Disease, injuries and surgeries are often responsible for the loss of a body part or the loss of bodily function.

- An assistive device is any item, piece of equipment, or product that is used to increase, maintain or improve functioning of individuals with disabilities.
- Assistive devices can make "doing possible" and are used to help a person overcome a physical limitation that may be caused by normal aging processes or other disabilities. Using an assistive device such as a walker can make the difference between dependence and independence for your client.

What you will learn?

- Definition of Assistive Devices
- Safety tips in working with client’s who use walkers

Walkers & Canes – What’s the Difference

- Walker- four point aid with rubber tips
- Canes- several types available- some with 3 tips, 4 tips, or single tipped- provide balance and support when client has weakness on one side of body and has use of at least one arm
- Walkers and canes should be fitted to the client’s height by a nurse or therapist
- When your client is new to a walker be sure and watch the therapist or nurse walk with the client and ask first if it is ok for you also to walk with your client before you do it.

The In-home aide plays a valuable role in assisting a client with ambulation and mobility. Be sure to ask your supervisor for instructions on any equipment that your client is using in order to safely assist the client in using any assistive devices. Assistive devices are meant to be helpful but if used improperly and without proper training can lead to falls and injuries for the client. If the client borrows someone else’s walker, cane, etc, be sure to notify the supervisor because one size does not fit all.

There are many neat carry bags and baskets that can fit on the front of the client’s walker to give the client some independence in carrying items that they would like to have at hand. A bright Velcro bag can also help personalize the walker! Be sure the client does not overfill the bag or basket and get over balanced.

Walking with a walker can sometimes be embarrassing to a client – be sure and give proper support and encouragement!
Assistive Devices:

Walker Tips! The following is not meant to take the place of therapy or other instruction you may receive when working with a client with a walker. The information is for review only to assist you in asking the appropriate questions and in alerting your supervisor to problems you see in the home.

Be sure a Physical Therapist has been involved to make sure the client has the right kind of walker and that it is at the right height for the client’s safe use.

Getting Started:

• Be sure your client has on shoes with good support. If standing from a chair:
  • Position the walker directly in front of the chair.
  • The client should move forward to the edge of the seat.
  • The client should lean forward and push up from the chair arms with both hands. Don’t pull up on the walker as it may tip.
  • The therapist or nurse will instruct you in how much assistance to give the client when standing.
• When the client is standing, the client should move one hand at a time to the walker. Be prepared to steady the client should they appear off balance.
• When walking, the client should place the walker about a step in front of them and not step too far into the walker. When your client uses a rolling walker be careful that they do not push it too far ahead.
• The client should stay close enough to the walker so that their hips line up with the back of the walker. When turning, the client should turn with small steps and turn toward the strong leg.
• When walking, the client should keep both hands on the walker at all times for balance.
• Use ramps with caution – the client might get going too fast.
• The client should stand tall and avoid walking bent over – if you notice this, let your supervisor know as the walker height may need adjusting.

When sitting down:

• The client should back up toward the chair, using the walker, until the back of their legs touch the chair.
• The client should sit down slowly rather than falling into the chair. Depending on their strength and balance, the therapist may have the client reach back for one or both of the arms of the chair when sitting.

WHAT THE AIDE CAN DO!

(Always get permission first before moving objects in a client’s home from both the client/family and your supervisor)

• Remove throw rugs or objects on the floor such as magazines, bed room shoes, etc that may be in the way. Clean up spills before walking.
• Let the supervisor know if furniture in the home needs to be rearranged to allow the client to walk safely with the walker or if the client has difficulty fitting the walker through a door way or using it in the bathroom.
• When unfolding a folding walker, be sure it locks in place before letting the client walk with it.
• Using a walker on stairs is very tricky – only the physical therapist should ok whether or not you can assist a client with using a walker on the stairs.
• Let the supervisor know if the patient is unable to pick up the walker easily or if it moves too freely on vinyl flooring or drags on thick carpeting – the client could fall.
• Check that the walker’s rubber tips are not worn. Let your supervisor know if they need to be replaced.

Let your supervisor know if the client complains of hand pain or if their palms are red – the walker handles may need to be padded!

Sources: NC DHSR, Nurse Aide I curriculum; Mobility Aids, what you need to knowabout.com; Safeaging.com/learning center; A Guide for Caregivers: Moving People Safely- Jan 04; Robin Altenburger, The University of Findlay, Walker Safety in Your Home; Geriatric Rehabilitation Resource for Oklahoma, University of Oklahoma Health Sciences Center College of Allied Health, Department of Rehabilitation Sciences, http://www.ah.ouhsc.edu/geriatric_resources/walkers.htm;