>Davey Jacobs (aged care worker)</td>
</tr>
</tbody>
</table>

**Corrective action taken (Health and safety officer):**

### Arrange referral if necessary

If the situation is not an emergency, your supervisor may suggest a person should see a doctor or relevant health professional such as a dentist, podiatrist, audiologist, physiotherapist, psychologist or psychiatrist. It will be necessary to discuss referral and the best person with the specialist skills to deal with the health issue. Your supervisor will make some recommendations, and they may ask you to arrange the appointment. Ensure that the referral information is recorded on the person’s health documentation. If possible follow up with the person the next time you meet with them to determine the outcome of the intervention.