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

Module G
Basic Restorative Care

July 2019
Objectives

• Explain the role of the nurse aide in basic restorative care

• Describe the processes involved with bowel and bladder training
Basic Restorative Care

Care provided after rehabilitation when the resident’s highest possible functioning has been restored following illness/injury
Basic Restorative Care – Importance

- Maintain/improve abilities
- Prevent further complications
- Aim toward independence
- Team effort
- Assist individual to accept or adapt
Basic Restorative Care – Nurse Aide’s Role (1)

- Recognize loss of independence
- Encourage resident and support family
- Be sensitive to resident’s needs
*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
*Basic Restorative Care – Nurse Aide’s Role (3)

- Review skills
- Focus on small tasks and accomplishments
- Recognize and address setbacks
*Basic Restorative Care – Nurse Aide’s Role (4)

- Give resident control
- Encourage choice
- Encourage selections of appropriate clothing
- Show patience
*Basic Restorative Care – Nurse Aide’s Role (5)

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

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

• Special equipment that helps a disabled or ill resident with movement
*Assistive (Adaptive) Devices

• Special equipment that helps a disabled or ill resident perform activities of daily living (ADLs)
• Promotes independence
• Successful use depends on…
*Positioning Assistive Devices (1)

Pillows are used to position a resident in a side lying position
*Positioning Assistive Devices (2)

Abduction Pillow

Wedge Pillow
*Positioning Assistive Devices (3)

Small Cylinder Neck Roll Pillow

Long Cylinder Pillow
*Positioning Assistive Devices (4)

Bed Cradle
*Assistive Eating Devices (1)

Plate with raised lip and Spoon

Divided plate, Spoon, and cup
*Assistive Eating Devices (2)

Drinking cup with flexible straw

Curved Handle Spoon
*Assistive Dressing Devices (1)

Button Fastener

Zipper Pull and Shirt and Jacket Pull
*Assistive Dressing Devices (2)

Sock and Stocking Aid

Sock and Stocking Aid
*Assistive Dressing Devices (3)

Long-Handled Shoe Horn
*Assistive Hygiene Devices (1)

Electric Toothbrush  Denture Toothbrush
*Assistive Hygiene Devices (2)

Fingernail Cleaner  
Fingernail Cleaner
*Assistive Hygiene Devices (3)

Long-Handled Sponge
**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
*Assisting Reaching Tool Device

Assistive Reaching Tool

Assistive Reaching Tool
*Adaptive Devices
Recording and Reporting

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