

The Bath Chair

(or swivel bather)

A bath chair is used to shower a person in a sitting position by providing a stable seat over the bath. Following these instructions will help you to assist bathing someone safely.

Safety Warning

- Do not assist with showering if you feel unsafe or unsure how to proceed on your own. Contact your nurse instead.
- Do not use if the bath chair appears damaged in any way.
- Do not allow the person to use the bath chair by themselves. They need help from a carer or a nurse.
- Only use the bath chair over the bath. Do not use it over a shower.
- Do not use the bath chair over baths that have narrow edges or have unusual shapes.
- Always be aware of slippery wet surfaces before moving.
- Using a non-slip mat in the bath tub is recommended.

Before you start

- The bath chair should have been assembled over the bath by your nurse or occupational therapist.
- The bath chair is assembled in two pieces – the base and the seat. First, check the base of the chair is securely fixed to the bath tub before each use. Ensure it is fastened against both inside edges of the bath tub using the wing-screws.
- Then check the bath chair is securely fixed to its base. The chair slides firmly into the base.
- Ensure the chair is positioned away from taps to enable legs to swing into the bath.
- A hand-held shower-hose should be used with the bath chair. The hose can be plugged into the bath spout.



Lock chair by lowering lever-lock before sitting.



Lower onto chair using chair handles. Lift lever-lock to swivel into bath.



Lift legs into bath and lock chair back into position. Sit in chair during bathing at all times.

Further information

Contact your nurse or health professional if you need further assistance.
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Sitting down on the bath chair

- 1 Before assisting someone onto the chair, swivel the seat so that the front of the seat is facing the person. Lift lever-lock on side of the chair to do this.
- 2 Make sure that the chair is locked into position before the person sits on it. Check the lever-lock is lowered and the seat does not swing freely.
- 3 Help the person to back up towards the chair and grab the chair by the handles before lowering themselves down onto the seat. Lift the lever-lock and then start to swivel the chair slowly towards the inside of the bath.
- 4 Encourage the person to lift their legs into the bath but offer to help if required. Make sure you don't strain your back. Bend at the knees to help lift the person's legs one at a time.
- 5 When the chair is in position ensure that it locks into position.
- 6 Ensure the person keeps sitting on the chair during bathing.

When bathing has finished

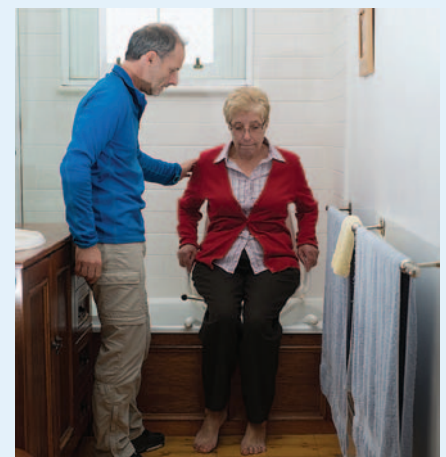
- 1 When finished bathing unlock the chair by pushing up on lever and turn the chair back towards the outside edge of the bath.
- 2 Assist the person to lift their legs out of the bath if required, helping to lift one leg at a time.
- 3 Make sure the chair locks back into position before assisting the person to get up.
- 4 Assist the person to dry-off completely (including bottom of feet).
- 5 Ensure the floor is dry before the person gets up. Using a non-slip mat on the floor beneath the person's feet is recommended.
- 6 Encourage the person to gently lift from the bath chair using their legs and pushing up from the arms of the chair.
- 7 Never let the person you are assisting hold or hug you around your neck while you are helping them.
- 8 Clean the bath chair with soapy water after each use.



When finished lift lever-lock and swivel back.



Lift legs out of bath. Lock back into position.



Use handles to get up from chair.

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How to use a Bath Board



A bath board makes bathing safer by allowing users to sit over a bath without stepping over the ledge. Following these instructions will assist you to bathe someone safely.

Safety Warning

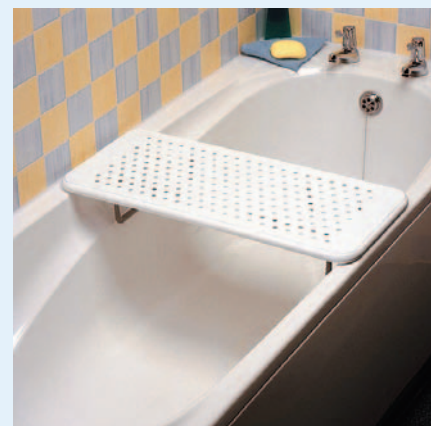
- Do not assist with bathing if you feel unsafe or unsure how to proceed on your own. Contact your nurse instead.
- Check the bath board to make sure that it is not damaged in any way.
- Do not let the person use the bath board without help from a carer or nurse.
- Grab rails should be fitted within easy reach of bath tub to assist with lowering and raising from bath. Speak to your nurse if these have not been installed.
- A bath board should only be used over the bath. It cannot be used over a shower recess.
- Do not use on baths that have narrow edges or have unusual shapes.
- Always be aware of slippery wet surfaces before moving.
- Using a non-slip mat in the bath tub is recommended.

Before you start

- Put the bath board securely in place by:
 - a. Moving the sliding pieces under the board to firmly reach the inside edges of the bath and tighten screws securely.
 - b. If your bath board has a handle, it should be positioned at the bath edge furthest away from you.
- A hand-held shower hose should be used whilst bathing. There are hoses available that fit onto the bath spout. Speak with your nurse or occupational therapist for more information.



Place the bath board on the bath firmly.



Further information

Contact your nurse or health professional if you need further assistance.
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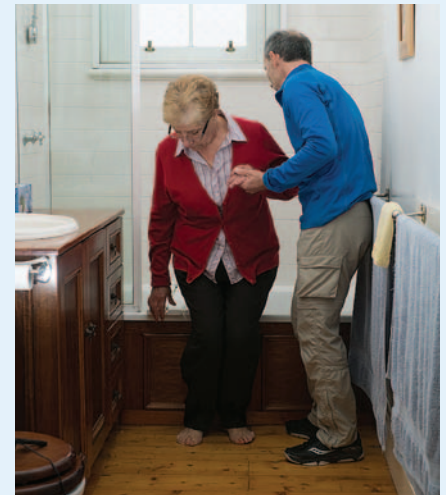
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Sitting down on the bath board

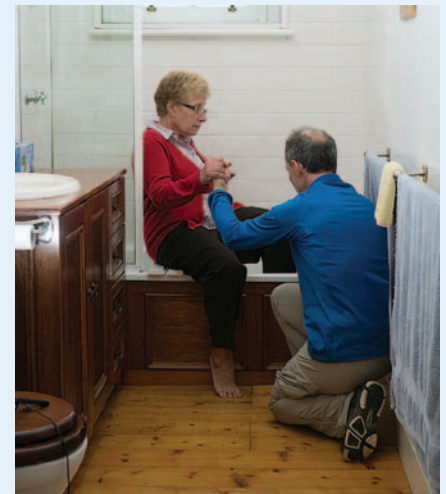
- 1 Help the person to sit down safely on the bath board.
- 2 Encourage the person to lift their legs into the bath but offer to help if required. Make sure you don't strain your back. Bend at the knees to help lift the person's legs one at a time.
- 3 The person should rotate slowly as they raise their legs into the bath, without twisting the upper body, to avoid injury.
- 4 Ensure the person remains sitting on the board while having their bath.
- 5 Use the hand-held shower-hose to rinse them off.

When bathing has finished

- 1 Ask the person to move towards the side of the bath they are to leave from.
- 2 Ask them to hold on to the edge of the bath for support, if required.
- 3 Encourage the person to lift their legs out of the bath but offer to help if required.
- 4 Make sure you don't strain your back. Bend at the knees to help lift the person's legs one at a time.
- 5 Have the person swivel around so their feet are squarely on the floor.
- 6 Ensure there is a non-slip mat for the person to stand on.
- 7 Assist the person to dry-off completely (including bottom of feet).
- 8 Mop up any excess water on floor.
- 9 Assist the person to gently lift from the bath board holding on to any grab rails within reach (or the edge of the bath).
- 10 Never let the person you are assisting hold or hug you around your neck while you are helping them.
- 11 Regularly wipe the bath board and clean with soapy water.



Offer gentle assistance to help the person sit on the bath board.



The person should rotate slowly as they raise their legs into the bath.

How to use a Commode or Toilet Safety Frame

These devices are used when it is not possible to walk to, or safely sit on a toilet. Following these instructions will help you assist someone to safely use a bedside toilet (commode) or a toilet safety frame.

Before you start

- Make sure that the commode is not damaged in any way.
- Adjust the seat to the right height for the person. Generally feet should be flat on the ground, with knees just above hip height whilst seated. Extra height may be needed following hip surgery.
- Lift up the commode lid.
- If the frame is to be used over an existing toilet, remove any pan.
- Lift up the toilet seat and put the toilet frame over it.
- You may need to remove the existing toilet seat to allow the over toilet frame to be positioned as close to the toilet bowl as possible.
- Ensure toilet paper is within easy reach.

Using the commode or toilet frame

- 1 Help the person to stand at the front of the seat, and move into a position where they can feel the toilet seat behind their knees.
- 2 Have them put both hands on the armrests, with even pressure on both sides to prevent tipping.
- 3 Encourage them to bend slightly forward at the waist, slowly lowering themselves onto the seat.
- 4 If required, you could put your hand on the person's lower back and give gentle forward pressure.



Feel the front of commode at the back of your knees and hold onto the armrests with both hands.



Bend forward at your waist and slowly lower onto commode.

Lift up from commode using armrests and pushing up with legs.

Further information

Contact your nurse or health professional if you need further assistance.
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When they have finished

- 1** Encourage the person to have both hands on the armrests and to lift their body weight by using their legs and pushing up with their arms on the armrests.
- 2** Have them use even pressure on both sides to prevent tipping. If required, you could put your hand on the persons lower back and give gentle forward pressure. Do not pull on their arms.
- 3** Never let the person you are assisting hold or hug you around your neck while you are helping them.
- 4** If the commode/toilet frame was used with its own pan, close the cover and carry the pan to the toilet to dispose the contents.
- 5** Regularly wipe over the frame, especially at the hinges under the seat, with general bathroom cleaning products. Replace if rust is found.



Encourage the person to lift up by using their legs and pushing up with their arms on the armrests.

How to use a Shower Stool

A shower stool is used for people who have difficulty standing in the shower. Following these instructions will help you assist someone to use a shower stool safely whilst they are showering.



Before you start

- Do not assist with showering if you feel unsafe or unsure how to proceed on your own. Contact your nurse instead.
- Do not use the shower stool if you have a shower over a bath. Please ask your nurse about the recommended equipment in this case.
- Check the shower stool to make sure it is not damaged in any way.
- Prepare for a wet and slippery surface in the shower by wearing appropriate non-slip shoes.
- Adjust the height of the stool. Correct height is having the person's feet flat on the ground, with knees just below hip height.
- Put the shower stool in the shower recess. Each leg of the stool can be adjusted individually for uneven floor surfaces.
- Ensure the seat is level and does not rock.
- Using a non-slip bath mat in the shower beside the shower stool for the person's feet is recommended.

Using the shower stool

- 1 Help the person to stand at the front of the stool, and move into a position where they can feel the stool behind their knees.
- 2 Have the person put both hands on the armrests, with even pressure on both sides, to prevent tipping.
- 3 Ask them to bend slightly forward at the waist, and slowly lower themselves onto the seat. Both of their feet should always be able to touch the floor.



Feel the front of the chair at the back of your knees and hold onto both armrests. Bend forward at your waist and slowly lower onto the chair.

Further information

Contact your nurse or health professional if you need further assistance.
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When showering is completed

- 1 Assist the person to dry-off completely including bottom of feet.
- 2 Mop up any excess water on the floor before moving the person.
- 3 Gently help the person to lift from the stool – encouraging use of their leg muscles. Ask them to support their weight on the armrests (with even pressure on both sides to prevent tipping).
- 4 Gentle assistance can be provided by placing your arm around their waist to stabilise them.
- 5 Never let the person hold or hug you around your neck as you may injure your back or both become unstable.
- 6 Regularly wipe over the shower stool using soap and water. Replace if rust is found.



Bend forward at your waist and slowly lower onto the chair.

Be careful of wet and slippery floor surfaces when lifting from chair.

Lift up from the chair using armrests and pushing up with legs.

How to use a Single-handle Bed Pole

A bed pole helps someone move safely from lying to sitting on the edge of the bed and from sitting to a standing position. Following these instructions will help you assist someone to use a bed pole.

Safety Warning

Bed poles are **not safe** to be used if the person using the pole:

- only has a light mattress (e.g. hospital bed, foam mattress or waterbed) as there needs to be enough weight to keep the bed pole secure
- has a bed with an elevating bed-head (e.g. hospital bed)
- has a history of falling from bed
- has a bed that has been lowered to the ground
- has difficulty remembering or understanding instructions
- is weak or unsteady on their feet
- is on medication that may cause weakness or confusion.

Note: if there is a decline in the health of the person, using a bed pole may no longer be safe. Contact your nurse or health professional.

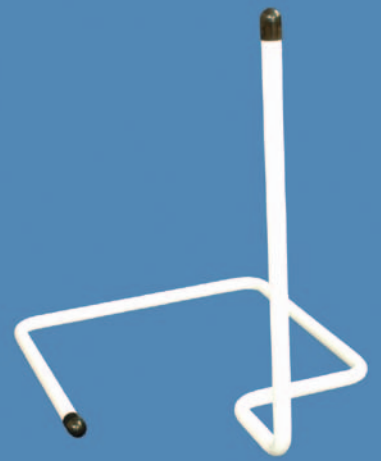
Before you start

- Always check with your nurse or occupational therapist before using a bed pole.
- The bed pole is placed in-between the mattress and the bed base.
- There should be no gaps between the mattress and the pole.
- Always have someone help you to lift the mattress when positioning the bed pole under the mattress.
- If the bed has wooden slats, the pole may need to be taped to the slats.
- Place the pole at the side of the bed approximately at elbow level when lying down.

Further information

Contact your nurse or occupational therapist if you require further assistance.

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Place bed pole in between mattress and bed-base at approximately the person's elbow when lying in bed.



Make sure there is no gap between bed pole and mattress.

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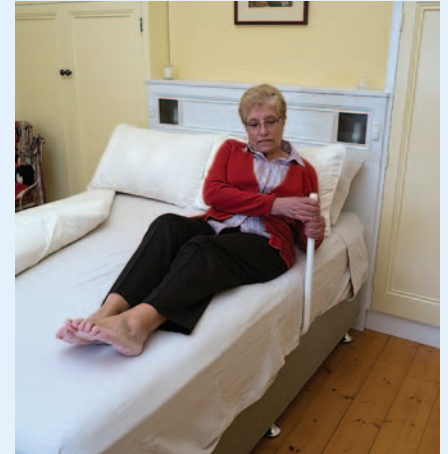
- Adjust the position of the bed pole after trying it out for the first time if needed.
- Check each day that the bed pole is in the correct position with the pole directly upright and against the side of the mattress.

Moving from lying to sitting

- 1 The person reaches for the bed pole.
- 2 The person pulls themselves up using both hands from a lying to a sitting position.

Moving from sitting to lying

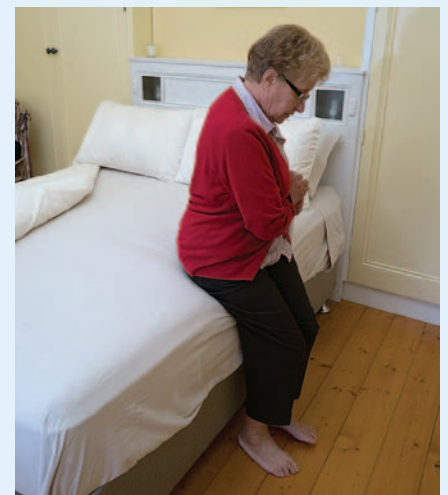
- 1 Have the person sit beside the bed pole and grab hold of it.
- 2 The person uses the bed pole to lower/lever into a lying position.
- 3 If a person has difficulty lifting their legs up onto the bed, you may help them to lift their legs.
- 4 Ensure that you lift one of their legs at a time.
- 5 Make sure that you do not strain your back by squatting (bending at the knees) to lift their legs.
- 6 Never let the person you are assisting hold or hug you around your neck while you are helping them.
- 7 If you have any difficulty or concerns contact your nurse.



Reach for bed pole with both hands to lift from bed.



When sitting up, use bed pole to swivel to the edge of bed.



Place feet firmly on the floor before getting up.

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How to use an Oxygen Concentrator

An oxygen concentrator can assist someone who has breathing difficulties. Following these instructions will help you safely assist someone using a concentrator at home or away from home.

Safety Warning

- **Concentrated oxygen can cause fires if near flames, a heat source or sparks.**
- Keep the oxygen at least 3 metres from any open flame or heat source, such as candles, a gas stove, or from anything that could cause a spark.
- Do not smoke or let anyone else smoke near the oxygen equipment.
- Avoid using anything flammable near the oxygen, including petrol, cleaning fluid, and aerosol cans or sprays such as fresheners or hairspray.
- Check that all electrical equipment in the vicinity of the oxygen is properly grounded (earthed).
- Avoid using electrical appliances such as hairdryers and razors and clockwork toys while oxygen is in use.
- Do not allow alcoholic solutions, oil or grease to come into contact with oxygen supply devices. This includes petroleum jelly.
- Make sure you have smoke alarms in your house.
- Keep the oxygen equipment clean and dust free.
- As the oxygen concentrator becomes hot when in use, locate it in a well-ventilated area, away from curtains or drapes.
- Have your oxygen concentrator inspected and serviced regularly according to the supplier's instructions.

Before you start

- Check that the equipment, including the cord and plugs, is not damaged in any way.
- Check that the nasal tubes are not blocked and that the inlet air filter is clean. The filter needs to be checked daily and cleaned weekly with warm water and squeezed dry.

Further information

Contact your nurse or health professional if you need further assistance.
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Insert the nose inlets of tube (cannula) into nostrils.



Loop the tubes over the ears and bring down under the chin.

- Portable machines can be powered through:
 - a. A standard power supply.
 - b. A car – check you have a suitable adaptor.
 - c. Batteries – check there is an adequate supply of charged batteries.
- Make sure you understand what the correct flow rates should be and remember how to operate the machine. If you notice any problems during these steps – contact your nurse or health professional as soon as possible.
- When used inside check the concentrator is:
 - a. Close enough to common living areas so that the oxygen tubing will reach.
 - b. Sitting at least 20cm away from the wall and free of any curtains.
 - c. Placed on a firm surface and not covered by anything.
 - d. As far away from heaters as possible.
- Remove anything that could cause sparks or flames from the immediate area. This includes matches, cigarettes, electrical equipment e.g. electric razor, clockwork toys, oil or grease.
- Display a 'No Smoking' sign on the cylinder, or near the person using it.

Using the oxygen concentrator

- 1 First lubricate the cannula (the tube that goes into the nostrils) with a water-based lubricant, then insert into nostrils.
- 2 Next loop the tubes from cannula over their ears and bring down under their chin.
- 3 Adjust the clasp to maintain the position of the cannula at the nostrils. Change the nasal prongs as required.
- 4 Turn on the machine. It will signal a long beep at first and will take up to five minutes to get oxygen up to 95 %.
- 5 The concentrator can be left on safely for many hours but should be turned off if the person needs to move near flammable objects such as heaters.

After use

- The pump must be serviced every 6 to 12 months to make sure it is producing the right pressures.
- The filter needs to be checked daily and cleaned weekly with warm water and squeezed dry.

Reference: Royal Melbourne Hospital Home oxygen information, Version 10th Feb 2006

Frequently asked questions

Who moves the concentrator if the user moves from one place to another?

Family or friends.

What can I do for sore ears because of the tubing?

There are products available to pad the tubing – talk to your health professional.

Can a mask be attached to the concentrator?

Only if advised by your health professional.

What is the best treatment for a dry nose?

Water-based gels – ask your pharmacist for advice. Don't use anything unless you have checked that they are safe.

What do I do if the person's nose requiring oxygen is blocked?

- a. Use a water-based gel as described above.
- b. Adhesive strips will often keep nostrils open without need for medication.
- c. Contact your doctor or nurse if there are continual problems.

How to use a Portable Nebuliser

A nebuliser is used by people who are struggling to breathe, have mucus or can't use inhalers. It converts liquid medication into a fine mist that can then be inhaled through a mask or mouthpiece. Following these instructions will help you assist someone to safely use this device.

Before you start

- Check that the equipment, including the cord and plugs, is not damaged in any way.
- Check that the equipment is clean and that there is no dirt or any cracks in the tubing.
- Make sure you understand what medication should be added and remember how to operate the machine.
- If you notice any problems during these steps – contact your nurse as soon as possible.

Using the portable nebuliser

- 1 Put the nebuliser on a hard surface.
- 2 Attach one end of the tubing to the air outlet.
- 3 Draw up the correct dose of medication as directed by the doctor or nurse.
- 4 Remove top from the pre-mixed nebula and squirt directly into the 'nebuliser well'.
Note: to avoid spilling contents, do not hold the nebula too tightly and do not squeeze when twisting off the top.
- 5 Put medication in the lower chamber of the nebuliser and close the lid.
- 6 Take the person's face mask and put it over their nose and mouth. They should then breathe normally.
- 7 Connect the pump to the power switch and switch 'on'.



Photo Credits: Wikihow

Further information

Contact your nurse or health professional if you need further assistance.
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When you are finished

It is important to clean the nebuliser after each use as the salt solutions can crystallise or block the outlets, leading to dosage problems in the future.

- 1** Rinse the nebuliser bowl in warm water after every use.
- 2** After rinsing the bowl – don't wipe the bowl dry. Either drip dry, or use the nebuliser to blow dry. To blow dry: connect the tubing to the nebuliser, switch on the nebuliser, then blow air through the tubes for a few seconds.
- 3** Wash the bowl with dishwashing liquid and water once a week.
- 4** The filter needs to be checked daily and cleaned weekly with warm water and squeezed dry.
- 5** The pump must be serviced every 6 to 12 months to make sure it is producing the right pressure.
- 6** The tubing and the mask or mouthpiece must be replaced frequently. Replace the tubing if any dirt is seen in it, or cracks appear.
- 7** Do not keep tubing and bowl in direct sunlight.

Helping a person get into and out of a car safely

Following these instructions will help you safely assist someone who has difficulty getting into and out of a car.

Before you start

- This information is for people who are still fairly steady on their feet but may require limited assistance.
- If the person has very limited mobility, is unsteady on their feet, or is on medication that affects their balance, do not attempt to assist them on your own.

Getting into a car

- 1 Push the car seat back as far as possible.
- 2 Open the car door fully and ensure that it cannot swing back.
- 3 Open the car door window. (The window ledge may be used to help support the person when standing.)
- 4 Bring the wheelchair or walking aid as close as possible to the car and put the brakes on.
- 5 Swing back or remove wheelchair footplates if getting up from a wheelchair.
- 6 Never let the person you are assisting hold or hug you around your neck while you are moving them.
- 7 Position your body so your backside is against the inside of the door to stop it from swinging shut.
- 8 Assist the person to stand by having them move forward from their seat and push-up using the wheelchair armrests.
- 9 Lightly support them to turn round so that the backs of their legs are touching the car seat.
- 10 Help them to gently lower themselves onto the seat. Protect their head while they do this by holding your hand above it.
- 11 Encourage the person to swing and lift their legs into the car. **If they need assistance to do this** lift one leg at a time making sure you bend your knees.



Use your body to stop the door from slamming shut.



Lightly support the person to turn around.



Slowly bring the person's legs into the car.

Further information

Contact your nurse or health professional if you need further assistance.
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Getting out of a car

- 1** Push the car seat back as far as possible and take away any cushions.
- 2** Open the car door window. (The window ledge may be used to help support the person when standing.)
- 3** Bring the wheelchair or walking aid as close as possible to the car and put the brakes on.
- 4** Ask the person in the car to rotate their body so that they are facing out of the car. They need to slowly swivel on their bottom and bring their legs around outside the car.
- 5** If helping to lift their legs, lift one leg at a time. Make sure you do not strain your back by bending at the knees to do this.
- 6** Position your body against the back of the door so it does not swing shut.
- 7** If required the person can hold on to the window ledge to support themselves.
- 8** Ensure both of the person's feet are firmly on the ground before they lift from the seat.
- 9** Never let the person you are assisting hold or hug you around your neck while you are helping to move them.
- 10** Ask the person to help lift themselves by using their legs and to support themselves on the window ledge to a standing position.
- 11** Protect their head while they lift by holding your hand above it.
- 12** Help the person to move towards the walking aid or wheelchair. If using a wheelchair, assist them to swivel around so the back of their legs touch the edge of the chair.
- 13** Have the person put their hands firmly on the armrests of the wheelchair before slowly lowering themselves onto the chair.
- 14** Lower footrests into place or re-attach them. Help the person to position their feet securely on the footrests.



Push back car seat. Open door fully.



Person swivels so their legs are outside the car.



Lightly support the person to turn around.

Helping a person to walk safely

Following these instructions will help you assist someone to walk safely with or without a walking aid.



Safety Warning

- If the person has very limited mobility, is unsteady on their feet, or is on medication that affects their balance, do not attempt to assist them on your own.

Before you start

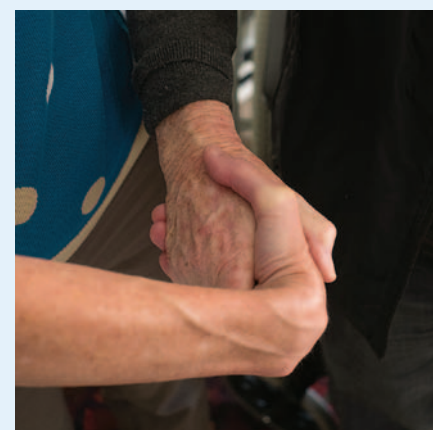
- Make sure that the walking path is free of anything that could be tripped over. This includes loose rugs or mats, telephone or electrical cords, garden hoses or bushes.
- Check shoes are appropriate for walking and fitted properly.
- Be aware of any long or loose clothing that the person may trip on.
- Regularly check and replace stoppers on walking sticks and frames.
- Regularly check the breaks on 4-wheeled walkers as they often come loose and need to be tightened.
- Do not proceed with the walk if the person seems to be very unstable. Tell your health professional as soon as possible.
- Never let the person hold you around the neck whilst walking.

Walking safely

- 1 Look out for any slippery or uneven floor surfaces. Point these out to the person walking or take a different path. Consider any problems they may have with seeing.
- 2 If the person is walking with a walking stick or aid:
 - Make sure the aid is used on the person's stronger side.
 - Stand on the person's other side and walk closely with them.
- 3 If there is no walking stick or aid:
 - Always stand on the persons' stronger side. Put one of their hands in yours and support their elbow with your other hand.



Stand on a person's stronger side if not using a walking aid. If an aid is being used, stand on their weaker side. Place one hand on their lower back.



Take their other hand in your hand.

Further information

Contact your nurse or health professional if you need further assistance.
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- 4 Alternatively, you could put one hand at the back of the person, holding lightly onto their trousers or waist to support them.
- 5 Never try to stop a fall as you may injure yourself rather than helping the person.
- 6 Provide light assistance only. Do not pull, push or hold the person.
- 7 Take regular breaks on your walk.

How to push a person in a wheelchair

Following these instructions will help you safely move someone onto a wheelchair and push them.

Safety Warning

- If the person has very limited mobility, is unsteady on their feet, or is on medication that affects their balance, do not attempt to assist them on your own.

Before you start

- Wheelchairs have a weight limit that must not be exceeded. Ask your nurse if you have any concerns.
- If the wheelchair needs to be unfolded, do this by pulling apart the armrests and pushing downwards on the centre of the seat. You may need to re-attach the foot plates on the side pins.
- Lifting a wheelchair incorrectly can injure your back. Speak with your nurse about how to lift it safely if required.
- Make sure that the wheelchair is in good working order, with adequate tyre pressure. If the tyre pressure is low, the breaks will not work properly.
- Wheelchairs should be as comfortable as possible for the user and suitable for their function and environment. Some people may require a cushion.
- Make sure that you and the person to be pushed in the wheelchair are wearing shoes that are properly fitted and will not slip on the floor.



If the wheelchair needs to be unfolded, do this by pulling apart the armrests and pushing downwards on the centre of the seat. You may need to re-attach the foot plates on the side pins.

Further information

Contact your nurse or health professional if you need further assistance.
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Helping someone into a wheelchair

- 1 Let the person know what you will be doing before each step.
- 2 Put the wheelchair as close as possible to one side of the person.
- 3 Securely apply the brakes of the wheelchair and raise or remove the wheelchair footrests.
- 4 Help the person to move towards the wheelchair, swivelling around so the back of their legs touch the edge of the chair.
- 5 Have the person put their hands firmly on the arm rests of the wheelchair before slowly lowering themselves onto the chair.
Note: never let the person you are assisting hold or hug you around your neck.
- 6 Gently support them by placing your hand at their back and holding onto any belt. Otherwise, take one of their hands in your hand and their elbow in your other hand.
- 7 Lower footrests into place or re-attach them.
- 8 Help the person to position their feet securely on the footrests.

Tips for pushing safely

- Plan your route by considering potential obstacles. Is it possible to avoid narrow doors and corridors, steps, low branches, slippery floors and steep footpaths?
- When pushing, be close to the wheelchair, have a straight back and push with your whole body-weight and leg muscles. Keep your arms near your body and your elbows bent.
- When stopped, ensure that the brakes are on at all times.
- To fully apply brakes: push them until they 'click' on.



Bend forward at your waist and slowly lower onto the chair.



Feel the front of chair at the back of your knees and grab onto the armrests evenly with each hand.



Place feet firmly on the footrests.

Pushing the wheelchair up onto a footpath or kerb

- 1 Look for a ramp, driveway or other alternative.
If there is no option stand close to chair at the back, firmly holding the handles.
- 2 Face the wheelchair as close as possible to kerb.
- 3 Put your foot on the tipping or tilt bar (the lower horizontal bar between the back wheels).
- 4 Tip the chair back using the tipping bar until balanced on rear wheels.
- 5 Ensure you keep your back straight using your arm and leg muscles to balance chair.
- 6 Push steadily and firmly forward until the front wheels are on the pavement and the back wheels ride up.
- 7 Roll the wheelchair up kerb.
- 8 Never attempt to lift the rear wheels off the ground.

Pushing the wheelchair down a footpath or kerb

- 1 Reverse the wheelchair to edge of kerb.
- 2 Carefully step down from the kerb onto the road (or lower surface) while holding onto the chair.
- 3 Let the person know that the chair will dip and roll down.
- 4 Gently lower the wheels, rolling slowly down the kerb, making sure that both rear wheels hit the ground together.
- 5 Use the tipping bars (lower horizontal bar between the back wheels) to raise the front wheels and roll the wheelchair back on its rear wheels.
- 6 Ensure you keep your back straight using your arm and leg muscles to tip chair.
- 7 Move backwards until the front wheels clear the kerb and gently lower down onto the road.



Face the wheelchair towards kerb.



Tip chair back using tipping bar and balance on rear wheels.



Move slowly forward and lower front wheels onto the footpath.



Push steadily and firmly forward so back wheels ride up. Do not lift chair.

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This information has been designed as a guide only and must not be relied on as an alternative to medical advice from a doctor or other healthcare professional. If you have questions about any medical matter you should consult your doctor or other healthcare professional as soon as possible. All persons involved in producing this document will not be held responsible for any adverse event arising from the use of all or part of this information.

Pushing the wheelchair down a slope

- 1 Check for any obstacles before moving.
- 2 If the slope is very steep, find someone to assist you.
- 3 Go down backwards slowly using your leg muscles and body weight to slow the chair down.
- 4 Try not to twist to look behind you whilst moving.

Folding the wheelchair up again

- 1 To fold the wheelchair, sharply pull up the seat of the wheel chair in the centre. On some wheelchairs the wheels can be detached by pushing on the wheel-releasing button in the centre of the wheel.
- 2 Flip up the footrests and swing away.
- 3 Lifting a wheelchair incorrectly can injure your back. Speak with your nurse about how to lift it safely if required.

How to prevent bed sores

A bed sore is an area of skin that has been damaged due to pressure or rubbing. They are often found on bony parts of the body. Following these instructions will help you to avoid or manage these conditions.



Looking after your skin

- Check your skin daily.
- Look for red/purple or blue skin, hard, warm or shiny areas, blisters or swelling, dryness or dry patches, cracks, calluses or wrinkles.
- Ask for advice from your palliative care nurse if any of the above signs are found.
- Try to keep your skin clean and dry.
- Use a moisturising lotion to prevent your skin from drying out.
- Wash with warm water and a mild soap.
- Avoid massaging your skin over bony parts of the body.
- Keep toenails trimmed with no sharp edges.
- Wear comfortable shoes and socks or stockings.
- Eating a balanced diet can also help your skin.

When in bed

- Make sure that your bed is clean and comfortable.
- Try to minimise folds or wrinkles in the sheets.
- A special type of mattress may be suitable for you. Contact your palliative care nurse for advice.
- If possible, change your position every half hour unless advised by your nurse.
- Being tilted slightly to the side and supported with pillows is often a good position.
- Bending the knees a little with a pillow in between the knees and ankles may also assist with comfort and bed sores.
- If sitting up in bed, only sit in this position for half an hour, unless advised by a health professional.
- Wear loose, long-sleeved clothing and socks in bed.

Further information

Contact your nurse if you require further assistance. For example, some health services have special wound care nurses that may help.
www.caresearch.com.au

Australian Wound Management Association
www.awma.com.au

When sitting in a chair

- If possible, sit up straight with your back well supported.
- Support your feet so that your knees are level with your hips.
- Lift your bottom (with help if needed) every 15 minutes for 15 seconds. Do this by pushing up off the chair using the armrests.
- Try not to lean to one side for any length of time.
- Lie down to rest during the day – this will give your bottom a break from the pressure.
- Please report any change in condition to your nurse or doctor.

Special note to carers

- As the person's condition changes during the last days or hours of life, only move your loved one if they are obviously uncomfortable. This can be seen in facial grimacing, frowning, tensing of muscles and agitation.



What to do when death has occurred?

The following information will help you identify what to do when the person you have been caring for dies at home.

Your feelings

- Even though the death of the person you have been caring for was probably expected, it can be a shock when it finally occurs.
- You will most likely experience a mix of different emotions ranging from grief to relief. Sometimes you might feel numb.
- There is no right or wrong way to feel.
- It can be helpful to have someone with you during this time.
- With time, it may be helpful to read some information on grief so you know what to expect. (See resources listed alongside.)

What to do

- An expected death is not an emergency. There is no urgency to do anything quickly.
- You may like to take some time and space just to be with yourself or with the person who has died. You do not need to contact anybody immediately unless you feel you need to.
- Some people find it frightening to be with a person who has died so you might want someone to be with you at this time.
- The person who has died can stay at home for a number of days if that is what you want. Discuss this with your palliative care nurse.
- Consider inviting other family members who want to say goodbye to be with the person.
- You might like someone else in the family to call family members and friends who need to be told.

Verifying the death

- The death will need to be verified by a doctor. When you are ready, call the person's doctor. It is OK to wait until the morning if the death occurs at night.
- If a palliative care service has been involved please let them know that the person has died. It is OK to wait until the morning.
- If you are concerned and unable to contact the doctor or the palliative care service, call your local hospital.

Further information

Your palliative care service is available to provide help and support during this time. Contact your GP if you are concerned about what you are feeling.

LifeLine 13 11 14

GriefLine 1300 845 745

Australian Centre for
Grief and Bereavement
www.grief.org.au

Palliative Care Australia
www.palliativecare.org.au

Palliative Care Victoria
www.pallcarevic.asn.au



Rituals

- There may be religious, spiritual or cultural rituals that need to be observed at this time. You may wish to perform these at home.
- If you have a minister of religion, you may wish to invite them to visit before your loved one is transferred to the funeral home.
- Contact your funeral director when you are ready to speak to them about what happens next.

How will you know death has occurred?

- No breathing (the person's chest does not move for 2 minutes).
- No heartbeat (no pulse can be felt for 2 minutes).
- The person does not respond to shaking or shouting.
- The eyelids may be slightly open and pupils bigger than usual.
- The eyes are fixed on one spot.
- The jaw is relaxed and mouth slightly open.
- Loss of control of bowel and bladder sometimes occurs.

The funeral

- Some families like to hold funerals as soon as possible and others like to wait.
- A well considered funeral can be an important part of dealing with grief and a chance to reflect on and discuss with your family how you would best like to honour the person's life.
- Children also need an opportunity to say goodbye and it is often recommended that they share in the funeral experience.
- A good funeral director will help you identify the funeral arrangements you would like to have included.

How to safely use a slide sheet to move someone in bed

This information will help you safely move someone in a bed (when they are unable to lift themselves) using a slide sheet. A slide sheet is a slippery piece of cloth used to reduce the effort required to move a person.

Before you start

- 1 Two people are needed to use a slide sheet. Don't start until there are two people in position, one standing on either side of the bed.
- 2 Check that the slide sheet is in good condition and is not thin, worn or dirty.
- 3 Talk to the person being moved about what help they will need to give (if possible).

Moving a person on a bed using a slide sheet

- 1 Fold the slide sheet in half. Make sure that the open ends are at the side of the bed that the person is going to be moved towards. If moving a person up the bed, the open ends of the slide sheet should be under the person's head and the fold under their thighs.
- 2 Put the slide sheet underneath the shoulders and hips of the person being moved. To do this:
 - Push the sheet underneath one side of the person.
 - Put the patient's arms across their chest and bend their far knee or put their far leg across their near leg.
 - Roll the person onto their side. Coordinate so that the far carer pushes hip and shoulder over, while the near carer guides knee and elbow. Both carers should use their body weight to roll the person, rather than their shoulders.
 - Roll the person onto their back again. Pull slide sheet gently through the other side of them and straighten.

Note: If the person is going to help to slide themselves over, make sure the slide sheet stays in place for them to slide onto.

Continued over page



Fold slide sheet in half and position the open ends of the sheet in the direction the person will move towards.

Tuck slide sheet under hips and shoulders as far as possible. Then roll the person onto their side and gently pull slide sheet under them.



Roll the person onto their back once again and straighten slide sheet.

Firmly grab the top layer of the slide sheet and coordinate a sliding motion (not lifting) towards the desired position using body weight and legs.

Further information

Contact your nurse or health professional if you need further assistance.
www.caresearch.com.au

www.lmrpcc.org.au

- 3** Once the slide sheet is in position to move the person, everyone should coordinate a sliding motion (not lifting) towards the desired position using their body weight and legs. To do this:
- Carers should stand with one foot in front of the other foot on opposite sides of the bed.
 - The person's legs should be moved first before moving the rest of the body.
 - One carer pulls the top layer of slide sheet while the other carer pushes the person's shoulder and hip, moving them across the bed.

What to do once the person has been moved

- 1** Remove the slide sheet by pushing the fold under the person, and pulling the bottom layer of the open sides in an upwards direction.

Note: Never leave slide sheets under a person unsupervised as this could create the risk of a fall.

- 2** The slide sheet can be washed on a gentle machine cycle regularly and hung out on the clothes horse or line. Do not put in the dryer.

Special note

- As the person's condition changes during the last hours – only move your loved one if they are obviously uncomfortable. This can be seen in facial grimacing, frowning, tensing of muscles and agitation.



Remove the slide sheet by pushing the fold under the person, and slowly pulling the bottom layer of the open sides in an upwards direction.

How to give an injection into a cannula

A cannula is a tube inserted under the skin by a doctor or a nurse to carry medication into a person's body. Following these instructions will help you give injections safely into a person's cannula.

Safety Warning

- You need to have been shown the correct injecting procedure by your nurse before proceeding, as there are different systems that can be used.
- Medications should already have been prepared (drawn up into a syringe) by your nurse until they are required to be injected.
- Do not assist with giving the injection if you feel unsure how to proceed on your own. Contact your nurse instead.

Before you start

- 1 **If you notice any redness, tenderness, swelling or leakage at the injection site, do not proceed and contact your nurse as soon as possible or after hours service.**
- 2 Wash your hands with soap and water and dry well.
- 3 Check the cannula and the tubing to ensure it isn't damaged or kinked in any way.
- 4 Check the syringes that have been prepared for you by your nurse or health professional. These should be labelled with the name of the medication and the date prepared. Check it is not out of date.
- 5 Make sure you are confident that you have the correct syringes.
- 6 Check the fluid in the syringe looking for:
 - Colour changes, cloudiness, or anything floating in the liquid.
 - If any of these are present, do not use.

Further information

Contact your nurse or health professional if you need further assistance.
www.caresearch.com.au



Wash your hands with soap and water and dry well.



Wipe the injection site (cannula port) with an alcohol wipe.



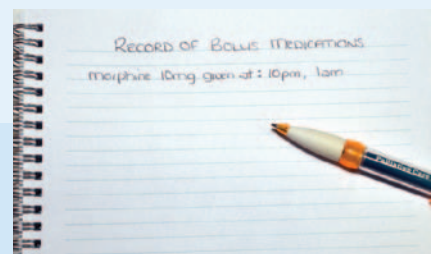
Insert the syringe tip into the appropriate injection port (as shown and advised by your nurse or doctor) and push plunger until the barrel is empty.



Rinse (flush) the cannula and tubing with 0.5ml sterile normal saline.



Carefully place the syringe into the sharps container.



Record the medication(s) given.

Giving the injection

- 1 If the syringes have been in the fridge, allow them to come to room temperature to reduce any stinging. (You can roll the syringe barrel gently between the palms of your hands to warm it up.)
- 2 Take the prepared syringes in a clean container, and a sharps container to the person.
- 3 Wipe the injection site (cannula port) with an alcohol wipe and wait till dry.
- 4 Insert the syringe tip into the appropriate injection port as shown and advised by your nurse or doctor. (For 'Luer lock' syringes, thread into the correct port and twist to the right.)
- 5 Slowly push the plunger of the syringe until the barrel is empty.
- 6 If it is hard to inject medications or if the medications leak out onto the skin when you inject:
 - i Do not continue.
 - ii Contact your nurse as this means the cannula is no longer working.
 - iii Leave the cannula in place for the nurse to remove.
- 7 Remove the syringe and dispose of it into the sharps container. (If using the Luer lock syringe, twist to the left.)
- 8 Rinse (flush) the cannula and tubing with 0.5ml sterile normal saline with a fresh syringe.
- 9 Carefully place the syringe into the sharps container.
- 10 Repeat the process for each injection, flushing with saline solution each time.

Please note

- It is normal for a small lump to appear at the insertion site immediately after the injection has been given. The small lump will disappear as the medication is absorbed into the bloodstream. If it does not, contact your nurse.

After you have given the injection

- 1 Record the medication(s) given, amount, date and time.
- 2 Store the medications safely. They should be secured in a container in a cool place away from children and from the view of others. Prepared labelled syringes should be stored in an airtight container in the fridge, or as directed by the nurse.
- 3 Store the sharps container out of reach safely and securely.
- 4 Check later that the medication has worked by asking the patient how they feel. If pain is obvious through facial grimacing, frowning, tensing of muscles and agitation, more injections (as prescribed) may be required.

Please note: some pain medications take up to an hour to have full effect.
- 5 If pain persists, contact your nurse or doctor as soon as possible.
- 6 Unused medications should be returned to your pharmacist when no longer required.

Acknowledgements: photos and text adapted from Brisbane South Palliative Care Collaborative info sheet, March 2011

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