

ADL

Activities of Daily Living



ADL

- ▶ Daily chores and activities we normally do for ourselves
 - ❖ Eating
 - ❖ Personal hygiene
 - ❖ Toileting
 - ❖ Dressing
 - ❖ Paying bills
 - ❖ Shopping

ADL and Independence

The Nurse Aide is the primary care giver in assisting the client with ADL, which include the fundamentals of personal care

- ▶ Being Independent – able to take care of all of your ADL without assistant
- ▶ Factors that affect independence
 - ▶ Accidents– MVA , falls
 - ▶ Illness – MS, CP, chronic conditions of aging,
Arthritis, Parkinson's disease

Learned helplessness

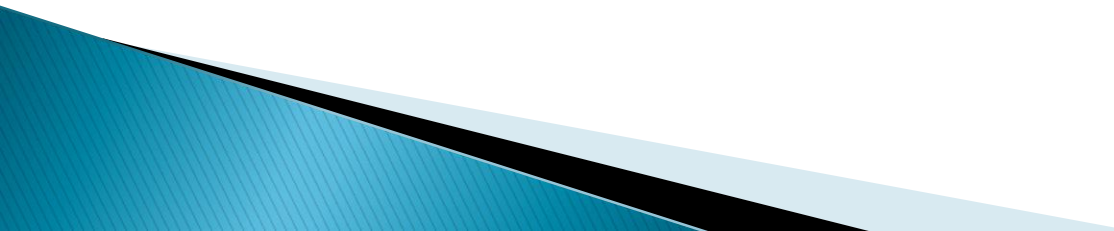
- ▶ Belief that you no longer can have any effect on what happens to you
- ▶ May result from depression, confusion, long term inactivity
- ▶ Resident must be re-motivated to perform ADL

Why Re-Motivation?

Residents must be encouraged and supported to help themselves with regard to ADL in order to:

- ▶ Promote self-esteem
- ▶ Promote physical well-being by increasing circulation, promoting skin integrity, and maintaining muscle strength
- ▶ Maintain the social norm

Measures to Encourage Self-help

- ▶ Provide privacy
 - ▶ Help to establish a routine with personal hygiene
 - ▶ Give praise when resident gives self-care
 - ▶ Provide education on devices as needed
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Ways to help with independence

- ▶ Physical strength and Agility – PT program, walking
- ▶ Patience – give plenty of time and don't hurry
- ▶ Begin with small goals and gradually work up to full tasks
- ▶ Provide praise and be matter of fact, and reinforcement of independence
- ▶ Special training– different way to perform a task
- ▶ Adaptive equipment – enables residents to perform **bodily** functions that they otherwise be unable to do. walker, cane, hearing aid, glasses

Provide assistive devices

- ▶ A device designed to meet the resident's specific needs and to encourage independence

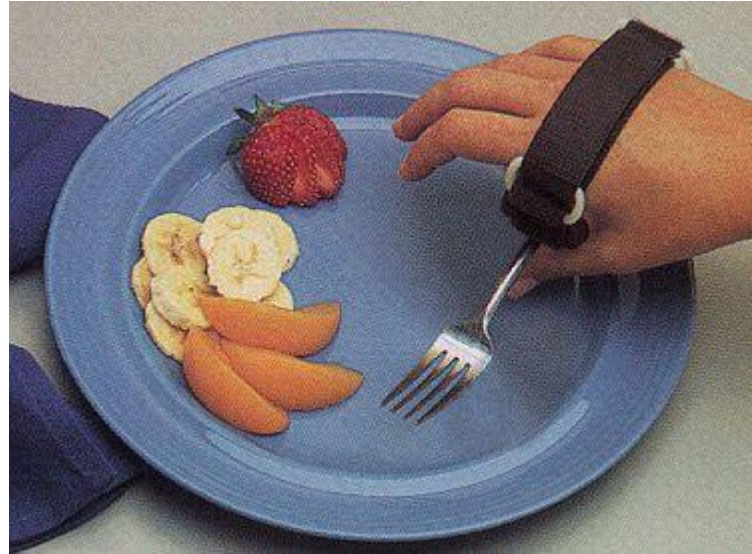
Eating assistive devices– enables resident to feed his/herself

- ▶ Special Cutlery (knives, forks, and spoons used for eating)
- ▶ Special plates and cups– plate guards, easy grip mugs, built up handles, sipper cups

Cutlery devices– big, ridged handles



Cutlery – clip on device for those who can't grip



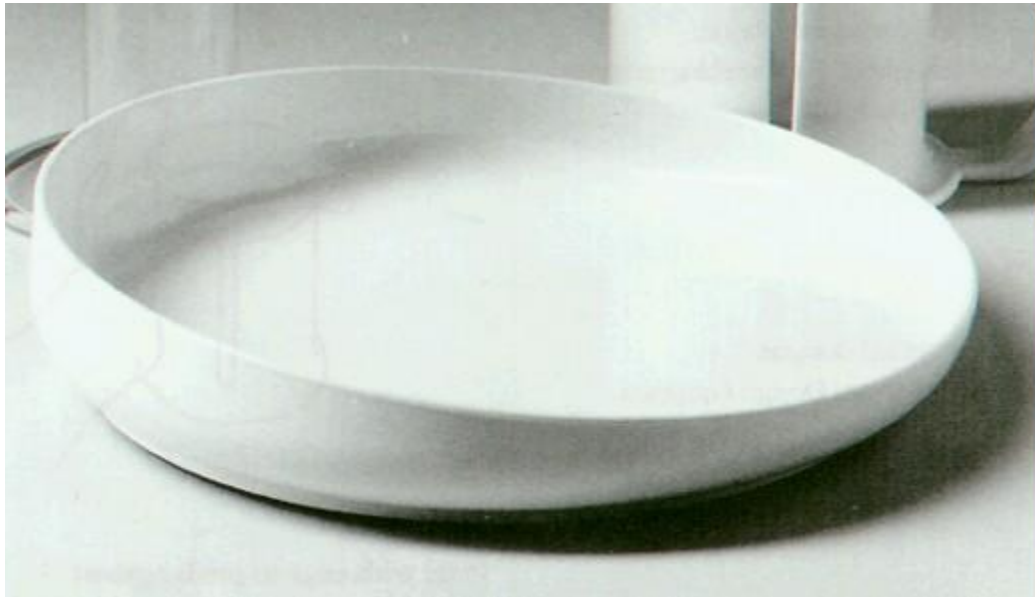
Cutlery with angles or swivel ends for those who can't rotate wrists



Cutlery gripping devices



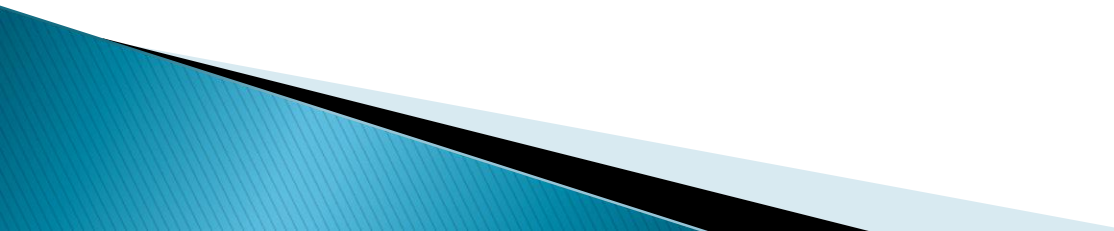
Plate devices– skid proof,
high edge to push food against to
help load fork or spoon



Easy grip, spill proof &/or sipper cup devices



Supportive devices

- ▶ Walkers
 - ▶ Canes– single point and quad cane
 - ▶ Crutches
 - ▶ Gait Belts
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Walkers



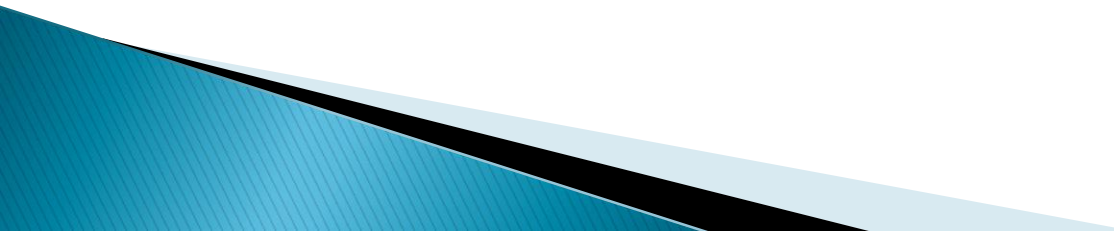
Canes and crutches



Gait Belt



Dressing assistive devices

- ▶ Button hooks
 - ▶ Long handled shoe horns
 - ▶ Sock pullers
 - ▶ Zipper pullers
 - ▶ Front closure attire
 - ▶ Velcro fasteners
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Button hook



Long handle shoe horn



Sock puller



Zipper Puller



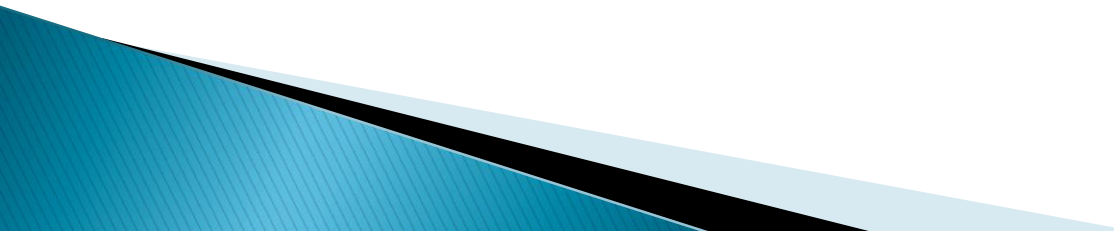
Front closing /Velcro closure



Velcro closure



Personal Care, Grooming and Bathing Devices

- ▶ Big handles on brushes, combs, razors, denture brushes, and tooth brushes
 - ▶ Long handles bathing sponge
 - ▶ Electric tooth brushes
 - ▶ Extension grippers
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Combs and brushes



Bathing sponges



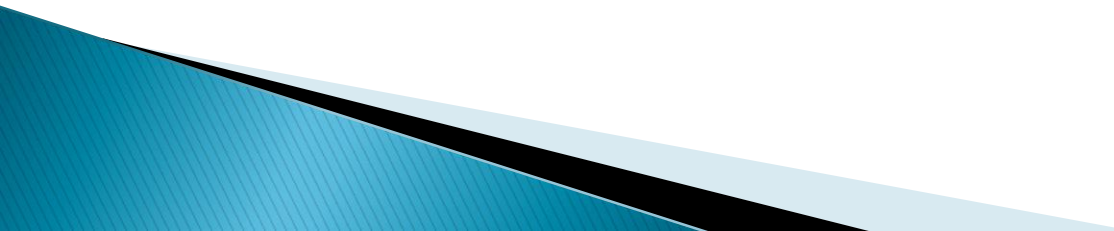
Extension gripper



The Uncooperative Resident

- ▶ Confused
 - ▶ Depressed
 - ▶ Alzheimer's Disease
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Uncooperative Resident cont.

- ▶ Requires patience and consistency
 - ▶ Healthcare team should develop care plan for the resident
 - ▶ FOLLOW plan!
 - ▶ Do not be confrontational
 - ▶ Be firm and pleasant
 - ▶ Report to charge nurse level of resident's independence and document!
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Brainstorm ways to deal with uncooperative resident

- ▶ Don't be confrontational
 - ▶ Role Play – Have one volunteer play an uncooperative resident and the other student(s) find ways to deal with the resident's behavior.
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