

Disability Workplace Literacy Activity Worksheets

These worksheets are designed to be printed.

Name Christina De Souza

Date DD/MM/YYYY

Activities completed

- Worksheet 1 - Find information
- Worksheet 2 - Complete an incident report
- Worksheet 3 - Follow instructions
- Worksheet 4 - Fill in a personal budget
- Worksheet 5 - Understand and fill in a timesheet

Worksheet 1

Finding information

Read the questions below and tick ONE correct answer.

This medicine is best used before which date?

- 26 January 2011
- 30 June 2012
- 22 April 2012
- 12 May 2016



What time does the clinic open on Saturdays?

- 9:00 am
- 8:30 pm
- 11:30 pm

It takes 50 minutes to drive to the clinic from home.
I have an appointment at 10.30 am.
What time do I need to leave home?

9:40 am or 0940 hrs

CLINIC OPENING HOURS

Monday to Friday 8.30am to 5.30pm
Saturday 9.00am to 11.30am
Sunday & Public Holidays Closed

CALL 8582 2855 for appointments

AFTER HOURS
River Doc's - Emergency Dept 24/7
and after hours GP Clinic
CALL 8580 2842
A gap fee applies

CALL 000
for immediate
emergency help

What is the meaning of this sign?

- DO NOT TOUCH: Hot liquid
- DANGER: Slippery floor
- WARNING: Dangerous chemicals



TOXIC HAZARD

Here is information about blood pressure. Read it and then answer the questions.

Blood pressure is the force of blood against the walls of the arteries in the heart.

The picture shows a patient having his blood pressure checked.

Blood pressure is a vital sign of life.



Blood pressure is mainly concerned with which body part?

- The heart
- The brain
- The lungs

This information:

- Warns the reader about the dangers of high blood pressure
- Informs the reader about blood pressure
- Instructs the reader on how to use a blood pressure device

Worksheet 2

Complete an incident report

Imagine there has been an accident or incident at your workplace that needs to be recorded in writing.

Use the form on the next page to fill in your details and describe what happened. Pretend that you are the injured person. The witness can be someone you know or someone you have made up.

You may use the ideas below or describe an incident or accident from your own experience at work. The incident or accident can be real or imagined, for example:

- You slip on a wet floor and sprain your ankle
- An electric fire starts in the kitchen and you burn your hand
- You hurt your back while lifting a client



ACCIDENT/INCIDENT REPORT

Person completing this form	Christina De Souza
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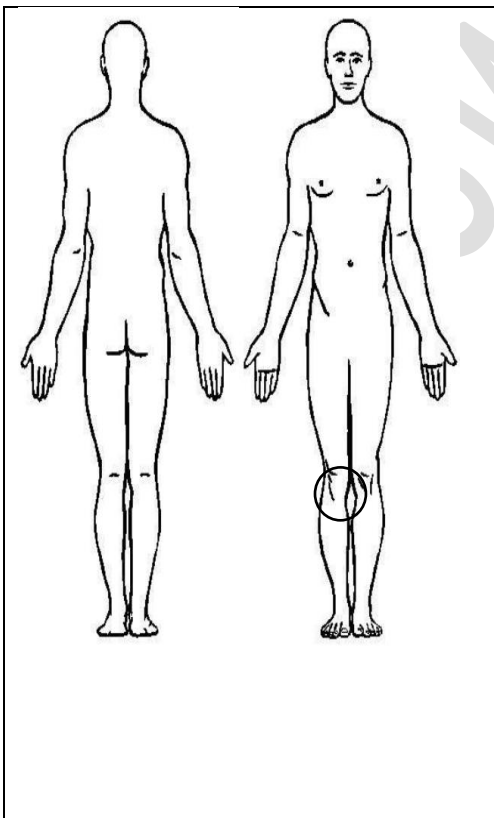
Incident date	3/3/2016	Time	9 am	Date completed	4/3/2016	Number Office use only	
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Location of incident	15 Harrison Street, Hobart
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Parties involved	
Clients	
Employees	Christina De Souza

Incident reported to (manager/coordinator)	Lucy Amos
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Accident / incident summary If there was an injury, indicate where it was sustained by circling the part(s) of the body	Write a summary of the incident: <ul style="list-style-type: none"> Explain what happened and what you did in response Describe any injuries
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I arrived at a client's home, and when I walked up the stairs I slipped over. My knee hit the step very hard, and it began to hurt immediately. I tried to stand up and walk, I was able to do this with difficulty. I went inside the client's house to look at my knee. It had a very red mark on it, and was starting to get a bruise. I applied an ice pack for 10 minutes. I called my supervisor to let her know what had happened and that I would not be able to provide support to the client. I rested my knee for the remainder of the day.

Worksheet 3

Follow instructions

Use the information from the poster on the following page to answer the following questions.

For a person suffering from a mild to moderate allergic reaction caused by a bee sting, what is the first thing you would you do?

- Give (administer) the EpiPen
- Flick out the sting
- Quickly phone a member of the family

Someone is suffering from a severe allergic reaction. You administer an EpiPen. What is the step after pulling off the blue safety cap?

- Form a fist around the EpiPen
- Push down hard until you hear a click
- Place the orange end against their thigh

A client with a history of anaphylaxis complains that their tongue is beginning to swell. What is the first thing the poster advises you to do?

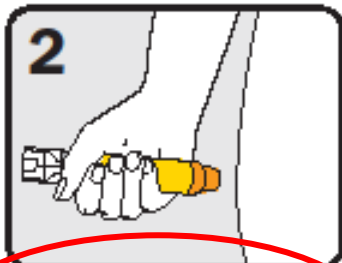
- Lay them flat
- Phone an ambulance
- Stay with the person and call for help

For EpiPen® adrenaline (epinephrine) autoinjectors

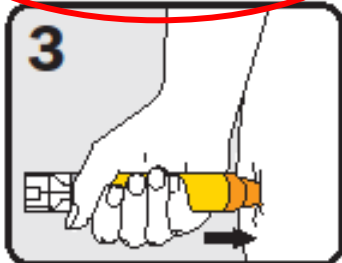
How to give EpiPen®



Form fist around EpiPen® and PULL OFF BLUE SAFETY RELEASE



Hold leg still and PLACE ORANGE END against outer mid-thigh (with or without clothing)



PUSH DOWN HARD until a click is heard or felt and hold in place for 10 seconds

REMOVE EpiPen® and gently massage injection site for 10 seconds

Instructions are also on the device label

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SIGNS OF MILD TO MODERATE ALLERGIC REACTION

- Swelling of lips, face, eyes
- Hives or welts
- Tingling mouth
- Abdominal pain, vomiting (these are signs of anaphylaxis for insect allergy)

ACTION FOR MILD TO MODERATE ALLERGIC REACTION

- For insect allergy - flick out sting if visible
- For tick allergy - freeze dry tick and allow to drop off
- Stay with person and call for help
- Locate EpiPen® or EpiPen® Jr adrenaline autoinjector
- Phone family/emergency contact

Mild to moderate allergic reactions (such as hives or swelling) may not always occur before anaphylaxis

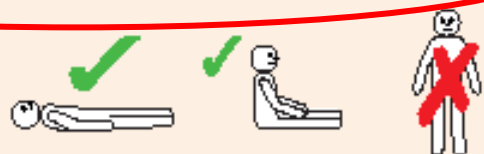
WATCH FOR ANY ONE OF THE FOLLOWING SIGNS OF ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Wheeze or persistent cough
- Difficulty talking and/or hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (young children)

ACTION FOR ANAPHYLAXIS

1 Lay person flat - do NOT allow them to stand or walk

- If unconscious, place in recovery position
- If breathing is difficult allow them to sit



2 Give EpiPen® or EpiPen® Jr adrenaline autoinjector

3 Phone ambulance* - 000 (AU) or 111 (NZ)

4 Phone family/emergency contact

5 Further adrenaline doses may be given if no response after 5 minutes

6 Transfer* person to hospital for at least 4 hours of observation

If in doubt give adrenaline autoinjector

Commence CPR at any time if person is unresponsive and not breathing normally

EpiPen® is prescribed for children over 20kg and adults. EpiPen Jr® is prescribed for children 10-20kg

ALWAYS give adrenaline autoinjector **FIRST**, and then asthma reliever puffer if someone with known asthma and allergy to food, insects or medication has **SUDDEN BREATHING DIFFICULTY** (including wheeze, persistent cough or hoarse voice) even if there are no skin symptoms

Worksheet 4

Fill in a personal budget

James lives in a house supported by Sunny Services. Part of your role is to record the cash he has on hand. This includes money he withdraws from the bank, any other cash income and everything he spends. This supports James to track and manage his personal budget.

Record how much James has on hand during December 2015 on the Personal Budget Record.

- 1st December, withdrew \$200 dollars from his bank account – this transaction is already recorded
- 3rd December, spent \$65.50 on clothing
- 4th December, bought groceries \$78.29
- 6th December, went to the pool, \$6.40 return bus ticket, \$3.50 entry
- 11th December, bought groceries \$45.65
- 12th December, sold a second hand radio for \$10
- 14th December, paid for lunch \$22.00
- 18th December, went to city, \$6.40 return bus ticket, \$4.50 coffee

When you have entered all the transactions, calculate the totals at the bottom of the page. You may use a calculator for this activity.



RESIDENT PERSONAL BUDGET

Attach all receipts in date order to this record at the end of the month

Date	Amount In	Amount Out	Balance	Details	Receipt	Staff Name	Signature
	Cash on hand			Money spent for.. Income received from ...			
1/12/15	\$28.00		\$28.00	Balance brought forward		Jill Lambert	J. Lambert
1/12/15	\$200.00		\$228.00	Withdrawal from bank		Jill Lambert	J. Lambert
3/12/2015		\$65.50	\$162.50	Bought clothes		C. De Souza	CDeSouza
4/12/2015		\$78.30	\$84.20	Bought groceries		C De Souza	CDeSouza
6/12/2015		\$6.40	\$77.80	Bought bus ticket to pool		C De Souza	CDeSouza
6/12/2015		\$3.50	\$74.30	Paid for entry to pool		C De Souza	CDeSouza
11/12/2015		\$45.65	\$28.65	Bought groceries		C De Souza	CDeSouza
12/12/2015	\$10.00		\$38.65	Sold radio		C De Souza	CDeSouza
14/12/2015		\$22.00	\$16.65	Bought lunch		C De Souza	CDeSouza
18/12/2015		\$6.40	\$10.25	Bought bus ticket to city		C De Souza	CDeSouza
18/12/2015		\$4.50	\$5.75	Bought coffee		C De Souza	CDeSouza
Totals	\$238.00	\$232.25	\$5.75				

Worksheet 5

Understand and fill in a timesheet

Look at the timesheet on the opposite page to complete the following questions and activities.

What is the purpose of this document?

To record work hours and provide information to your supervisor and payroll

How many hours did Christina work on 12 November?

3 hours

How many regular hours did Christina work over the period 10-16 November?

13 hours

Why does the supervisor need to sign the form?

To confirm that you have worked the hours stated

Complete the time sheet on the opposite page, using the following information. Note that hours worked between 9am and 5pm are regular. All hours outside those times are overtime hours.

- On 17 November, Christina started work at 9.30am and finished at 1pm.
- On 18, 19 and 20 November, Christina started work at 2pm and worked until 5.30pm.
- The following day, Christina started work at 8.30am and finished at 1pm.

How many overtime hours did Christine work for the period 10-21 November?

4.5 hours

How many regular hours did Christina work for that period?

29.5 hours

Christina is paid \$20 per hour for each regular hour and an extra \$5 per hour for overtime hours. What was her total pay for the period covered by this time sheet?

$$(4.5 \times \$25) + (29.5 \times \$20) = \$112.50 + \$590.00 = \$702.50$$

TIME SHEET

Name	Christina De Souza	Week starting	10 November, 2015
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Job role	Casual support worker	Employee number	7061
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Date	Start time	End time	Regular hours	Overtime hours
10/11/15	09:00	12:00	3	
11/11/15	09:00	13:00	4	
12/11/15	09:00	12:00	3	
13/11/15	13:00	16:00	3	
16/11/15	17:00	19:30		2.5
17/11/2015	09:30	13:00	3.5	
18/11/2015	14:00	17:30	3	0.5
19/11/2015	14:00	17:30	3	0.5
20/11/2015	14:00	17:30	3	0.5
21/11/2015	08:30	13:00	4	0.5
TOTAL HOURS			29.5	4.5

Employee signature	<i>CDeSouza</i>	Date	21/11/2015*
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Supervisor signature		Date	
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*Any date after the 21/11/2015 is acceptable