



PARTICIPANT HANDBOOK



Hospitality

Language:
English

Home Health Aide

Home Health Aide



Introduction

Healthcare sector

The Healthcare industry is an accumulation and integration of various sectors within an economic system, which provides goods and services for treatment of patients with curative, preventive, rehabilitative and palliative care. There are various divisions present in the modern healthcare sector, which is dependent upon trained professional and paraprofessionals. The healthcare industry today is demanding industry in the world. It consumes over 10% of the GDP of most developed countries. As per United Nations International Standard Industrial Classification, modern health care is defined within the segments of Hospital activities, Medical and Dental practices and other human health practices. The paramedical healthcare activities are understood in terms of works conducted under the supervision of nurses, midwives, physiotherapists or diagnostic laboratories, pathology clinics etc.

Healthcare sector in India

The Healthcare sector is one of the most rapidly growing sectors in India, both in terms of earning revenue and employment generation. Here, the healthcare industry is perceived within the areas of hospitals, medical devices, clinical trials, outsourcing, telemedicine and the likes. The increasing growth in the industry owes its advancement to the strengthening of its coverage, services and huge number of trained professionals. One of the most important aspects of Modern Healthcare is the evolution of the Home Health Aide. A Home Health Aide provides housekeeping and laundry services: shopping for food and other household requirements: preparing and serving meals and snacks. An HHA also provides personal services to bed-ridden patients such as bathing, dressing and grooming. Thus, an HHA provides the following services:

1. Preparation of meals in accordance with the modified diets or complex modified diets.
2. Administration of medications.
3. Provision of special skin care.
4. Use of medical equipment, supplies and devices.
5. Change of dressing to stable surface wounds.
6. Performing simple measurements and tests to routinely monitor the patient's medical condition.
7. Performing maintenance exercise program.
8. Care of an ostomy after the ostomy has achieved its normal function.

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CHAPTER 1

ASSISTING PATIENT IN BATHING

LEARNING OUTCOMES:



- Complete Bed bath
- Partial bath
- Bathing the injured patient
- Tub bath

PRE-SESSION ACTIVITY:

Geriatric care and child care has many similarities. So along these lines, a trainer at the pre session may ask the trainees, —Have you ever seen an infant getting a bath? How careful one needs to be while giving a bath to infant?

Geriatric care and child care has many similarities. So along these lines, a trainer at the pre session may ask the trainees, -Have you ever seen an infant getting a bath? How careful one needs to be while giving a bath to infant?

Bathing is an important part of personal hygiene. It cleans the skin and makes the patient feel more comfortable. Bathing stimulates blood circulation and relaxes the patient. Apart from other forms of bath, Tub baths are also given to the patients and anHHA needs to be careful while giving a bath especially to the infant.



The HHA has to be very particular about the hygiene of the patient/s. It includes helping the patient wash; help them maintain their oral hygiene and elimination. These tasks are not complicated, but they are very important. Good personal hygiene helps the patient maintain a sense of dignity and independence. Assisting the patient with personal hygiene or doing these tasks for them also provides a sense of assurance to the patient that their needs are being met.

1.1 Draping and undraping a patient

The HHA has to be very particular about the hygiene of the patient/s. It includes helping the patient wash; help them maintain their oral hygiene and elimination. These tasks are not complicated, but they are very important. Good personal hygiene helps the patient maintain a sense of dignity and independence. Assisting the patient with personal hygiene or doing these tasks for them also provides a sense of assurance to the patient that their needs are being met

Draping is a procedure which involves covering a patient and surrounding areas with a sterile barrier to create and maintain a sterile field before examining a patient. The purpose of draping is to avoid the spread of microorganism.

1.1.1 Undraping the patient before bath.

An HHA performs the following steps while undraping a patient:

- Inform the patient
- Wear your Personal Protective Equipment
- Ask the patient to sit up.
- Provide support to the patient if he/she is unable to sit up on his/her won.
- Gently remove the clothes off his/her body.

1.1.2 Draping a patient after bath.

An HHA performs the following steps while draping the patient after bath:

- Inform the patient.
- Ensure that the patient's body is completely dry after bath.
- Take a sterile cloth and wrap the patient gently.

1.2 Performing back rub on the patient

Back massage is usually given in conjunction with the activities of bathing the patient. It can also be on other occasions when a patient seems to have a risk of developing skin irritation due to bed rest. The goal when performing this procedure is to enhance relaxation, reduce muscle tension and stimulate circulation.

However, performing a back rub is contraindicated in patients with vertebral fractures, rib fractures, burns, open wounds, bleeding, or heart attack.

Back rub ensures that the patient:

- Feels relaxed and refreshed, as evidenced by verbal or non-verbal response.
- His/her blood supply to the muscles and skin of the back is promoted, as evidenced by a change in skin color and warmth.
- Feels more comfortable, as evidenced by non-verbal and verbal response.

1.2.1 Steps in performing a back rub.

An HHA should perform the following steps while providing a back rub to the patient:

- Explain the procedure to the patient
- Perform proper hand washing to avoid spread of microorganisms.
- Provide privacy by closing doors and curtains.

- Assist the patient to the prone position or side-lying position with the back exposed from the shoulders to the sacral area
- Use the bath blanket to drape the patient. Raise the bed to the high position (use cushions if the bed is not foldable) and lower the side rail closest to you.
- Warm the lubricant or lotion in the palm of your hand or place the container in warm water.
- Using light gliding strokes, apply lotion to patient's shoulders, back, and sacral area.
- Place your hands beside each other at the base of the patient's spine and stroke upward to the shoulders and back downward to the buttocks in slow, continuous strokes. Continue for several minutes.
- Knead the patient's skin by gently alternating grasping and compression motions.
- Complete the massage with additional long stroking movements
- During massaging, observe the patient's skin for reddened or open areas. Pay special attention to the skin over bony prominences.
- Perform hand washing.
- Assess the patient's response and note it down.

1.3 Giving shower, complete bed bath, partial bed bath or tub bath to patient

Bathing is an important part of a patient's daily care. Not only does it remove sweat, oil, and microorganisms from the patient's skin, but it also stimulates circulation and promotes a feeling of self-worth by improving the patient's appearance. For patients who are on bed rest, bathing can also be a time for socialization.

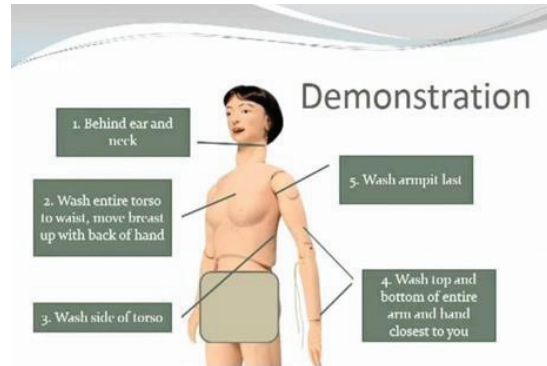
Beside its therapeutic benefits, bathing is also an opportune time to communicate with the patient and to perform a head-to-toe skin assessment.

1.3.1 Procedure of giving bath in the Bathroom:

- Keep the bathroom warm.
- Check if the patient requires going to the toilet before bathing.
- Assess the level of assistance the patient requires. Some patients may need help only while undressing, or washing their back and feet (these areas may be too difficult for them to reach)
- If the patient is using the bathtub, run cold water into the bathtub first to prevent the base of the tub from becoming uncomfortably hot. This would also help reduce the amount of steam in the bathroom.
- The water should be warm and comfortable. Check if the patient is comfortable with the water temperature.
- If the patient is using the shower, provide him/her with a shower chair; if they have mobility disorders. The shower chair lends safety and also ensures that the patient does not feel fatigued due to exhaustion.
- For patients with no mobility disorders, ensure that the toiletries are kept at the lowest rack and within their reach.
- Advise the patient to avoid locking the door from within to ensure safety. You may leave him/her in the bathroom, but stay within call, so that in case of any emergency you are there to help.

1.3.1 Partial bed bath

Sometimes a complete bath is too tiring for a patient. So, a partial bath may be provided to include the face, hands, axilla (region under the arms), genitalia, back, and buttocks. The patient's position during the bath is determined by their physical conditions and their movement abilities. Unless contraindicated (undesirable or prohibited), the bed is leveled and movement and position change of the patient is encouraged.



While washing individual areas, the skin should be checked thoroughly for any malfunction. During washing, range of motion should be done.

When supporting binders and/or leg bandages are there, the specialist finds out in advance if they can be removed for skin cleansing, and if they are to be re-applied. The patient receiving a bed bath will often have tubing attachments that must be handled in the right way so that they continue to function as the patient moves. All tubing must be carefully checked before and immediately after position changes. Avoid unnecessarily exposing the patient to prevent them catching cold. Provide for privacy with the compartment curtain or screen.

Change bath water when it becomes cold, dirty, or excessively soapy. Do not place soap in bath water. Expose only those body parts that are being washed or bathed. Wear gloves if danger of contact with body fluids exists. Maintain a neat and clean workarea.

Procedure for partial bath:

Check for the required personal toilet articles and clean linen available. Clear the top of the bedside cabinet and place the cabinet and chair strategically for optimum workspace. Adjust the room temperature and provide privacy.



2. Prepare supplies and equipment. The following materials should be assembled:

- (a) Washbasin and water (within 110 -115°F).
- (b) Ensure hygiene the articles, such as soap, lotion, powder, and deodorant.
- (c) Pajamas or gown.
- (d) Linen as necessary.
- (e) Portable screen as necessary.
- (f) Laundry bag or hamper.
- (g) Soap and soapdish.
- (h) Bath towels (2 pieces).
- (i) Washcloths (2 pieces).
- (j) Nail file and comb.
- (k) Disposable gloves.

3. Wash your hands.

4. Place bath equipment on the tool trolley. Place clean linen on the chair in order of use.

5. Loosen top covers at the foot of the bed. Then fold and remove bed spread and blanket. Leave the top sheet to cover.

6. Lower the side rail, position patient on the outer side of bed considering the safety aspect, and raise the bed to a working level. Use cushions if the bed is not foldable.

7. Loosen top linens from the foot of the bed; place bath blankets over the top linens. Ask patient to hold bath blankets while you remove top linens. If the patient is unable, you will have to hold bath blanket in place while removing linens.

8. Remove the pillow and raise the head of the bed to semi-Fowler's position if patient can tolerate it. Place it at the backside of the chair (hang the pillow case to receive soiled linen, if laundry hamper is unavailable). Do not let soiled laundry to touch your attire.

9. Assist the patient with oral hygiene.

10. Remove the patient's gown/pajamas, all undergarments, and jewelry.

1.3.2 Bathing for the injured patient:

If a certain patient has an injured arm or shoulder, start removing the coat from the uninjured side. When only limited movement is permitted, the pajama coat is worn back to front, and left unfastened.

To remove the coat, unbutton and tuck the excess material under the back toward the far shoulder. Raise the far shoulder, remove the sleeve, and tuck the coat

under the near shoulder. Raise the near shoulder and pull the coat through, removing it from the near arm. To remove the pants, loosen the waist tie, unhook, and pull the pants below the hips while keeping the patient covered with the sheet. Grasping the waist, ease the pants off over the feet.

- 1. Wash the patient's eyes and face
- 2. Wash the upper limb
- 3. Wash the chest and abdomen
- 4. Wash the lower limb
- 5. Wash the back and buttocks
- 6. Wash the genitalia area



7. Patients should be helped while cleaning genital area, if the patient has an indwelling catheter, the entire procedure of genital cleaning should be done for him.
8. Make the patient wear their pajamas and upper body clothing
9. Comb patient's hair
10. Remove the bath equipment to the utility room; clean and store it.
11. Remake the bed.

1.3.3 Complete Bed Bath:

There are patients who are unable to leave their beds to bathe. For such patients, daily bed bath can help with healthy skin, control odor and increased comfort. Patients with problem of pain should be initially provided with pain relief medication, and once the medicine starts acting, patient should be given bath.

Items required for Bed Bath:



- Soap (regular or non - rinsing soap)



- Two washcloths or sponges



- Dry towel



- Lotion



- Shaving supplies, if planning to shave the patient



- Comb or other hair care products



- Essential toiletries (e.g., talcum powder, mouth gargle, nailclipper)



- Wash towels for cleansing the body



- Moist cotton wool for washing the genital area



- Toiletpaper



- Bathtowel



- Facetowel



- Bed linen asrequired



- Cleanclothes



Procedure of giving Bed Bath:

- Make sure that the fan or air-conditioner is switched-off so that the person does not catch cold.
- Offer a urinal or bedpan, if required, before bed bathing to minimize disruption during the process.
- Prepare all the items required and bring them to the bedside so that they are within reach.
- Be comforting. Procedure should not be conducted in a rush.
- The temperature of the bathing water should be comfortable for the patient.
- Allow the person to participate as much as their condition allows.
- Expose only the areas that are to be cleansed in order to preserve the patient's modesty. For example, cover top half of body while washing legs.
- To make the patient feel comfortable, talk to the person throughout the procedure.
- Begin by washing and drying the face, the neck and ears, following the chest and arms and continue with the lower part of the chest, abdomen and sides of the body, followed by the umbilicus and lower limbs.
- The patient is then turned on their back and thoroughly washed and dried.
- Change water as often as necessary.
- Tidy the bed at the same time when the person is turned on their side for you to clean their back. Remake the bed with clean linen, if necessary.
- Wash the groins and genitalia region with moist cotton wool. If the person is well enough, they should do this unaided.
- Always dry the bathed areas immediately. Pay special attention to the skin folds, particularly those beneath the breasts, in the groin, between the buttocks and between the toes.
- Be sure to pat the whole body of the person dry, and remember that rubbing can be harsh for sensitive skin.
- Take this opportunity to assess the skin condition. Take note of any redness or broken skin.
- Massage areas with firm circular movements to promote better blood circulation.
- Apply skin lotion to keep skin soft and supple. Excessive use of talcum powder should be avoided as it can cause the skin to be dry and itchy. This may also lead to skin infection.



1.3.5 Tub Bath

A patient, who is not confined to bed and is not helpless, is recommended to have a tub bath in some cases. Any assistance in getting in and out of bed, getting in and out of the tub, and/or reaching areas of the body while bathing will be rendered by the Home Health Aide.

- Safety measures should be provided in order to prevent slipping, tripping or falling.
- There should be maintenance of privacy.
- Encourage the patient to perform self-bath on his/her own.



Procedure for tub bath:

Every activity and proceedings are required to be conducted according to consultation made by a registered nurse or should be checked as per physician's order.

It is important that the tub or the appliances are cleaned properly before and after use. Non-skid mat on the bath tub should be placed prior to the procedure of bathing.

Gathering the following important items necessary for bathing:

- Towel
- Washcloth
- Soap
- Deodorant
- Lotion
- Cleangown



1. The patients are required to be assisted during their bath time in the tub. The patients should be assisted on how to use the call signals.
2. If the tub is used, fill with warm water at 109°F (43°C). Have the patient test the temperature of water and adjust if needed. Instruct patient on how to use the faucet. If the shower is used, turn water on and adjust the temperature.
3. The patients are required to be assisted during their bath time in the tub. The patients should be assisted on how to use the call signals.
4. If the tub is used, fill with warm water at 109°F (43°C). Have the patient test the temperature of water and adjust if needed. Instruct patient on how to use the faucet. If the shower is used, turn water on and adjust the temperature.
5. Caution patient to use safety bars. Discourage the use of bath oil in the water. Check on patient every 5 minutes. Do not allow the patient to remain in the tub more than 20 minutes.
6. Return to room when patient signals. Knock before entering.
7. Assist patient out of the tub and with the process of drying. If the patient complains of weakness, vertigo, or syncope, drain the water from tub before the patient gets out and place a towel over the patient's shoulder.
8. Assist the patient into cleaning the gown, robe, and putting slippers. Accompany to their room and position for their best comfort either on chair or bed.
9. Make bed if the patient can tolerate sitting in a chair. Perform back, hair, nail, and skin care.
10. Return to shower or tub. Place all soiled linens in a laundry bag and return all articles to the patient's bedside.
11. Wash hands.

1.4 Ensuring that all processes are carried out properly.

A Home Health Aide has to take care of a lot of things within the household. Efficiency of the Home Health Aide, therefore, becomes a key factor in ensuring that a certain patient receives high-quality care and assistance. It is the responsibility of the Home Health Aide to ensure that all the processes and procedures are conducted in a systemic and proper manner. The Home Health Aide has to provide special attention to the following things:

- Discuss the procedures you are going to follow with the patient and to his/her family member/s
- Cleaning is to be done from the cleanest area to the less clean area.
- Use soap which is less alkaline.
- Remove unnecessary items from the work area.
- Monitor verbal and non-verbal reactions of the patient.
- Keep all necessary items which are required for the procedure on the table beside the bed.
- Provide bedpans or urinals if necessary.

The Home Health Aide has to perform the above mentioned duties and responsibilities to ensure safety and security to the patient.

1.5 Observe and report abnormal changes during bathing.

While washing, a patient may experience physiological changes. The Home Health Aide has to observe, analyze and report those changes. The physiological changes include:

- Check if there is a change in lip color of the patient.
- Check for rashes or bruises
- Observe the temperature of the patient while washing
- Ask the patient if he/she is feeling pain anywhere in his/her body.
- Check and give first aid if bleeding occurs.
- Make a report of the changes.
- Call the doctor in case of an emergency.

DEBRIEFING

- Bathing is beneficial for both the mind and body
- Types of bathing practiced for old people or patients are partly assisted Self wash, Bathing in bathroom, Bathing bed bound adult patient
- The major types of baths are:
 - ✓ Bed bath
 - ✓ Self-Wash
- Bathing in the bathroom Two reminders:
- Water temperature should be checked before giving baths to the patients
- After bath, skin should be checked for any lesion/rashes.



Test Yourself:

1. Why is bathing necessary?

2. Name all types of bathing techniques for patient?

POST SESSION ACTIVITY

In the practical class, the trainees are asked to identify the tools needed for bathing correctly

CHAPTER 2

GROOMING THE PATIENT

LEARNING OUTCOMES:



- Cleaning and storing dentures
- Oral care in unconscious patients
- Hair cutting and nail cutting
- Finger and toe nail care

PRE-SESSION ACTIVITY:

The trainer displays a chart paper presentation of tools used for hygienic needs. The trainer asks the trainees, —What are the tools and which of you all use on a regular basis and why?

Confidentiality and privacy are basic rights of an individual in our society. Safeguarding those rights, with respect to an individual's personal health information, is the ethical and legal obligation of health care providers. It is a challenge in health care environment. Every nurse understands and respects the patient's need for confidentiality.

2.1 Cleaning and storing dentures.

Dentures are prosthetic devices made to replace missing teeth. They are supported by the surrounding soft and hard tissues of the oral cavity. Conventional dentures can be removed. However, there are many designs, some which depend on bonding or clasping onto teeth or dental implants.

Cleaning and storing dentures is an essential responsibility of the Home Health Aide. The HHA has to perform the following steps while cleaning and storing dentures:

- Remove and wash dentures after eating. Open dentures and run water over it to remove food debris and loose particles.
- Do not bend or damage the plastic while cleaning.
- Help the patient clean his/her tongue, cheeks and palate after taking out the dentures. Use a soft toothbrush for the process.
- Soak dentures overnight. Most types of dentures need to remain moist to keep their shape. Place the dentures in water or a mild denture-soaking solution overnight.
- Rinse dentures before putting them back inside the patient's mouth
- Schedule an appointment with a dentist if any kind of problems with the teeth persists.

What to avoid during denture cleaning and storing:

- Abrasive cleaning materials like stiff-bristled brushes, strong cleansers and harsh toothpaste, as these are too abrasive and can damage the patient's dentures.
- Whitening toothpastes are abrasive and should be strictly avoided on dentures.

- Products containing bleach can weaken dentures and change their color. Avoid soaking dentures with metal attachments in solutions that contain chlorine because it can corrode the metal.
- Avoid hot or boiling water that could warp the dentures.

2.2 Performing oral care in unconscious patients.

An unconscious patient requires frequent oral hygiene to prevent oral health problem. These patients usually breathe through their mouth and are unable to take in anything by mouth and sordes might easily accumulate on the lips, teeth, and tongue causing additional health problems.

Equipment needed to perform mouth care:

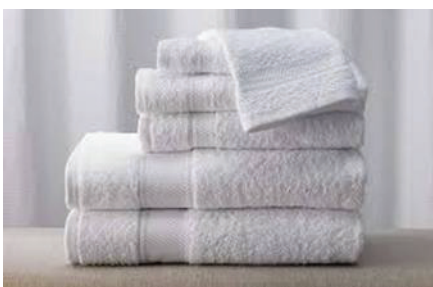
- An electric or manual toothbrush, or foambrush



- Toothpaste, dental sticks, and floss



- An apron or towel to protect clothing



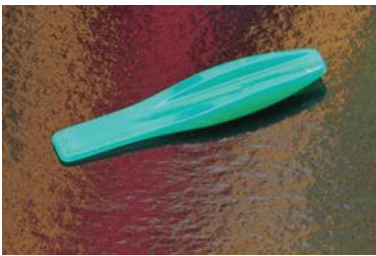
- A cup of water for rinsing



- Water-based lip balm or moisturize



- A padded tongue blade



- Small bulb syringe



Steps to perform mouth care in unconscious patients:

- Assemble equipment.
- Place client in side-lying posture.
- Place a towel or waterproof pad under the patient's chin.
- Place an emesis basin against the patient's mouth or have a suction catheter positioned to remove secretions from the mouth.
- Use a padded tongue blade to open teeth gently. Leave in place between the back molars. Do not put your fingers in an unconscious patient's mouth.
- Brush teeth and gums using toothbrush or soft-sponge-ended swab. Cleanse oral cavity using a toothette.
- Use a small bulb syringe or syringe without needle to wash oral cavity. Use oral suction to remove pooled secretions.
- Apply petroleum jelly to lips to prevent drying or cracking.

2.3 Preparing a patient for hair styling and nail cutting

A patient's hair should be combed daily. Other hair care is also necessary to enhance the patient's morale, stimulate circulation of the scalp and prevent tangled, matted hair. Hair care is divided as:

i) Daily Care

Encourage the patient to rub their scalp with fingertips to stimulate circulation. Comb hair in a becoming style. To assist a patient to comb matted and tangled hair, first comb the ends and progress toward the scalp. Hold the lock of hair being combed between the scalp and the comb to avoid pulling. Brush the hair as necessary.

ਸਰਕੂਲੇਸ਼ਨ ਜਾਰੀ ਕਰਨ ਦੇ ਲਈ ਮਰੀਜ਼ ਨੂੰ ਪ੍ਰੇਰਿਤ ਕਰੋ ਕਿ ਉਹ ਆਪਣੀਆਂ ਉਂਗਲਾਂ ਦੀ ਟਿਪ ਦੇ ਨਾਲ ਸਕੈਲਪ ਨੂੰ ਰੱਬ ਕਰੇ। ਇੱਕ ਵਧੀਆ ਸਟਾਈਲ ਦੇ ਵਿਚ ਵਾਲਾਂ ਦੀ ਕੰਘੀ ਕਰੋ। ਆਡੇ ਹੋਏ ਵਾਲਾਂ ਦੀ ਕੰਘੀ ਕਰਨ ਦੇ ਲਈ ਮਰੀਜ਼ ਦੀ ਸਹਾਇਤਾ ਕਰੋ ਪਹਿਲੇ ਸਿਰਿਆਂ ਤੇ ਕੰਘੀ ਫੇਰੋ ਅਤੇ ਫਿਰ ਸਕੈਲਪ ਵੱਲ ਅੱਗੇ ਵਧੋ। ਸਕੈਲਪ ਅਤੇ ਕੰਘੀ ਦੇ ਵਿਚ ਮੌਜੂਦ ਵਾਲਾਂ ਨੂੰ ਫੜ ਕੇ ਕੰਘੀ ਫੇਰੋ ਤਾਂ ਜੋ ਵਾਲਾਂ ਦੇ ਵਿਚ ਖਿੱਚ ਨਾ ਪਵੇ। ਲੋੜ ਅਨੁਸਾਰ ਵਾਲਾਂ ਨੂੰ ਬਰੱਸ ਕਰੋ।

ii) Hair Cut

For a haircut, call the nearest barber and set up an appointment. The patient or his family members pays directly to the barber.

ਇੱਕ ਹੇਅਰ ਕਟ ਦੇ ਲਈ ਸਭ ਤੋਂ ਨਜ਼ਦੀਕ ਵਾਲੇ ਨਾਈ ਨੂੰ ਬੁਲਾਓ ਅਤੇ ਇੱਕ ਮੁਲਾਕਾਤ ਸੈੱਟ ਕਰੋ। ਮਰੀਜ਼ ਜਾਂ ਉਸਦੇ ਪਰਿਵਾਰ ਦੇ ਸਦੱਸ ਸਿੱਧੇ ਤੌਰ ਤੇ ਨਾਈ ਦਾ ਭੁਗਤਾਨ ਕਰਦੇ ਹਨ।



iii) Regular shampooing

iii) ਸਮੇਂ ਸਮੇਂ ਤੇ ਸ਼ੈਮਪੂ ਕਰਨਾ

The patient confined to bed will require a cleansing shampoo at least every two weeks. Plan the shampoo for a time when the patient feels rested and has no conflicting treatments or appointments. If the patient can be moved to a stretcher, do so and take him to a convenient washing sink. If this is not possible, do the shampoo in bed.



Equipment required for shampoo procedure:



- o Bucket.

