

# In-Home Aides Partners in Quality Care

- November 2010 -

## November is Home Care & Hospice Month!

**NOVEMBER HAS BEEN PROCLAIMED AS HOME CARE & HOSPICE MONTH ACROSS THE NATION! IN MANY INDIVIDUAL STATES, GOVERNORS AND LOCAL LEADERS HAVE ALSO PROCLAIMED NOVEMBER AS HOME CARE & HOSPICE MONTH.**

**MANY OF THE PROCLAMATIONS STATE THAT IN HOME SERVICES STRENGTHEN THE FAMILY BOND AND SUPPORT FAMILIES AS THEY CARE FOR THEIR LOVED ONES AT HOME, LESSENING CAREGIVER BURNOUT AND UNNECESSARY PLACEMENT IN MORE COSTLY INSTITUTIONAL SETTINGS AS WELL AS BUILDING UPON A STRONG TRADITION OF CARE AND COMPASSION. CONGRATULATIONS TO ALL OF THE IN-HOME AIDES ACROSS THE NATION THAT MAKE THIS POSSIBLE.**



Kathie Smith, RN:  
Director of Quality  
Initiatives and State  
Liaison; Editor in  
Chief



### Focus on Pressure Ulcers:

What you will learn:

- Definition of a pressure ulcer
- What part of the body pressure ulcers usually occur
- Risk Factors for developing pressure ulcers
- Ways to decrease pressure on the skin
- An overview of skin care

### Definition and facts about pressure ulcers:

- A pressure ulcer (also known as a pressure sore, bed sore or decubitus ulcer) is "any lesion caused by pressure resulting in damage to underlying tissue"
- A pressure ulcer usually occurs over a bony area
- Ninety percent of pressure ulcers occur on the lower half of body: sacral, coccygeal (lower region of the back and upper area of the buttocks), sides of hips and over other bony surfaces
- Persons with pressure ulcers are at increased risk for dying sooner than persons without pressure ulcers.
- Older people frequently have several health problems that can affect the development and treatment of each problem.
- A plan for preventing pressure ulcers includes position changes along with supportive devices, daily skin inspections and the best possible nutritious diet

*In-home aides play a vital role in serving our chronically ill, disabled and aging populations. Often having the most contact with the patients, these individuals are usually "closer" to patients than any other home care service provider.*

*Often referred to as the backbone of the long-term care system, they are uniquely qualified to meet the challenges of our aging and ailing populations.*

**DON'T FORGET TO VOTE IN THE UPCOMING ELECTIONS, MAKE YOUR VOICE HEARD!**



## Facts about Skin

- It is the biggest organ in the body
- It protects our bodies
- It helps keep our bodies at just the right temperature
- It allows us to have the sense of touch
- It is made up of three layers: The epidermis, the dermis, and the subcutaneous



Changing position frequently and consistently is crucial to preventing bedsores. It takes just a few hours of immobility for a pressure sore to begin to form. For that reason, experts advise shifting position about every 15 minutes in a wheelchair and at least once every two hours, even during the night, if someone spends most of the time in bed. Check with your supervisor on how often to reposition your specific client according to the care plan.

### **There are external and individual risk factors for developing pressure ulcers:**

#### External (factors external to the person such as clothing or sheets) include:

- Pressure on the affected part of the body
- Friction involving the skin- such as the skin and the sheet or clothing moving across each other, the movement damages the skin; the damage to the skin is sometimes called sheet burn
- Shear involving the tissue under the skin- results from skin and another object moving against one another, this is when deep tissues are pulled. This is when the bed is elevated or repositioning someone in a chair, the skin stays next to the sheets or the back of chair and the deeper tissue and skeleton slide down. The blood vessels in the sacral area (lower part of the back) become twisted and do not receive enough oxygen.
- Moisture- When moisture is present it leads to softness of the tissue due to wetness and increases the risk for skin and tissue injury. Increased moisture comes from incontinence, increased perspiration and/or wound drainage.

#### Individual (factors within the individual that increase susceptibility such as malnutrition or immobility)

- Immobility – increases continued pressure over bony areas
- Inactivity- increases continued pressure over bony areas
- Age- less fat and muscle to minimize pressure, decrease in blood vessels to skin, healing slower
- Urinary and fecal (stool) incontinence- source of moisture, fecal is more of a problem because it has bacteria and enzymes that are very irritating to the skin
- Malnutrition- decreased intake of calories and protein make skin easier to damage and slow healing
- Decreased sensation- when ability to feel pressure on a body part is lost or decreased, the person is not aware of the pressure or discomfort and will not know to change position

## *The Aide's Role in the Prevention of Skin Breakdown*

- Be aware of the causes of pressure ulcers
- Look for the beginning signs of pressure ulcers- redness, darkened skin, changes in the skin
- Report any signs immediately
- Encourage family and caregivers to keep skin clean and dry
- Cleanse urine and feces (stool) from the skin as soon as possible
- Pat skin dry rather than rubbing to prevent shearing
- Use a turn sheet to lift or turn the patient in bed-Avoid positioning the client directly on the hipbones, position at a 30-degree angle.
- Encourage the caregiver to help move the patient (client) with a partner to avoid dragging the patient (client) up in the bed
- Encourage caregiver to reposition the patient frequently- check with nurse
- Keep bed linens free of wrinkles and objects that could irritate the skin
- Be sure clothes and shoes fit client correctly
- Report any changes in skin color, condition and temperature

***Remember: Our skin depends on our overall health, Nutrition plays a huge role in the condition of our skin, prevention is the key to healthy skin. YOU are the first line of defense.***

### Other Skin Problem Areas Are:

- Under Breasts
- Fold of the abdomen
- Between buttocks
- Thighs

### Other ways to help prevent skin breakdown:

- Effective nutrition
- Hydration
- Position changes-Keep the client's knees and ankles from touching. Use small pillows or pads.
- Home exercise
- Try to have the patient stay off the open or affected area- talk to your supervisor about any special pressure relieving mattresses or pads that may be needed
- Talk to the nurse if your patient (client's) wound is not healing
- Encourage your client to eat vegetables, fruits and protein- as diet allows
- Offer nutritional or protein supplements if assigned on your assignment sheet

Bed bound clients have special problems and needs. Bed bound and chair bound patients and those that are unable to move themselves and changes positions may have other factors that put them at high risk for pressure ulcers. These risk factors include immobility, problems with dietary intake and poor nutritional status, incontinence, and issues with cognitive functioning.

***Resources: UNC School of Nursing- on line case study- Pressure Ulcers; The Aide's Role in the prevention of skin breakdown- Jan Helsper; Home Health Aide Guidelines for Care-Marelli; Mayoclinic.com/health/bedsores.***