Caring Safely in the Home

- Hazards and Risks
- Fire Safety in the Home
- Managing Health and Medications
- Personal Care Skills
- Personal Care Tasks
- Feeding
- Showering and Bathing
- Using a Hoist
- Hair Care
- Oral Hygiene and Dental Care
- Nail Care
- Managing Urinary Incontinence
- Hygiene and Infection Control
- Preventing Infection
- Food Safety
- Moving and Handling the cared for person
Carers face many safety issues depending on the needs of the persons they care for and their level of dependency.

If the person you care for has a mobility problem:
- Equipment such as rails and ramps may make the home safer for you both.
- Arrange furniture simply and consistently and keep all areas uncluttered.
- Remove loose rugs and seal carpet edges that may prove to be safety hazard.

If a person needs to be lifted:
- Ask the health care workers you normally deal with to arrange an assessment of your situation.
- An Occupational Therapist, Physiotherapist or Public Health Nurse will be able to work out a safe way of lifting or transferring the person you care for.
- Family Carers Ireland Care in the Home course provides certified training on lifting and handling for Family Carers and other health workers.

If the person you care for is confused:
- Try not to make any changes to the familiar environment.
- Consider checking medication as this can be a common cause of confusion.
- Easy to read clocks and large calendars can be helpful reminders of time and date.

If the person you care for has memory loss:
- It is important at all times that they carry identification with their name and address and emergency contact details.
- Display emergency and commonly used telephone numbers near the phone.

If the person you care for is aggressive:
- Make sure that all professionals involved with person know of any aggressive behavior.
- Always protect yourself in advance if possible from aggressive outbursts. Plan safe places in the house to protect yourself.
- Remove or hide any items in the house that could be used to hurt you.
- Seek support from someone you trust after an outburst such as a family member, friend or a health professional familiar in dealing with cared for person's condition.

If the person you care for has a problem with their sight:
- Leave all items as they were left. If something has to be moved, tell the person where it has been placed.
- Shut doors completely or leave them fully open, a half opened door is a hazard.
- Furniture should be kept in the same position to avoid confusion.

HAZARDS AND RISKS

A Hazard has the potential to cause harm. Risk on the other hand is the likelihood of harm and usually qualified by some statement of severity of the harm. The Risk can be high or low.

The first step in safeguarding your home is to identify examples of hazards when caring in the home:

- Physical Hazards
- Manual Handling
- Falling Objects
- Electricity
- Fire
- Poor Housekeeping
- Slips/Trips
- Health Hazards
- Noise
- Dust
- Unsuitable lighting
CARING SAFELY IN THE HOME

FIRE SAFETY IN THE HOME

If you care for someone with limited mobility it is vital you have early warning if fires do occur. The following are ways to protect your home from a fire:

FIT SMOKE ALARMS ON EACH LEVEL IN YOUR HOME...

- Keep them free from dust and test them once a week.
- Make a fire action plan so that everyone in your home knows how to escape if there's a fire.
- Keep the exits in the home clear so that people can escape if there is a fire.
- Take extra care in the kitchen.
- Never leave candles lit in rooms that nobody is in.
- Make sure cigarettes are stubbed out properly.
- Close all doors at night.
- Don’t overload electricity sockets

MANAGING HEALTH AND MEDICATIONS

Getting the best from Health Professionals as a Carer you will most likely have a lot of contact with health care professionals. One way of thinking about working with them is to consider yourself as an important part of the team. This team can include public health nurses, pharmacists, occupational therapists, physiotherapists, speech therapists, social workers as well as GPs.

Some tips for Carers dealing with health professionals include:

- Know who the health professional is. Get information about names, organisation, titles and the role they have in the treatment of the person you care for
- Take someone with you to appointments
- Make a list of questions so you won’t forget anything
- Keep a diary of the person’s problems or symptoms
- Ask for information to be written down, particularly about diagnosis or about medications
- Ask your doctor for any printed material on support available or additional information on cared for person’s condition.
Your own health is important

Your health is very important and your doctor can be an important person in your own support network. If at all possible find a doctor you have confidence in, can talk to and feel comfortable with. Make sure your doctor knows about your caring role and the demands it makes on you. It is important to arrange regular health check-ups for yourself.

Medication

There are two types of medication; those that require a doctor’s prescription and those that do not. It helps to have an understanding of why the person you care for needs to take medication and be aware of any side effects associated with same.

Some questions you might want to ask the doctor or pharmacist about medications are as follows:

- What is the name of the medication and what is it for?
- Are there any possible side effects?
- What should I do if there are any side effects?
- How long will the person need to take this medication?
- Will the medicine affect other medical problems the person has?
- What should I do if a dose is missed?
- Will the medicine interfere with other medicines taken?
- Is there anything the person should avoid while taking the medicine such as alcohol, cigarettes, driving?
- Check that the person is taking the lowest possible effective dosage

The person you care for may be on more than one type of medication and knowing when to take each one can be confusing.

A pharmacist can divide the week’s medication so that it makes it easier to monitor the dosage.

These are available at supermarkets and local shops as well as at pharmacists. If the person you care for is already on prescription medication or you have any doubts about the medications you are buying you should always seek the advice of a pharmacist or doctor.

Drugs Payment Scheme

The Drugs Payment Scheme allows individuals and families who do not hold medical cards to limit the amount they have to spend on prescribed drugs. Under the Drugs Payment Scheme, no individual or family will have to pay more than €144 per month for approved prescribed drugs, medicines and appliances.
Family expenditure covers a nominated adult, their partner and children under 18 years. Dependents over 18 years and under the age of 23 years who are in full-time education may also be included.

A dependent with a physical disability or a mental handicap or illness who cannot look after themselves fully, who lives in the family home and who does not hold a current medical card, may be included in the family expenditure under this scheme regardless of age.

All those who are ordinarily resident in Ireland are eligible to apply for the Drugs Payment Scheme as long as they do not hold a current medical card. You can use the Drug payment scheme in conjunction with a Long Term Illness Book.

The application forms can be obtained in your local Pharmacy. Families should be registered by a nominated adult family member. The completed form should be returned to your Health Service Executive. Once the registration form has been processed, each person named on the form will receive a plastic swipe card which they must present when having prescriptions filled at a community pharmacy.

All members of a family should use the same pharmacy throughout a month to obtain prescribed medication.

A national database for pharmacists is in the planning stages, but until it comes about, the whole family will have to attend the same pharmacy all the time and keep receipts for prescribed medication.

These receipts can then be returned to the pharmacist at the end of the month.

In return, the family will get back any money over €144 euro spent in that month.

---

**PERSONAL CARE SKILLS**

**Communication and Listening Skills**

Communication between a Carer and the cared-for person is essential for reaching a mutual understanding.

Communication can occur in different ways, the main methods of which are: verbal (through spoken and written communication) and non-verbal (through body language and tone of voice).

The method for communicating can change for each message and person you communicate to for e.g. you may have to pay particular attention to your voice when communicating to someone with a hearing impairment.

**Here are some tips for your effective communication:**

- Listen to how you are speaking and how your voice sounds. The pitch, rhythm and rate of your voice are important especially if the cared-for has a hearing impairment.
- Be patient.
- Allow time for your cared-for to decode your message, finish their sentences, or make an expression especially if they have a physical impairment.
- Observe body language and facial expressions. Check that you have understood their message by repeating it back to them.
- Listen for any sounds your cared-for makes that they use to communicate such as clicking or smacking their lips.
- Respond in a way your loved-one understands.
- Don't patronise and treat your cared-for with respect.
- People with profound physical disabilities are likely to be mentally alert.
- Position yourself accordingly when communicating. Ensure you are eye level and at a desired distance.
FEEDING
Loss of appetite, muscle wastage and weight loss are very common conditions associated with older people, people with terminal illness and other adults or children with disabilities.

Numerous small measures can make it easier for the person receiving care to eat such as pain relief, good oral care, treatments for constipation and other gastro-intestine complaints. Common sense can also help through serving food in a series of smaller meals more frequently rather than three larger meals per day.

Tips for feeding:
• Ask the person how much they would like. Do not put too much on the plate as this can be off putting.
• Prior to feeding assist with toileting if they so require and wash their hands thoroughly.
• Ensure the person is sitting in an upright position and is comfortable.
• Ask which food on the plate they would like to eat first.
• Ensure the food on the fork is in their line of vision so that they are eating.
• Encourage swallowing between each mouthful
• Add extra nutrients to their diet if needed, for e.g. wheat germ can be added to soups, shredded carrots to tuna fish, and grated lemon or cheese to salads. Add powdered skimmed milk to soups or milk shakes for extra protein.
• Remain sitting for about half an hour after eating to allow time for food to settle.
• Wash hands after feeding.

PERSONAL CARE TASKS
Considerations when assisting in personal care tasks:
• A person may find it difficult to undertake their day to day personal grooming requirements due to increased grip strength to hold objects (such as soap or a brush), or due to reduced movement capability.
• Respect that dressing and undressing is a private procedure and ensure the surrounding area is private
• Knock before entering the room and make sure curtains are closed.
• Understand the importance of a mirror within easy reach.

Aids for communicating
There are numerous practical aids and equipment to assist us in communicating with a disability.

• Symbols or pictures which represent certain words can be very useful and can assist the person making choices
• Items such as electronic writing boards, sound amplifiers, pen and paper could be considered.
• Visual aids such as image enhancers and sound aids are available on computers to assist those who are visually impaired or have impaired hearing.
**SHOWERING AND BATHING**

**General preparations:**
- Prepare the environment and yourself before starting.
- Gather everything you need such as a change of clothes, towels, toiletries, and a hoist.
- The room should be warm and draught free and private with any blinds closed, and brightly lit so you can both see what you are doing.
- Have a bin at hand in case it is needed.
- Wash hands thoroughly before starting.

**ASSISTING WITH A BATH**

- Follow the general preparation guidelines (see above).
- Ask the person if they would like to use the toilet before starting.
- Check the bath is clean and run both hot and cold taps.
- Add desired bath oil or bubble bath if required and check the temperature of the water.
- Check the bathroom floor is dry and not slippery.
- Put bathmat down to prevent slips.
- Assist with undressing, getting into the bath and using a hoist if required.
- Use different coloured clothes/flannels for washing the genital area, and the face and body.
- Start with face and neck and ears cleansing. Dry with towel.
- Change flannels and wash trunk, chest, back arms, legs, feet, under the breasts, underskin folds, under the arms and lastly the genital and anal area and rinse thoroughly.
- Let the water out and assist the person out. Use a hoist if required.
- Wrap a large towel around them immediately.
- Dry the person thoroughly paying particular attention to folds of flesh. Assist with dressing and ensure they keep warm.
- When the person is warm and dry, clean the bath dispose of rubbish and ensure there is no water or oil on the floor to prevent slippages.

**ASSISTING WITH SHOWERING**

- General preparation is the same as for a bath.
- Ensure there are handrails and a non-slip mat if required.
- Ensure there is a comfortable shower seat available if required.
- If the shower seat has wheels, apply the breaks.
- Ensure the room is warm and check the temperature of the water.
- Allow the person to use the shower head to wash themselves if possible.
- Wash using the same guidelines as outlined in ‘assisting with bathing’.
- Dry the person and clear up as previously described.
- Keep water away from persons face as this can be frightening.
USING A HOIST

- Explain what you are doing.
- Put a towel around their legs for their modesty.
- Keep talking to the person whilst moving it into position telling them what is going to happen next.
- Apply brakes.
- Get the person to check the temperature of the water with their foot.
- Adjust the temperature of the water accordingly, if required.
- Remove the towel before gently lowering them into the bath.

SHaving

- Ask if they would like to use a traditional razor blade or an electric razor.
- If using a traditional razor, ask if they have preference for shaving foam, gel, or soap
- For a treat you could apply a mix of yoghurt and honey to the skin prior to the shave. This softens and prepares the skin and keeps the skin moist. Clean off with a warm towel before you proceed.
- Place a hot damp towel over the face to soften the face and open the pores.
- Be careful around the lips as this area is the most sensitive on the face with lots of nerve endings.
- Wash the razor thoroughly before the shave or use a new blade.
- Put on shaving gel, foam or other shaving product of choice.
- Gently stretch the skin on each cheek
- Shave down with the direction of the hair on each cheek.
- Ask the person to tilt their chin upwards.
- Shave upwards in the direction of the hair under the chin and under the jaw-line.
- Shave sideways from cheek to mid chin on both cheeks.
- Shave down from nostrils as close as possible to the lip. This should always be the last place to shave because the entrance to the nose is a source for bacteria.
HAIR CARE

Having the hair washed can be a relaxing and refreshing experience. Brushing or combing of the hair should be done at least once a day or as required. Washing and shampooing the hair should be done in the bath or shower but it can be done over a sink if necessary or in the bed if the person is unable to get out of bed.

- Washing hair at a sink or basin.
- Ensure you are prepared with towels and shampoo ready.
- Protect the persons back and shoulders from any water leakage if washing at the sink by wrapping towels and/or a water resistant wrap around the shoulders.
- Use a hose or spray attachment if possible but if that is not available gently rinse the person's hair using your hands or use a pre-cleaned jug for the purpose.
- Apply shampoo and gently message into scalp and hair.
- Rinse thoroughly being extremely careful not to poor water into their eyes.
- Apply conditioner if required and brush gently through hair.
- Rinse thoroughly.
- Wrap a warm towel around the hair to soak up excess moisture.
- Towel dry gently.
- Brush or comb through and style as required.
- Be careful when using hairdryers that they are not too hot.
- Show them their finished result in a mirror.

Washing hair in bed

There is an inflatable tray designed to support the head and neck of a person who is confined to bed to assist them in having their hair washed. Ask you Public Health Nurse of GP where you can source one.
**ORAL HYGIENE AND DENTAL CARE**

Good dental care is required for speaking, chewing and overall health and well-being. Tips for oral hygiene and dental care.

- Clean teeth at least twice a day for at least 2-3 minutes.
- Replace their toothbrush every 2-3 months.
- If the person cannot get to the bathroom give them a bowl of water, toothbrush, toothpaste, towel and a glass of water to rinse.
- Ask if they need any assistance.
- The gums, tongue and roof of the mouth should also be brushed with toothpaste to remove plaque, stimulate gums and freshen breath.
- If you need to clean their teeth for them, be patient and gentle and explain what you are doing.
- Dentures should be removed and cleaned twice a day to remove plaque, food particles and staining.
- Dentures should be left to soak overnight in a denture cleaning solution and then brushed with a toothbrush and toothpaste.
- If their mouth is dry or crusted, clean the inside of the mouth with cotton buds soaked in warm water.
- If lips are cracked or dry, lip balm can be useful in restoring and maintaining lip moisture.
- Be aware of bleeding, swollen or red gums, receding teeth and signs of decay and refer to a Dentist for advice.
- Home visits can be arranged if necessary.

**NAIL CARE**

- Soak fingernails and toenails for desired soaking time (usually 5 minutes for fingernails and 15-20 minutes for toenails).
- If possible use professional nail clippers or nail clippers scissors with a straight edge.
- Use extreme caution when cutting to prevent damage to nearby tissues.
- If a person has diabetes their nails should be checked and cut by a qualified chiropodist or podiatrist.

**MANAGING URINARY INCONTINENCE**

- Learn to recognise the non-verbal cues a person gives about needing to go to the toilet and respond to them quickly.
- Schedule frequent visits to the toilet that suits you cared-for person.
- Try to get a picture of how and when accidents are happening.
- Some indications that a person may need to urinate include picking at their clothes near the groin area or fidgeting.
- Urinary incontinence can be assisted with absorbency pads which can be put inside regular underwear.
- Incontinence wear should be changed frequently, keeping skin clean and by using lotions and powders to protect the skin.
- Ensure your cared-for has adequate fluid intake.
- If assisting with toileting ensure clothes are easy to get on and off.
- If required put a commode next to the bed, particular at night.
- Provide adequate lighting to and from the bathroom.
- Night time incontinence can be reduced by reducing fluid intake after a particular time in the evening and by using an absorbency pad if required.
HYGIENE & INFECTION CONTROL

Infection:
If your cared-for person is ill, frail or has a low immune system, they may be particularly vulnerable to infection, so it is essential to maintain a hygienic and a clean habitable environment.

Infection can be spread in the following ways:

- **Sources:** People and animals are the most common carriers of many bacteria & viruses.
- **Victims:** The most vulnerable are those who have not been vaccinated and those who have low immunity.
- **Direct Routes:** A person can catch an infection directly by touching something that is contaminated; by sharing a needle with a contaminated person; through an exchange of bodily fluids or saliva, or through sexual activity with an infected person.
- **Indirect Routes:** Indirect routes include: airborne (germs can be carried in droplets of fluid), food; Food (can be contaminated if not cooked, stored or handled correctly); clothing or equipment (can harbour germs) and insects (can be hosts)

Symptoms of Infection:
- Pain or swelling.
- Localised redness.
- Loss of movement.
- Areas that are hot to touch.
- High temperature, increased breathing and pulse rates.
- Headache and thirst.
- Hot, dry skin and rash.
- Loss of appetite.
- Weakness and apathy

PREVENTING INFECTION

The best way to prevent infection and ensure a clean habitable environment is to adhere to a personal hygiene policy. Family Carers Ireland recommends the following:

Washing hands:
- Wash hands regularly throughout the day especially after:
  - Going to the toilet.
  - Assisting with toileting.
  - Handling rubbish.
  - Tea breaks.
  - Handling money.
  - Before serving food.
  - Coughing, sneezing, touching face/ hair/ nose /mouth.
  - Handling cleaning chemicals.
  - Regularly throughout the day.

Hands should be washed as per the instructions on the Hand Wash poster (see next page); the key points to remember in the hand washing process are:

- Remove all jewellery.
- Ensure sleeves are pushed up.
- Hot water is applied to the hands.
- Soap is dispensed onto the hands and warm water added.
- All parts of the hands & wrists should be washed as per the instructions on the Hand Wash Poster.
- Hands must be rinsed thoroughly to remove all traces of soap and dried properly to avoid irritation.
- Antibacterial gel should be applied to dry hands immediately after washing; apply as per the Hand-Rub Technique poster.
CARING SAFELY IN THE HOME

ALCOHOL HANDRUB TECHNIQUE

1. Remove hand and wrist jewellery (wedding band allowed) N.B. Keep nails short.
2. Apply about 3mls of alcohol and rub into palm of hand.
3. Rub palm to palm to spread alcohol over entire hands and fingers.
4. Rub the back of your left hand with the palm of right hand. Reverse and repeat action.
5. Open fingers and rub the finger webs. Reverse and repeat action.
6. Rub palm to palm with fingers interlocked.
7. Rub thumb of each hand using a rotating movement.
8. Rub the tips of the fingers against the opposite palm using circular movements.
9. Rub wrists of both hands.
10. Allow hands to dry completely.

HANDWASHING TECHNIQUE

PREPARATION

1. Remove hand and wrist jewellery (wedding band allowed) N.B. Keep nails short
2. Wet hands thoroughly under warm running water
3. Apply 5mls of soap/antiseptic soap to cupped hand by pressing dispenser with heel of hand (do not use finger tips on the dispenser)

HANDWASHING

A. Rub palm to palm 5 times
B. Rub right palm over the back of left hand up to wrist level 5 times. Do the same with the other hand
C. With right hand over back of left hand rub fingers 5 times. Do same with the other hand
D. Rub palm to palm with the fingers interlaced
E. Wash thumbs of each hand separately using a rotating movement
F. Rub the tips of the fingers against the opposite palm using a circular motion. Also ensure nail beds are washed
G. Rinse hands thoroughly under running water to remove all traces of soap
H. Turn off taps using elbows
I. Dry hands completely using a disposable paper towel
J. Discard paper towel in waste bin. Open bin using foot pedal only to avoid contaminating clean hands

Supported by PEI
Developed by Infection Control Team
St. James’s Hospital

Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

A Partnership for Better Healthcare

A Strategy for the Control of Antimicrobial Resistance in Ireland

SARI
Personal hygiene:

- Shower regularly and keep hair washed and neat.
- Wear clean clothes.
- For hygiene reasons nails should be kept short, clean and varnish free. False nails are not permitted to be worn to work.
- All cuts/ sores/ boils must be covered with a blue-water proof plaster. This is to protect you from acquiring an infection as well as to protect your cared-for from acquiring an infection.
- Wear sensible footwear which encloses the toe and heel.

Disposable gloves:

Disposable gloves should only be worn for short periods and changed frequently. Hands should be washed before where necessary, and after using disposable gloves.

Where disposable gloves are used they should be discarded following:

- Cleaning duties, handling refuse, handling or preparing raw food, and continence duties
- Gloves are also discarded if they are ripped, torn or have become loose due to over wearing.
- In addition to adhering to a hygiene policy, Carers are also recommended to:
  - Get vaccinated (ask your GP for recommended vaccinations)
  - Keep informed (watch the news, read the paper or go online to keep informed on any outbreaks of viruses).

In order to minimise any health risks, you need to keep your kitchen and cooking utensils clean, store food correctly and prepare food carefully. Follow these steps to ensure food safety:

Buying Food:

- Check expiration dates. Don’t buy food, which has expired or will expire before you use it.
- Check that packaged goods are wrapped accordingly and are not damaged.
- Check that fruit and vegetables don’t have broken skins.
- Don’t buy fish or meat that has a strong odour.
- Check that your eggs aren’t cracked and have been cleaned.
- Pack fruit and vegetables and any other foods you will eat raw separately, and place meat and fish products in plastic bags to prevent leaks in case of spillage.

Storing Food:

- Store foods according to its packaging guidelines.
- Store raw foods on a separate shelf in the fridge.
- Put raw meat and defrosting foods on a plate to prevent dripping.
- Place fruit and vegetables in the bottom of the fridge, and meat in the coldest part.
- Store food in the fridge or freezer as soon as possible after purchase.
Cleanliness:

- Cover any cuts with plasters.
- Wash hands thoroughly before and after preparing foods, and as soon as you have handled raw meat.
- Wash knives separately, and clean utensils thoroughly.
- Change and wash cloths and towels regularly. Soak dish cloths overnight in bleach.
- Regularly disinfect bins, cupboard handles, and taps.
- Clean your fridge regularly.
- Keep pets away from all food and kitchen services.

Preparation:

- Follow frozen food guidelines and your freezer guidelines correctly.
- Do not use foods from damaged packaging for e.g. from damaged or dented tins.
- Do not use foods past its expiry date.
- Wash all fruit and vegetables thoroughly.
- Use separate chopping boards and knives each for cooked and uncooked foods.

Cooking:

- Follow cooking guidelines exactly on all products.
- Ensure all meat and fish is cooked thoroughly.
- Do not reheat food more than once.
- Have separate chopping boards and knives for working with raw foods.
The main types of moving and handling equipment respond to the patient’s level of ability.

- For people with no ability to help in the move, use equipment that takes all of their body weight: hoists, slings and slide sheets.
- A hoist is essential if your relative has to be moved regularly from a chair to a bed or into a bath. Most hoists involve sitting the person in a sling and, once they are securely in place, operating an electric winch system to lift her. A healthcare professional should advise you on the hoist that is most suitable and demonstrate how to use it.
- To help prevent pressure sores, variable pressure mattresses made of spongy material with a series of air pockets that inflate and deflate at different times can help. They distribute the body's weight more evenly so that the points where the body presses on the mattress are varied.
- People who can bear some of their own weight, sit up with help or pivot themselves, mostly need slide boards and slide sheets to take some of their weight. A slide sheet is a strong, thin piece of material with a slippery surface that allows you to move the person across the bed when she needs to be turned. You slide it underneath her and as you pull it towards you, she is automatically moved across with it. A slide board is a shaped piece of wood that can be used as a bridge between a bed and a chair, so that your relative can slide across the board from one piece of furniture to the other.
- Grab handles, lifting handles and handling belts are used to help individuals who just need support to move on their own. A handling belt is a broad, thick belt with handles on it that you can hold onto when helping your loved one to stand up or walk. It means you don’t have to hold them by the arms and so can prevent bruising.
People with some upper body strength may be able to use bed blocks with handles. They can be improvised by tying two or 3 similar sized books together, the person presses down to raise herself to sit up, shift their position or raise onto a bed-pan in bed.

A rope ladder is a device that enables a person with reasonably strong hands and arms to raise himself to a sitting position: one end of the ladder is fastened to the bottom end of the bed, the user then pulls on the rungs to raise up.

Prepare to move

- Know what equipment is needed, where to place the chair or wheelchair, what side of the bed to work on.
- Position surfaces as close as possible to each other.
- Always explain to your loved one what you're going to do and why.
- Check that they're happy with this before you start.
- Encourage them to help in the move if they can, this can promote their independence.

Before moving the cared for person, ask yourself:

- Is the area safely clear of obstacles like trailing wires, chairs, books/newspapers, is the floor dry and not slippery.
- Are you wearing clothes that allow ease of movement and low shoes with good traction.
- Is the equipment you're using clean, safe and ready.
- Can you actually move and handle your loved-one on your own or are two people needed.
- Is your relative mobile enough to help with part of the procedure, can they move themselves to the edge of a chair, pull up with their arms or push down on the bed with their feet for example?

During the move:

- Stand with a wide base of support, slightly flex your knees and keep your back straight.
- Always make movements on the count of 3.
- Bend your legs, not your back.
- Use your legs to do the work.
- Don't hold or grab your relative under the underarms.
- Don't let them hold or grasp you around your neck.
- Pivot your whole body in the direction of the move, don't twist or turn your trunk.
- Give praise and reassurance to your relative.
Repositioning:
- Make sure that the cared for persons body is well aligned in the new position support with pillows as needed

Taking stock post-move:
- Observe how the move went, was there enough help?
- Is the equipment appropriate?
- How much help did your loved one need?
- How well did they tolerate the movement?
- Is their new position comfortable?
- Were there any complaints of pain or discomfort?

Pressure area management:
- A pressure sore or bedsore is a broken area on the skin caused by a loss of blood supply from continuous pressure from lying or sitting in the same position for long periods without moving. It’s a painful condition that can deteriorate seriously and must be treated and managed carefully.

- Common places for pressure sores are at the buttocks, shoulders, elbows, the heels and ankles and the knees. Warning signs are that the skin is hot, shiny and red, swollen or torn especially over bony areas.

- If you press the red area and hold for 3 seconds, the skin should appear white when you take your finger away. If the area is still red, this is an indication of pressure damage. You should immediately seek medical advice and treatment.

Preventing pressures sores:
- Turn your loved one in bed (or remind them) at least every 2 hours.
- Remind them to stand if they tend to sit for long periods.
- Use an alarm to help them remember, a kitchen timer or a mobile phone.
- Keep the skin as dry and clean as possible, but avoid rubbing too vigorously when drying.
- Monitor the time sitting on commodes.
- When assisting the person getting out of bed, take your time and always ensure that the skin is not dragged along the sheets.
- Make sure the sheets are not wrinkled.
- Ensure that your relative’s chair is the right size, giving enough room between the arm rest and the hips so as not to pinch.
- Pyjamas or nightdresses should not be bunched up underneath your relative’s body.
- A person using a wheelchair should shift their weight every 10 to 15 minutes or be helped to reposition himself at least once an hour.
- Areas with less fat should not be massaged. Even slight friction can remove the top layer of skin and damage blood vessels beneath it.
- Use pillows or foam wedges to raise the legs from mid-calf to ankle, raise the heels off the bed and reposition the shoulders and head.