Activities of Daily Living

Basic Health & Safety #1
DSP Core Curriculum Requirement

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Principles of Support

- Safety
- Dignity
- Infection Control
- Prevention
- Intervention
- Privacy
- Communication
- Independence
- Recognition
Level of Assistance

- **Totally Dependant**: Unable to complete any steps of a task
- **Physical Assistance**: Positioning assistance required (body or materials)
- **Hand Over Hand**: Staff put their hands over the Participant’s hands to assist
- **Modeling**: Staff show how to complete a task by demonstrating
- **4 or More Prompts**: verbal / physical prompts
- **2-3 Prompts**: max of 3 verbal/physical prompts
- **1 Prompt**: max of 1 prompt
- **Total Independence**: Participant does task on own
Positive Feedback

- Praise for effort
- Praise for attempting
- Praise for assisting
- Praise for a job well done
Assisting with Oral Hygiene

Brushing should be done at least twice daily
Flossing at least once a day

**Tooth Brushing Procedure:**
1. Brush outside surfaces
2. Brush inside surfaces
3. Brush biting surfaces
When to Seek Non-Routine Dental Care

- Toothache or extreme tooth sensitivity to cold or hot
- Unusual soft, swollen, or bleeding gums
- Spots, wounds, sores, discoloration or enlargement of the tongue, chronic bad breath or foul tastes in the mouth
- Unusual difficulty chewing, swallowing, recurrent regurgitation or gagging
Denture Care

- Loosen upper plate by place first finger on roof of plate and thumb over outer gum and gently release.
- Loosen lower plate by placing finger inside lower plate and thumb on outer gum and gently release.
- Put dentures in a cup with tepid water
- Put denture cleaner on denture brush
- Hold the dentures firmly and brush each plate
- Rinse dentures and the storage cup
- Put dentures in the empty cup
- Have Participant rinse their mouth with water / mouthwash
- Using a soft brush cleanse mouth and tongue
- Look at condition of mouth, gums, tongue, and lips
- Insert dentures into mouth press gently but firmly in place
- Wipe face and put away supplies
- Participant & Staff wash hands
Menstrual Assistance

Menstruation is a normal part of a female’s life. Personal hygiene is especially important during menstruation to prevent odor. A Participant may need extra attention during this time.

Staff will also need to assist in documenting when menstruation occurs.

Staff should report unusually heavy flow; unusual color; presence of large clots.
Menstrual Assistance continued

- Change pads / tampons every 2 hours
- Sanitary pads may cause chapping
- Wrap used pads / tampons in the disposable bag or toilet paper before discarding.
- A normal period is about 28 days. Ovulation generally occurs around the middle of the cycle.
- The flow can last from 3-8 days, usually becoming heaviest on the 2\textsuperscript{nd} & 3\textsuperscript{rd} days.
- Stress or Pregnancy can cause skipped cycles.
- Some women have cramps during the period, may feel depressed or grouchy, breasts may be tender, may retain water / bloating
Bathing

When assisting with bathing /showering:
Ensure the tub – shower has been disinfected before using
Check the water temperature using thermometer. Water should be no more than 110 degrees
Provide privacy and warmth
Inspect skin for signs of injury or changes in condition
Use clean washcloth & towel
Help Participant bathe from top down
Order of Bathing

- Bathing is done **TOP TO BOTTOM:**

  Hands / wrists; face, neck and ears; shoulder, underarm, arm; chest stomach, breasts, underneath breasts and in any skin folds; back; hip, leg; feet
Perineal Care for Females

Separate folds of skin in genital area, using soapy washcloth, with one down stroke on one side. Use the other side of the washcloth for other side. Rinse front to back.

Wash the anal area with a soapy washcloth from front to back. Rinse
Perineal Care for Males

Hold, wash and rinse penis and the tip. Wash from the small opening where the urine flows to the base of the penis. Use a different part of the washcloth for each wipe. If the Participant is not circumcised, be sure the foreskin is pulled back and wash and rinse penis. Return foreskin to its natural position.

Spread his legs and wash, rinse and dry the scrotum. Clean between the skin folds in this area and under the scrotum.

Wash, rinse and dry the anal area moving from front to back. Use a different part of the washcloth for each type. Dry area thoroughly.
Bed Bath

Prepare needed supplies: basin of water, soap, several towels and 1 very large towel to be placed under the person

You will need 2 Staff to help put the towel under the person: use the log roll method

As you undress the person cover her/him with the bed sheet to preserve their dignity & to help keep them from getting cold

Put an additional towel under each body part as you wash so water does get onto the bed

Wash, rinse and dry each body part before moving to the next body part
Shampooing Hair

- Ensure water is no more than 110 degrees
- Wash hair in designated area
- Wipe up any water that goes on the floor
- Use the least amount of prompting needed
- Seek permission & discuss what you are doing as you do it
- Take care to prevent water from entering individual’s ears
- Choice of shampoo/conditioner is the Participants/doctor’s
- Disposable gloves should be worn by DSP
- Examine scalp for problems (itching, flaking, head lice, sores, etc.) Inform supervisor / health services
- Shampooing should occur as often as necessary to look good and be smell-free
Shampooing Hair continued

**Steps:**
Provide for privacy
Prompt or assist person to thoroughly wet hair using warm water
Apply small amount of shampoo to palm of hand and rub hands together. Apply shampoo to all parts of hair.
Prompt /assist person to clean the scalp and distribute the suds throughout hair
Be careful not to get shampoo in eyes – prompt person to shut eyes
Prompt /assist person to rinse hair thoroughly
Repeat process with conditioner
Prompt/assist person to wrap hair with a clean towel
Prompt/assist person to blow dry/set hair. Curling iron, etc.
Style hair in age-appropriate style per the person’s choice.
Incontinence

**Steps:**
Staff provide for privacy & explain what they are doing
Gather supplies: protective brief (if used); washcloth, warm water, soap, towel
Put on disposable gloves
Undress / prompt person to undress where needed.
Remove soiled brief by breaking tapes at the legs first, then the waist. Wrap and discard soiled briefs in proper trash (never bedroom)
Wash and dry peri-anal area with soap & water. Look for red irritated areas on the skin. Remember to wash/wipe front to back.
Unfold new brief. Raise person’s buttocks and slide brief under or role the person to one side. Fold back side flap to edge of brief. Align waist tapes with the small of the back. Tuck brief under buttocks. Roll person to other side and unfold flap.
Pull brief up between legs into crotch area. Pull gathers all the way up into leg creases.
Smooth brief over abdomen to ensure snug fit. The inner porous lining should be next to skin. Do not fold abdominal waist band under.
Fasten the leg tapes first, then waist tapes. Ensure proper fit.
Shaving

- Do not use electric razor in the same room where oxygen is used or around water.
- Check all types of razors for chips or rust on blades.
- Discard used razor blades when finished.
- Use only person’s personal razor.
- Supervise use of razors closely for safe & correct handling before the person shaves independently.
- Encourage person to do as much for him/herself as possible.
- Honor cultural choices regarding whether or not to shave.
Shaving continued

General Steps:
Teach/assist person to locate the best place to shave. A mirror is recommended for shaving face or underarms.
Teach/assist person to check skin for moles, birthmarks or cuts to prevent nicks.
Shaving with Non-Electric Razor

Teach/assist:
- Person to open shaving and remove safety cap from razor
- Person to wash area to be shaved with warm, soapy water
- Person to apply shaving cream
- Person to use fingers of one hand to hold skin tight and shave in the direction the hair grown
- Person to use short strokes around chin, lips, neck, front & back of knees and under arms
- Person to rinse razor often to remove hair & shaving cream
- Person to rinse off remaining shaving cream and dry skin with gentle patting motions when finished
- Person to apply aftershave or skin lotion if desired
- Person to store supplies
Shaving with Electric Razor

Teach/assist:

- Person to plug in razor and turn it on (away from water)
- Person to use mirror when shaving face/neck or underarms
- Person in using a gentle, even pressure as they move the razor over skin. Demonstrate who running hand over shaved area can locate missed hairs
- Person how to turn off razor, unplug and clean hair from blades
- Person to applying aftershave or skin lotion as desired
Cleaning & Trimming Nails

Individuals with Diabetes require professional assistance with nail care
Individuals with toenail fungus or thick toenails also require professional assistance with nail care
Toenails and fingernails should be kept clean, neatly trimmed, and smooth to prevent injury to skin
Trimming nails too short may cause ingrown toenails
Encourage Participants to do as much as they can
Always obtain permission to assist & explain what you are doing as you are assisting
Teach / assist:
- Person how to soak his/her hands or feet in warm water for at least 5 minutes then wash hands / feet with soap. (soaking softens nails)
- Person to push nail cuticle back from fingers and toes gently (do not cut off cuticle)
- Person to clean under nails with cuticle stick or tool on nail clipper
- Person to change water and wash, rinse, and dry hands or feet
- Person to use nail clippers or nail scissors to trim toenails straight across. Fingernails can be trimmed with slight curve. Use emery board or nail file to shape and smooth nails as needed / desired
ADL Wrap Up

- Remember to always obtain permission before touching a Participant or providing physical assistance for ADLs.
- Remember to praise the Participant for all attempts / efforts of self care.
- Remember to report to your supervisor any physical markings / injuries that you see or discover.
- Keep your supervisor and the Participants’ QMRP informed of areas where there are skill gaps so appropriate programming / learning opportunities can be put in place.