ST. FRANCIS 24/7 CALL CENTER: (321) 269-4240

St. Francis REFLECTIONS® Hospice
Established 1977 • Licensed 1990

Activities of Daily Living (ADLs)

Activities of daily living can include basic self-care tasks such as bathing, dressing, eating, toileting and mobility. Due to progressive physical and cognitive decline completing simple tasks can become very difficult and frustrating.

Tips for helping with Activities of Daily Living:

- **Bathing**: Bathing can be a physically demanding and sensitive activity. It's essential to maintain the patient's dignity and comfort. Maintain privacy by covering areas not being washed with blankets or towels. Use warm water, and soft cloths, and ensure the room is comfortably warm. For patients who are bed-bound, sponge baths are preferable. Always explain what you are doing to the patient and encourage them to participate as much as possible. Use gentle cleansers and avoid harsh soaps that can dry out the skin. Place towels on slippery floors to prevent falls during transfers.

- **Dressing**: Choose loose-fitting, comfortable clothes. Let the patient help as much as possible. Adaptive clothing with easy fasteners can help make dressing easier for both the caregiver and the patient. If able allow the patient to choose their clothing, which can help maintain a sense of control and dignity. Dressing should be done in a way that minimizes discomfort, such as supporting joints and avoiding tugging.

- **Toileting**: Use of bedpans, urinals, or bedside commodes can help maintain the dignity of patients who cannot make it to the bathroom. It's important to maintain cleanliness to prevent infections and skin breakdown. Regular toileting schedules (i.e. before/after meals, etc.) can help prevent incontinence. For patients who can still walk, providing assistance to and from the bathroom can help maintain their independence.

- **Mobility:** Always communicate with the patient before moving them and encourage them to help as much as they can. Keep mobility aids within easy reach. Encourage simple exercises like leg lifts or arm movements to maintain some muscle strength and circulation, if possible. Ensure mobility aids (walkers, canes) are within reach and in good repair. Encourage safe and slow movements and allow rest periods when needed.

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- **Eating**: Encourage the patient to eat by offering favorite foods, if they are still able to eat. Use small, manageable portions to prevent overwhelming them. Adaptive utensils can help patients who have difficulty with grip. For patients with difficulty swallowing, thickened liquids and pureed foods may be recommended to prevent choking. It's important to sit with the patient during meals to offer assistance and to monitor their ability to swallow. Never force a patient to eat.

    - **Aspiration** (when food, liquid, or other material accidently enters a person's airway and lungs by accident) is common in older patients with difficulty swallowing.
        - **Common symptoms of Aspiration:**
            - Sudden respiratory symptoms such as coughing or cyanosis during meals.
            - Voice changes such as hoarseness or gurgling after swallowing.
            - Pocketing of food to one side of the mouth.

Tips to prevent aspiration:

- Allow patient to rest prior to meal times to prevent fatigue and increased difficulty swallowing.
- Support the patient to sit upright (90-degree angle) as much as possible.
- Adjust feeding rate and bite sizes to patient's tolerance, do not rush or force feed.
- Offer sips of liquids throughout meal as tolerated.

Remember to allow the patient to perform tasks independently as much as possible, offer choices and respect their preferences.

St. Francis Reflections is always available to assist with any questions or concerns 24/7

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