

 NC Department of Health and Human Services
NC Nurse Aide I Curriculum

***Module G**
Basic Restorative Care
July 2019

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Objectives

- Explain the role of the nurse aide in basic restorative care
- Describe the processes involved with bowel and bladder training

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Basic Restorative Care

Care provided after rehabilitation when the resident's highest possible functioning has been restored following illness/injury



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Basic Restorative Care – Importance

- Maintain/improve abilities
- Prevent further complications
- Aim toward independence
- Team effort
- Assist individual to accept or adapt



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4

Basic Restorative Care – Nurse Aide’s Role (1)

- Recognize loss of independence
- Encourage resident and support family
- Be sensitive to resident’s needs



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5

*Basic Restorative Care – Nurse Aide’s Role (2)

- Be positive and supportive
- Emphasize abilities
- Explain planned activities and how nurse aide will help
- Treat with respect
- Allow for expression of feelings
- Develop empathy for situation
- Praise accomplishments

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6

***Basic Restorative Care – Nurse Aide’s Role (3)**

- Review skills
- Focus on small tasks and accomplishments
- Recognize and address setbacks



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7

***Basic Restorative Care – Nurse Aide’s Role (4)**

- Give resident control
- Encourage choice
- Encourage selections of appropriate clothing
- Show patience



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8

***Basic Restorative Care – Nurse Aide’s Role (5)**

- Provide for rest periods
- Encourage independence during activity
- Encourage use of adaptive devices
- Consider involving family



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9

***Prosthetic Device**

- Replacement for loss of a body part
- Role of nurse aide:
 - Keep the prosthesis and the skin under it dry and clean



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***Orthotic Device**

- Artificial device that helps support and align a limb and improves function
- Role of nurse aide:
 - Keep the orthotic device and the skin under it dry and clean



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11

***Supportive Device**

- Special equipment that helps a disabled or ill resident with movement



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12

***Assistive (Adaptive) Devices**

- Special equipment that helps a disabled or ill resident perform activities of daily living (ADLs)
- Promotes independence
- Successful use depends on...



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13

***Positioning Assistive Devices (1)**

Pillows are used to position a resident in a side lying position



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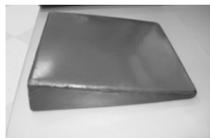
14

***Positioning Assistive Devices (2)**

Abduction Pillow



Wedge Pillow



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15

***Positioning Assistive Devices (3)**

Small Cylinder Neck Roll Pillow



Long Cylinder Pillow Roll Pillow



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16

***Positioning Assistive Devices (4)**

Bed Cradle



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17

***Assistive Eating Devices (1)**

Plate with raised lip and Spoon



Divided plate, Spoon, and cup



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18

***Assistive Eating Devices (2)**

Drinking cup with flexible straw



Curved Handle Spoon



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***Assistive Dressing Devices (1)**

Button Fastener



Zipper Pull and Shirt and Jacket Pull



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***Assistive Dressing Devices (2)**

Sock and Stocking Aid



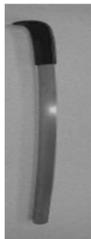
Sock and Stocking Aid



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***Assistive Dressing Devices (3)**

Long-Handled Shoe Horn



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22

***Assistive Hygiene Devices (1)**

Electric Toothbrush

Denture Toothbrush



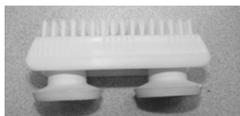
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23

***Assistive Hygiene Devices (2)**

Fingernail Cleaner

Fingernail Cleaner

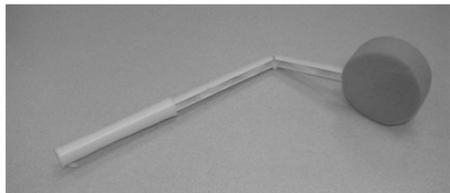


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24

***Assistive Hygiene Devices (3)**

Long-Handled Sponge



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25

***Assistive Hygiene Devices (4)**

- Device used by resident's with diabetes to examine heels for abrasions or sores
- Device used by resident's with diabetes to wash feet



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26

***Assisting Reaching Tool Device**

Assistive Reaching Tool



Assistive Reaching Tool



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27

***Adaptive Devices
Recording and Reporting**

- Activity attempted?
- Assistive devices used?
- Success?
- Increase/decrease in ability?
- Changes in attitude or motivation?
- Changes in health?

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***Basic Restorative Care
Things To Always Remember**

- Sometimes you may think it is easier and quicker to.....
- Independence helps with the resident's self-esteem and speeds up recovery

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***Bowel and Bladder Training
Importance**

- Measures taken to restore function of urination and defecation by resident, with ultimate goal of continence
- Incontinence is embarrassing
- Will limit lifestyle
- Odors can cause family to shun
- Infections can develop
- May find it difficult to discuss

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***Bowel and Bladder Training
Nurse Aide's Role (1)**

- Nurse aide is a valued member of the health care team and is involved with bowel and bladder training plan
- Support explanation by doctor or nurse of bowel training schedule
- Keep an accurate record of
- Answer call light promptly
- Do not rush resident

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***Bowel and Bladder Training
Nurse Aide's Role (2)**

- Be positive
- Don't scold
- Assist to bathroom
- Provide privacy
- Provide encouragement
- Offer and encourage fluids

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***Bowel and Bladder Training
Nurse Aide's Role (3)**

- Encourage fiber foods – fruits, vegetables, breads, and cereals
- Encourage regular exercise
- Teach good peri-care
- Keep bedding clean and odor-free

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***Bowel and Bladder Training
Nurse Aide's Role (4)**

- Attempts to void scheduled and resident encouraged to void:
 - When resident awakens
 - One hour before meals
 - Every two hours between meals
 - Before going to bed
 - During night as needed

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***Bowel and Bladder Training
Nurse Aide's Role (5)**

- Assist to void by:
 - Running water in the sink
 - Have resident lean forward, putting pressure on the bladder
 - Put resident's hands in warm water
 - Offer fluids to drink
 - Pour warm water over the resident's perineum

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***Bowel and Bladder Training
Nurse Aide's Role (6)**

- During bowel training, enemas, laxatives, suppositories, and stool softeners may be ordered
- Enemas involve the introduction of fluid into the colon to eliminate stool or feces or to stimulate bowel activity
 - Enemas will be ordered by the doctor
 - Common varieties of enemas include: tap water, saline, and soapsuds
 - Usually contains approximately 500 ml of the ordered fluid

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***Bowel and Bladder Training
Points to Remember**

- Can be accomplished
- Must be consistent and follow plan
- Recording and reporting vital to success
- Success can take 8 to 10 weeks
