

Ensuring personal and household hygiene and safety

2.- TOOLS FOR QUALIFIED WORK IN THE HOME CARE



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<http://www.emiliaromagnasociale.it> - click on elderly (anziani).

Ensuring personal and household hygiene and safety

Hygienic standards for the bedroom and bathroom

Tidy up according to the person's needs and habits

Every individual has a personal life experience, **habits** (abitudini) that over the years often become actual rites: a way of washing the dishes that follows a certain order of progression, a way of arranging clean laundry in drawers and so on. When an elderly person is not confined to bed (**bedridden**) (allettata), it is better to avoid sudden changes in routine, thus preventing conflicts from arising, and also helping the person maintain his/her sense of temporal-spatial **orientation** (orientamento). If you feel that changes are needed in habits that are part of the person's routine, they should be made gradually, attempting to gain the patient's co-operation.

Use of gloves and protective hospital coat

When assisting the person involves any bodily contact, you should always wear **gloves** (guanti) to protect your hands. The gloves serve as dual protection: for you and for the person you are caring for. In fact, the skin is a very efficient vehicle for the transmission of micro-organisms and, for the elderly, the latter can easily become the cause of disease (pathogens). Wearing a hospital coat is recommended whenever contact with **infected** (infetti) body fluids is possible even on other parts of body - for example when bathing the person in the tub or the shower.

Airing out the rooms when the elderly person is not in the home or is well protected against drafts

Sunlight and ventilation in the rooms are important to rid the domestic environment of micro-organisms. In fact, moisture, dust and dirt make up a good culture medium for the growth of **bacteria** (batteri). Frequent ventilation of the rooms will lower the humidity level indoors. Sunlight makes it easier to identify any dirty areas in the home that are not visible with electrical lighting. However, you should ensure that the elderly person is not exposed to **drafts** (corrente) when airing out rooms, especially after bathing or if he/she is sweaty, and also that harmful **insects** (insetti) or even animals such as mosquitoes, horseflies and cats, etc. do not enter.

Domestic pollution:

principal sources, consequences affecting health

Domestic environments are furnished with conveniences, but the latter represent possible causes of accidents. We have already mentioned the importance of air re-circulation; however, the substances found in homes also require careful attention. For example, detergents should be kept in places that are hard to reach to avoid any possible confusion with beverages or foods. Drugs are also possible hazards, for they can be taken by mistake at the wrong dosage or at times differing from the prescribed intervals. This is the reason why the amounts of the substances in the containers need to be constantly monitored and that all inedible substances should be kept out of reach.

Prevention of electrical hazards (rischi)

A domestic electrical system can represent a hazard and even cause fatal accidents if it is not utilised properly. Never approach electrical appliances or outlets when holding anything containing liquids, especially water. Also, never overload the system by using several electrical appliances at the same time - for example, the vacuum cleaner + the washing machine - to prevent the circuit breaker from tripping and stopping the current until it is reconnected using the specific **switch** (interruttore).

Prevention of gas hazards

Gas is another source of energy, which, however, can cause fatal accidents. It is very important to check that oven and hob knobs are in the off position when the flame is out. It is also best to close the central gas cock supplying gas to the appliances. Do not ever turn on any electrical switches if you smell a gas odour in the house - but open the windows immediately and accompany any persons present out of the house. Notify the Gas Company if there is any odour of gas in the vicinity of the building.

Preventing falls (cadute): ***practical advice***

Avoid using **wax** (cera) or disinfectant solutions that make the flooring slippery and make sure that the elderly person does not walk on floors that are still wet or moist.



- Floor mats in the kitchen and bath mats must have **non-slip** (antiscivolo) netting on the bottom side in contact with the floor. In any case, mats should be avoided if the elderly person suffers from poor vision, but is still self-sufficient in moving about the home.
- Instead of slippers, the person you are caring for should use anti-slip footwear permitting a secure grip and position of the feet when walking, even at home.
- If the elderly begins to have problems walking or is **unsteady** (problemi di equilibrio) on his feet, contact the physician to consider the use of suitable aids and equipment (ausili): a cane, a tripod cane, walker, etc. Using chairs for support when walking increases the risk of falls.

Ensuring personal hygiene and safety

Daily hygiene

- Morning: washing up before breakfast “wakes up” the organism and preserves the person’s dignity. Even if the elderly person is bedridden, personal hygiene is required before serving breakfast.
- Evening: washing up is also necessary before going to bed - it helps to prepare the person physically for restful sleep.

Care of the skin (face - body - hair) **and mucosa** (oral, nasal, vaginal, etc.)

- The elderly person’s body must be kept clean, eliminating any unpleasant odours.
- Prevent **bedsores** (lesioni da decubito) and **infections** (infezioni) by observing the skin and any alterations each time the person bathes. In fact, proper hygiene and the use of moisturising lotions keep the skin clean and supple, which decreases the risk of bedsores. In any case, if the patient’s skin is patchy, or **blistered** (vescicole), shows **redness** (arrossamenti) or colours not observed previously, the patient’s primary physician should be notified before attempting to apply any product to the affected area.
- Well-being and tonic effect for body and mind. An elderly person does not stop being an individual. Therefore, even when he is no longer able to do things on his own initiative or take care of his own personal hygiene, he should be encouraged and helped to feel clean and well groomed, just as we all like to feel about ourselves. In all cases, personal preferences should be respected - for example for a particular type of soap, facial cream or a deodorant.

Bath/shower

Frequency (2/week) and in any case, according to the wishes of the individual. The choice of a bath or shower should be based on the facilities available in the home and the elderly individual’s degree of self-sufficiency. Persons with vision

1 A **bedsore** (lesione da decubito) is an ulceration of the skin appearing in persons confined to bed, due to prolonged pressure on the same area (e.g. sacral region, glutei, heels). A red sore can deteriorate into an actual ulcer (a deep lesion that does not easily heal).



problems and who are self-sufficient or partially dependent in **moving about** (deambulazione) will require your assistance to get into the bathtub or shower, to prevent falls and also to wash parts of the body that are hard to reach such as the back, feet and head. When washing the elderly person, start from the cleanest parts of the body: head, face, upper limbs, trunk (chest and back), genital area, that is, **private parts** (parti intime), and then the lower limbs. If the individual does not have a preference, the use of neutral liquid soap is advisable. Then the person should dry himself off thoroughly, especially skin areas where two parts of the body come into contact: **underarm area** (cavo ascellare), folds in the abdominal area, **groin** (inguine), inner thigh, between the toes. A hair dryer can also be used at a low temperature to dry the skin, as well as hair.

After drying, the individual can be dressed with clean underwear and clothes. Before dressing the person, use some moisturising cream or almond oil to keep the skin supple and to prevent skin sores. At this point, the bathroom should be thoroughly dried and ventilated to avoid slipping and moisture from collecting. The use of a special **lift device** (sollevarpersone) equipped with a sling also makes it possible to bathe or shower persons who are totally dependent - the sling needs to be washed and dried afterwards. Home-care service staff will explain how to use this aid.

It is very important to remember that during personal hygiene tasks, and particularly when bathing or showering the individual, you are becoming a part of the person's private sphere. Almost all elderly persons have a profound sense of **modesty** (pudore) and thus it is not a good idea to joke or have too casual an attitude when assisting them with these tasks. Respect for a person's body translates into respect for that person.

- When assisting a person in bathing or showering, always wear disposable gloves and a waterproof hospital coat to prevent any direct contact with body fluids. A sponge or a horsehair glove is useful for more vigorous, but non-aggressive cleansing and to create a pleasing massage (massaggio) sensation, which many elderly persons seem to appreciate. However, after bathing, the sponge has to be rinsed thoroughly and dried immediately because otherwise it will



become a breeding-ground, and thus a medium, for the growth of **fungi** (funghi) and bacteria, affecting both the caregiver and the patient.

- An anti-slip mat should be placed on the floor of the shower or tub because the simultaneous presence of soap and water increases the risk of falls. As explained previously for the sponges, these mats must also be washed and dried.

Personal hygiene for the bedridden person

In spite of the aids that are available, some persons are unable to use the bathtub or shower and cannot be lifted into an armchair or wheelchair. In such cases, all grooming procedures have to be performed with the person in bed, which means bathing as well. Bathing frequently is even more important and necessary for these persons because the **rubbing** (sfregamento) of the skin against the bed sheets, the presence of material from chafed skin (flakes and scales), perspiration and the rubbing of body parts against each other, all increase the risk of bedsores. To perform a bedbath, the mattress should be protected with an **rubberised** (tela cerata) sheet so that the mattress does not get wet. The same order described previously for washing body parts should be followed, but a pitcher of water is needed. The water must be changed frequently to avoid leaving soap residue on the skin. In this case as well, ensure that the skin has been dried thoroughly and then moisturise it with creams or almond oil.

Washing private parts

To be performed 2 times a day and in any case, whenever needed owing to **evacuation** (evacuazioni) or discharge of body fluids. A person who is self-sufficient or partially dependent must be encouraged and supervised when performing the movements he/she is capable of carrying out. A person who is bedridden or who uses a wheelchair requires someone else to wash their private parts and other parts of the body. To wash private parts with the person in bed, you need: disposable gloves, a **bedpan** (padella), a pitcher, cleansing lotion and a towel. After putting on the disposable gloves, position the bedpan, pour a little water over the area and lather, working in an anteroposterior direction (from front to back). Then rinse



thoroughly to prevent any soap residue from remaining. When finished, pat dry with a towel to prevent redness or sores from forming. Before replacing the incontinence pad, **moisturising** (idratare) the skin well with moisturising cream or oil is very important. When washing a woman's private parts, the **labia maiora** (major lips) (grandi labbra) should be spread apart to be cleansed and washed in a direction moving from top to bottom. When washing a man, the **foreskin** (prepuzio) should be lowered from the glans for cleansing and then repositioned on the glans to prevent redness and swelling.

Oral hygiene

Necessary 2 times a day, once in the morning and once in the evening, and whenever there is any irritation of the oral **mucous membrane** (mucosa orale) or food particles are present.

- Gloves, a toothbrush, toothpaste and a mouthwash are needed for oral hygiene.
- Denture care (**dental prosthesis**) (dentiera): whether a person has full dentures or a partial denture, the denture/s must be removed for thorough cleaning with a toothbrush. The dentures must be put back in their container in the evening and rinsed in the morning before putting them back in the mouth. Procedure: Wear disposable gloves and ensure that the patient is calm. Introducing either your index or middle finger into the mouth until they touch the palate, while also using your thumb on the front part of the upper teeth, remove the upper denture. The lower denture is removed using your thumb and index finger on the outer part of the denture.
- The mouth should be rinsed with a **mouthwash** (collutorio). If there is a risk of the person swallowing or inhaling it, use **gauze** (garze) dipped in mouthwash for mouth care. Wrap the gauze around your index finger and after dipping it in the mouthwash, gently rub it over the palate, over and under the tongue and along the walls of the mouth. Change the gauze for each part of the mouth and until the gauze remains clean.



Eye care

The eyes must also be cleaned on a regular basis each morning and whenever **secretion** (secrezioni) is present.

- Necessary material: disposable gloves, water, possibly a solution of boric acid and water, gauze or clean cotton wads. Never use the same wad of cotton to clean both eyes. If you observe an increase in secretion, redness or any changes in normal conditions, the physician should be notified before taking action of any sort.

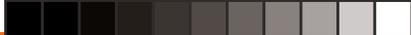
Cleaning materials and equipment

All cloths, towels and sheets that have come into contact with the person you are caring for must be washed frequently, or in any case, whenever they have been soiled with body fluids (blood, faeces, urine...). Clean laundry should be put back in closets or drawers in an orderly manner, and kept separate - in other words, the bed linens separated from the towels, underwear separated from sweaters and so forth.

After use, water pitchers, urinals (portable urinals for men who are bedridden), bedpans and basins must be washed with **Javelle water** (disinfectant) (varechina), to be diluted depending upon the concentration of the product. If these containers present incrustation, remove the encrusted material before washing them. When changing the incontinence pad or the drawsheet, or all the bed linens, be extra careful not to leave any wrinkles in contact with the person. Good personal hygiene, thorough moisturising of the skin and care with bed linens markedly reduce the occurrence of bedsores. Always wash your hands before and after using disposable gloves!

Personal hygiene and care, including good grooming, are basic needs that reinforce a sense of **self-esteem** (autostima) and confidence, and foster a feeling of well-being in the individual.





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