



Home visit and gym		
Made by	Tredu	
Starting point, why do we do this? Learning goals/targets	 learn how to work with a multiprofessional team and develop patient/client guidance skills (interactional and motivational skills) learn how to use welfare technology with the clients at school environment and rehabilitation environment (a gym in the school) learn how to search welfare information and opportunities with the patient/client develop competence skills by searching information and dealing with information using critical reading, working and guiding clients to find right answers considering welfare technology learn how to cooperate with working life members/patricipants develop project managing skills evaluate own welfare technology skills and competence 	
Target group (students)	Practical nurse students: - competence area in Rehabilitation and Competence area in Care for Disabled (specializing studies) - average group size 20 to 25 students, 1-2 teachers - average 10 clients/patients	
Learning environment (school, work placement, company)	School (class rooms, a gym in the school, home visits)	
Who is involved (students/teachers/clients)	StudentsTeachers (1-2 persons)Clients (living at home)	
Preparations, instructions to the students	Preparations: cooperation with local nursery homes and third sector services (non-profit/govermental-organizations) -> physiotherapists, students and teacher cooperation Instructions: activate the elderly living at home and prevent falls	
Duration/schedule	Schedule: Getting started with students and with the teacher -> project instructions (2h) at school	
	 The first meeting with the clients, students and teacher -> at school (4h). Lounge area and gym in the school: getting to know each other, and getting started, as a client – student –pair: initial interview ("how are you today", healthcare inquiry, client's own thoughts about his/her ability to manage daily living at home with spouse/ without spouse or other family, need for help 	













(washing, clothing, food preparation, medications, aids at home, walking/moving aids, shopping etc.), technology help at home?

- functional ability measurements and analyse (balance, walking speed, muscular strength (mainly strength of the lower limbs), grip strength, blood pressure (with the valid and reliable gauges/measurements "TOIMIA-tietokanta/ database for measurements (ICF structure)", measure "Falls Risk for Older People – Community setting (FROP-Com)"
- home exercise and motivating clients to perform them (diary)

The second meeting: home visits (2-3h)

- checking the home together with the client (and his/her spouse/ other relatives) and the students and teacher (using Home Inspection List, UKK institute); dangers / things to consider to check the accessibility and safety of the house, technical devices/support (safety alarms, Video Visit, care alarm for medications, lights, food etc.) AND customer/client guidance and counselling, also home exercise check up (muscular strength and balance training)
- short feedback with the students and teacher about home visits (1-2h)
- **phone call** to student's own client, action plan for technological help/support for home living and preventing falls, and guidance (how, when, where?)
- exercise group at school Tredun Helmi / Gym 1h/week/
 2months) with the students and teacher / or teacher's assistant

The third meeting: at the school (4h)

- interview (how are you now?), changes at home, change of habits to prevent falls?
- repeat measurements and analysis of results (provement of activity, balance, coherence) -> what next?

Extra action for the last meeting:

- relaxation (simultaneous relaxation of the neck and shoulder with the heat kit) and imaginary travel and activate cognitive behavior with the time travel application (HILDA), memorizing
- feedback and feelings after trial period

Last meeting (2h):

feedback with the students and teacher(s)













Description of the learning process, what kind of welfare technology is involved Evaluation plan of the module, how do we evaluate the module	 Individual home welfare technology (home inventory; whether home technology is already in use) Kinesis (functional training), NuStep (aerobic exercise), Hur Smart Touch computer based exercise solution for lower limb strength and balance Active participation and preparation (planning, implementation and evaluation -report), individual feedback and learning diary)
Anticipated benefit to the client, student, working life	 client reviews after the project: "very refreshing and mood healing", "this has not happened before", "grip strength assessment was so good and handy", "the students were accurate, made good observations, expert", "it was great when for once we had enough time (customer compared to home service and outpatient service, where customers have plenty of time and provider has little time for a single customer, he/she is "always in a hurry"), "the home visit was excellent, got a sense of what at home should pay attention to and what would have considered before "," food in Elmer's restaurant was tasty, best meal for a long time." students reviews after the project: educational, interesting and motivating, great way to combine theory and practice", real clients were important for learning and competence!" teachers reviews after the project: "Authentic customers, optimal facilities, and the ability to undertake student and customeroriented instruction will definitely enhance student motivation and commitment. It is also easier to evaluate students and their skills through practical situations. Joint teaching enhances pedagogical know-how and the quality of teaching, working life reviews after the project: fresh ideas, more time and presence, pleased clients, motivation increase, empowering (time limits at normal care and rehabilitation), getting to know new technological devices/databases to help elderly to maintain their ability to stay safe at home longer, and live healthier NOTE: physical indicators, in all parts, there was a noticeable improvement in initial and final measurement comparison for each clients, with regard to balance maintenance, lower limb muscular strength, grip strength and walking speed. Also mood and motivation were improving (not measured with the valid measurement, perception form last interview) Main literature: S. Pajala, läkkäiden kaatumisten ehkäisy, 2016.
	 Preventing Falls and Harm From Falls in Older People: Best Practice Guidelines for Australian Hospitals, Residential Aged Care Facilities and Community Care 2009. Australian Commission on Safety and Quality in Health Care.













Teaching materials	







