

# Partners in Quality Care

May 2025



## **OBJECTIVES:**

- Review skills for personal care
- Review person centered care

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## References:

Mosby's Textbook for Nursing Assistants, tenth edition.

<https://info.ncdhhs.gov/dhsr/hcpr/curriculum/index.html>

## **Providing Personal Care**

Assisting individuals with personal care is a key role for an In-home aide. Personal care and hygiene are critical to the health, comfort and well-being for everyone, and assistance with the activities involved in personal care enable a person to live in their own home for as long as possible. A person may have a short-term need for assistance, or they may have a chronic condition that requires assistance with personal care for a long term. Illness and aging can affect a person's self-care abilities. It is important to promote the dignity of the person and to provide person centered care for the person that you are assisting. Take a few minutes to think about how you would feel if you needed assistance with personal care and the best scenario you can think of during the interaction.

Assisting an individual with personal care is a role that is not just about the knowledge and skills required for the care, it also requires a reflection of the In-home aide's attitude in assisting with care of the body. An In-home aide has a set of abilities that are unique to their vocation. The type of care provided, and the help provided to the client and the respite provided to the client's family are invaluable. With all personal care activities, effective communication, infection control, and client safety are important aspects to be threaded in all care activities.

## **Knowledge, skills, and attitude examples:**

- Knowledge and ability- what you need to know related to the human body and infection control; what type of physical abilities you need to provide the tasks listed on the plan of care as well as abilities to document observations and tasks provided
- Skills- skills needed to carry out the tasks of personal care and keeping your client's safe
- Attitude- how you feel about taking care of the personal needs of another person and having empathy to maintain the dignity of the person that you are assisting

Person centered care considers a person's personal preferences in personal care and hygiene activities and follows a person's routines and habits. Follow the plan of care for personal care activities and report to your supervisor if the client requests the plan of care to change. It is important to protect a person's right to privacy and to personal choice. The skin is the body's first line of defense against disease. Assistance with bathing is a vital role for an In-home aide to help clients with hygiene. Assisting a person with bathing is also a time to inspect the client's skin for any signs of redness, or skin breakdown or other skin abnormalities. It is important to report any signs of skin issues you notice with your clients. Pressure injury is localized damage to the skin and underlying soft tissue, the injury is usually over a bony prominence (back of the head, shoulder blades, elbows, hips, spine, sacrum, knees, ankles, heels, toes) or related to a medical or other device and results from pressure or pressure in combination with shear ( layers of the skin rub against each other).

### **Providing Personal Care**

**Infection control-** wear gloves when providing personal care and change gloves as needed and perform hand hygiene after removing gloves. Use gloves when there is a risk of exposure to blood or other body fluids, wear additional personal protective equipment (PPE) as directed when providing mouth care or when flossing teeth if there is a risk of splashing or spraying (PPE examples- masks, gowns, goggles). Keep the client's clothing, towels, and washcloths off of the floor, even when soiled - place soiled clothing in a designated container.

**Bathing-** Bathing cleans the skin, genital, and anal areas. Microbes, dead skin, perspiration, and excess oils are removed, this is important as the skin provides the body's protective covering. A bath is also refreshing and relaxing, stimulates circulation, and provides exercise to body parts. Assisting a client with a bath or shower as assigned on the plan of care provides this important aspect of hygiene. Do not change the type of bath assigned on the plan of care without discussing with your supervisor. The frequency of the bath depends on the plan of care and the needs of the client. For example, some clients may take a tub bath or shower only twice a week. This includes older adults with very dry skin and clients who are very weak and tire easily. Others with limitations, such as those with casts, recent surgical incisions, and traction, may not follow a pattern of daily bathing. Incontinent clients will need to be bathed each time the skin becomes soiled to prevent skin irritation and breakdown. If your client does not want to bathe, try to find out why. He/She may be afraid of falling in the bathroom, feel too cold in the bathroom, they may have pain, or they may be too tired. Do not force your client to bathe or criticize him or her for not bathing. Discuss the situation with your supervisor to explore alternate bathing techniques that can be used. A person who has dementia may be fearful of bathing. Talk to your supervisor about additional training in working with clients with dementia.

Check the client's plan of care to see what kind of bathing you may assist with. Make sure you have been approved for the type of bath required; has your supervisor provided competency training/testing for you as needed for the skill? Examples of components with bathing assistance include:

**Get all the things you'll need before you start.** Before starting, ask the client if he/she is ready for bathing. Confirm with the client what you will do. Support the client to do as much as he/she can. Give him/her as much privacy as possible.

**To keep you and the client safe:** Follow rules for infection control. Use good body mechanics and be extremely careful when transferring clients in and out of the tub/shower. Notify your supervisor if you are having difficulty transferring your client into the tub or shower, assistive devices may be needed. Watch out for wet spots on the floor or objects that might make you or the client fall. Assure bath water is not too hot, this is especially important if the client has decreased sensation (paraplegia, diabetic neuropathy, decreased sensation, etc.) and cannot identify that the water is too hot. Bathrooms pose hazards for injuries such as slips and falls; safety precautions are a must. \*\*\*Do not get distracted while assisting clients in the bathroom. Do not leave the person alone while in the bath or shower. Provide as much privacy as possible while maintaining safety.

**To keep the client from getting cold:**

Work as quickly as you can, but without making the client feel rushed. Add warm water to a tub bath as needed. Keep the client covered when you are assisting him/her to dry off.

**Assistive Devices for the Client for Bathing:**

- Assistive devices that make it easier for the client to perform personal care include items such as long handled sponges, shower chairs, toothbrush holders (allows the client to put toothpaste with only one hand), extra-long handled brush and comb (makes it easier for the client to do their own hair). Using a bath chair or bench when taking a shower and using a hand-held shower head may be helpful for the client when showering.

### **Providing Personal Care**

A person who has a cognitive impairment such as dementia (including Alzheimer's disease) may be fearful of bathing. Talk to your supervisor about additional training in working with clients with dementia. At some point, people with Alzheimer's disease will need help bathing, combing their hair, brushing their teeth, and getting dressed. Because these are private activities, people may not want help. They may feel embarrassed about being unclothed in front of caregivers. They also may feel angry about not being able to care for themselves. Considerations before and during a bath or shower include:

- Get the soap, washcloth, towel(s), and shampoo ready. Make sure the bathroom is warm and well lit.
- Play soft music if it helps to relax the person. Be matter of fact about bathing. Say, "It's time for a bath now." Don't argue about the need for a bath or shower. Be gentle and respectful. Tell the person what you are going to do, step by step.
- Make sure the water temperature is comfortable. Don't use bath oil. It can make the tub slippery and may cause urinary tract infections. Put a towel over the person's shoulders and lap, this helps him or her feel less exposed. Then use a washcloth to clean under the towel. Distract the person by talking about something else if he or she becomes upset. Give the person a washcloth to hold.
- ➔ Alternate bathing techniques may be needed such as using a non-rinse soap product with warm/wet towels if a client is too frightened and or combative for a traditional bath. No rinse shampoo may be helpful as well. A client has a right to refuse a bath, do not force a client to bathe. Talk to your supervisor and report if you are unable to assist the client with any activities on the plan of care such as a bath.

Tips for dressing and undressing a person with Alzheimer's Disease or other dementias include:

- ✓ Choose clothing that is comfortable and simple to put on. Front opening garments are easy to put on. Pullover tops are harder, also, the person may become frightened when the head is inside a garment.
- ✓ Items that close with Velcro are easy to put on and take off, and buttons, zippers, snaps, and other closures can frustrate the person.
- ✓ Apply slip on shoes that will not slide off or shoes with Velcro straps
- ✓ Offer simple clothing choices, such as having the person choose between two blouses, 2 pants, and other clothing items.
- ✓ Lay clothing out in the order it will be put on. Hand the person one item at a time. Tell or show the person what to do. Do not rush.

### **Putting it all Together:**

- ☐ Clients may be unable to perform self-care because of the effects of illness, a disability, pain and discomfort, lack of strength and energy, fear of injury, anxiety, or confusion
- ☐ Respect the client's need for privacy when performing personal care activities
- ☐ Observations made during personal care such as changes in a client's skin are important parts of observing, reporting, and recording as part of assisting with personal care

Personal cleanliness (hygiene), which is achieved through regularly washing the body and hair and brushing the teeth, is important for both physical and emotional health. These activities help to keep the skin, hair, and mouth healthy by removing infection causing microbes. Grooming activities, such as dressing, shaving, and styling the hair, help to maintain a neat appearance and are also important for maintaining a person's emotional health. When you help a person with personal hygiene and grooming activities, you help the person feel confident and attractive. A person who feels confident and attractive is more likely to socialize with others and feel better about him or herself in general.