

A Toolkit for Residential Aged care Facilities

Who is this Toolkit for?

Answer the following questions for each resident at your facility:

- Is the resident reluctant to participate in personal care?
- Has the resident's ability to carry out personal care changed recently?
- Is the resident undressing in inappropriate places?
- Does the resident become agitated or aggressive when dressing or undressing?



If you answered 'Yes' to any of the above questions, the flowcharts and checklists included below may be helpful in identifying simple ways in which a resident can be best assisted in their processes of personal care, particularly dressing and undressing.

If the resident is taking their clothes off inappropriately, it is important to check for these potential underlying causes:

Potential Underlying Cause:

Action Step if 'Yes':

Could the resident have a urinary tract infection or prostate problem causing urinary urgency?



Refer to GP

Could the resident have an infection, wound or skin irritation that might be causing discomfort?



Check skin integrity and refer to GP if required

Could the resident be feeling uncomfortable from incontinence?



Check pad integrity, quality and change frequency

Potential Underlying Cause:

Could the environment be too hot, cold, loud, bright or distracting?



Action Step if 'Yes':

Set up the environment so that it is familiar, warm, private, suitably lit and quiet

Could the resident be failing to be given timely opportunities to toilet?



Ensure the resident is regularly toileted after meals, and offer toilet breaks in between.
Ensure that bathroom/ toilet areas are well sign posted

Could the resident's underwear be uncomfortable or ill fitting, or could the fabric of the resident's clothing be itchy or irritating?



Check for fit and check tags and fabric for scratchiness. Replace if required.

If the resident is reluctant to change clothes, it is important to check for these potential underlying causes:

Potential Underlying Cause:

Could the resident be feeling vulnerable or threatened when undressing, due to being modest, or previous abuse?



Action Step if 'Yes':

Use a modesty cape in the bathroom so that the resident is covered

Could the resident be suffering from depression or other mental illness?



Refer to GP and/or Psychologist and/or Psychiatrist

Could the resident be experiencing issues with their balance, mobility or fine motor skills due to other conditions such as arthritis, stroke or Parkinson's disease?



Refer to GP and or Physiotherapist

Could joint aches or pains be being aggravated during dressing?



Refer to Physiotherapist

Could impairments in sight or hearing be affecting task comprehension?



Refer to Ophthalmologist and/or Audiologist

Other questions to ask:

Does the resident have a developmental disorder such as Autistic Spectrum disorder or Downs Syndrome, which increases sensitivity to touch?



Encourage the resident to dress themselves, and avoid rushing them

Could the resident have a social history, such as being a nun or priest, or not previously being in a relationship, that decreases familiarity with nudity?



Use a modesty cape in the bathroom so that the resident is covered

Could the resident have a social history, such as being a nudist, which increases familiarity to nudity?



Offer times and private places where the resident can express themselves discreetly, with corresponding privacy signs for staff and visitors. Have visual cues to remind the resident within their room to redress before entering communal places.

Could there be language or dialect differences that are creating understanding difficulties?



Increase use of graphic signs and physical actions

Does the resident respond to personal care tasks differently depending on the carer involved?



If a certain carer is more successful with a particular resident, observe their approach where possible, and consider gender and ethnicity

Is the resident a Holocaust survivor, or has the resident experienced war or been a prisoner of war?

If all underlying causes have been addressed, or if no underlying causes were identified, trial the strategies listed below to assist the resident with personal care:

Control the Environment:

- Set up the environment so that it is familiar, warm, private, suitably lit and quiet
- Set the clothing out in a pile in the order that the items need to be put on, ie with undergarments at the top
- Lay the clothing out on a bed with a contrasting colour bedspread to promote visibility
- Label drawers with words or pictures to indicate what is in each drawer
- Promote flow of movement, and decrease freezing, by using a metronome or preferred music

- Place signs in appropriate places to assist, eg 'Change your clothes after your shower'. Use words and/or pictures
- Use a large clock that clearly shows the time of day or night, and point it out to assist with a prompt, eg 'Look Bob, it's night time, time to change into your pyjamas'
- Allow natural light and dark to enter the room where possible
- If a certain carer is more successful with a particular resident, observe their approach where possible, and consider gender and ethnicity

Clarify the Task:

- Be consistent with the time that the resident dresses each day
- Prior to the personal care tasks, ensure you clearly introduce yourself and explain in simple terms the tasks to be completed. Smile.
- Break the task into steps, focusing on one task at a time
- Remove unsuitable or used clothing from view, and try setting out 2 options so that the resident feels empowered to make a suitable choice without becoming overwhelmed
- Encourage the resident to dress themselves, and avoid rushing them
- Ensure dirty clothes are removed from access
- Use positive statements and compliments, eg 'Oh you look so lovely in that dress Beth', 'It must feel lovely to have new clean clothes on Max'

Select Suitable Clothing:

- Use a modesty cape in the bathroom so that the resident is covered
- Ensure that fixings on clothing and shoes are easy to operate with poor fine motor skills, such as Velcro, zips or elastic.
- Ensure shoes are rubber soled and non-slip
- If the resident tends to add clothing layers after dressing, move surplus clothing to another room, or disguise parts of the wardrobe to blend in with the walls
- If the resident is attached to a particular item of clothing, try to purchase multiple versions of the same item to swap in.
- An all in one jumpsuit can be used if all other techniques have been tried, however useage much be accompanied by a regular toileting schedule. All in one suit use is considered a form of restraint, so normal restraint procedures apply.

This Toolkit was produced by Agestrong Physio, an organization that specializes in providing allied health services to Residential Aged Care facilities. We are experts in the use and training of the Teepa Snow 'Positive Approach to Care' methodology for Dementia care.

For more information, or for a confidential discussion about our services, contact admin@agestrongphysio.com.au, or call Sheryl on 1300 851 639

References:

*Effective Dressing in Dementia Care – Dementia Behaviour Management Advisory Services WA (An Australian Government Initiative)
Dementia Care Mapping: Principles and Practice – Dawn Brooker and Claire Surr
The Art of Caregiving – Teepa Snow