

CAREGIVING TECHNIQUE VIDEOS

As the Caregiver for your loved one. It is important that you take the time to learn how to best help your loved one; not only for them, but also for you. Lifting or assisting improperly can cause injury in yourself, which can also cause issues in caring for your loved one. Below are videos to educate you and your loved ones on use of proper techniques and strategies during daily activities.

Gait Belt: VIDEO 1 INTRO GAIT BELT

What is it: A gait belt wraps around a patient and should sit just above the hips and around the waist. This helps a caregiver assist in the slight shifting or balancing of a patient at their center of mass, using a hand hold on the belt. You do not need to be strong to utilize a gait belt, just use it for small corrections in the balance of your loved one during movement.

What is it for: The gait belt should be used to help steady and assist your loved one while changing seats, standing from a seated position, sitting down, or walking.

How to Tighten: The gait belt should go around the waist if possible, just above the hips. The tip of the belt should go through the teeth of the receiving end, before sliding it through the gap of the receiving end as well. The belt should be snug with space for only about 2 fingers to fit between the person and the belt.

VIDEO 2: Tightening the gait belt and Explanation of Gait Belt

Gait Belt use with Patient:

The Gait belt is a hand hold for your to steady your loved one. Using the gait belt does not requires strength, nor does it require quick motions. With an underhand grip on the back of the belt, small, but firm and slow guidance can be given to assist movement. This is to help your loved one keep their balance, to give them slight assistance in standing, or to assist them in an emergency situation.

VIDEO 3: General Use of Gait Belt on Patient

Bed Mobility: VIDEO 1 BED MOBILITY INTRO

Bed mobility is often overlooked, however is extremely important. As a loved one is spending time in bed, it is important that they are able to adjust themselves, or we as caregivers know how to best adjust them, so they can rest in a pain free and comfortable position.

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The trick to bed mobility is to let your loved one do as much as they possibly can on their own, with as little help as possible from you. This allows your loved one to maintain as much strength as possible and to be as independent as possible. Use your hands to help as needed, but don't do everything for them.

Have your loved one sit about $\frac{1}{2}$ - $\frac{2}{3}$ down towards the foot of the bed. This keeps the person from being too far up in the bed when they lay down. Remember that it is easier to adjust up in bed than down in the bed.

Methods of Bed Mobility:

- Hands on Assisted Bed Mobility: VIDEO 2

Good hand placement to assist in mobility at the bed is near center of the body. This means, hip, side, shoulder, and upper legs can be good places. You want to avoid pulling on the extremities as this can injure already frail areas such as the shoulders, wrists, legs, etc. Pushing motions are typically better than pulling motions.

To lay down from a seated position, I let my patients do as much as possible, while I assist at the upper body and the legs.

- Log Roll Method: VIDEO 3

This method is for loved ones with a weaker core or with back pain. Seated at the edge of the bed the method involves laying to your side at the very same time that the legs come up to the bed. This is a method that uses momentum to propel the feet into bed, and it also stresses the back less.

Once the individual is lying on their side and feet are in bed, they can roll over to their back or adjust to whatever position is most comfortable.

- Leg Kick Method: VIDEO 4

Small adjustments may need to be made to improve comfort once laying down. A method for this is to bend both knees up and use the feet to push the body up further into bed. If the feet are sliding, then a caregiver can stabilize at the feet and provide something more firm (a hand or arm) to push off of as well as the bed.

- Slide Sheet Method: VIDEO 5

This method is great for your loved one that is unable to shift or move in bed once they get there. Place a sheet on the bed before sitting or laying down in bed. The sheet can then be pulled in any direction with your loved one laying on top of it.

Now, posture is important in this method. As a guardian, you should not be straining your back or trying to pick your loved one up with the sheet. Just pull the

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sheet, where it needs to go. It is often good to have another person to assist with this.

- **Solo Slide Sheet Method: VIDEO 6**

This method is a mix of the previously shown slide sheet method as well as the patient leg kick method. This can be performed to adjust your loved one's position in bed, however since you will perform this one alone, be careful not to over exert yourself.

At the head of the bed, grab both sides of the sheet, and use your body mass to pull the sheet up in bed. Keep your arms close to your body, and don't lean over the bed too far.

- **Pillows Placement for Comfort: VIDEO 7**

Comfort is the most important thing. Have a plethora of pillows readily available to wedge under the patient in areas that will improve comfort.

Talk to your loved one about what makes them most comfortable. Sometimes they prefer to have support to wedge them onto their side. Sometimes a pillow under the arms or between the knees is most comfortable. Whatever it is, help them put a pillow there to support them.

This can help to avoid bed sores if your loved one is spending a lot more time in bed, as pillows allow a patient to adjust positioning in bed, often.

Standing and Sitting Movements:

- **Sit to Stand Movement Education: VIDEO 1**

Seated on a bed or chair, scoot to the edge so their feet are on the ground and they are ready to put weight through their feet. With both hands on the chair or bed where they are sitting, they need to lean forward so their nose is over their toes (nose over toes) while pushing through the chair with the hands, as well as through the floor with the feet. Propelling them into a standing position. Once standing, rest and gain balance.

- **Sitting from a Standing Position: VIDEO 2**

Back up to the edge of the chair. When you are able to feel the back of your knees touching the chair, that is when you should reach back with your hands and start to slowly lower yourself down. Use your hands to slow your descent to the chair. Don't "plop" into the chair.

As a guardian, you can assist this motion if needed, with a hand on the backside of the gait belt.

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- **Gait Belt Assist During Sit to Stand:** VIDEO 3

-Everything begins the same as your normal sit-to-stand here. Scoot to the edge, lean forward and utilize hands on the chair and push through the feet on the ground.

- a. The guardian role here, is utilizing the gait belt to assist. If minimal assist is needed, assisting from the side is best. You can utilize one hand on the back of the belt to generate minimal assist and momentum during your sit to stand.
- b. You can also place one hand on the back side of the gait belt and one hand on the front side to add more moderate assistance.
- c. Max assistance can be given from the front. Have both hands on the sides of the gait belt and assist the sit-to-stand utilizing your body weight while standing in front of the person.

- **Non-Gait Belt Assist During Sit to Stand:** VIDEO 4

- If you need to assist, a gait belt is best. Without a gait belt, you have a few options. You can use the same techniques as above, however holding onto waist belt of pants.

- Or you can utilize hands at waist on the body. Utilization of a gait belt is best, because it prevents pulling on the extremities and possible injury.

Walking with Your Loved One: VIDEO 1

- Position yourself next to your loved one with a hand on the backside of the gait belt. As referenced previously, re-direct or steady your patient using ever so slight pressure and direction change with hand on the belt. You should walk closely to the side of your loved one and encourage them not to shuffle their feet during walking.

Up and Down Stairs: VIDEO 1

- The saying we physical therapists use for stairs is “up with the good, down with the bad”. This means as your are going up, if the individual has a stronger leg, lead with that leg. When coming down, lead with the weaker leg.
- If neither are particularly strong or weak, be sure to utilize the railing, and you can utilize the method of stepping one single stair at a time, instead of alternating feet.

Falls and Losses of Balance:

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All of this information is to avoid falls, however, in the case that a fall is going to occur, it is important to understand different techniques you can use to assist the fall or pad the fall as to prevent as much injury as possible.

- **Assist the Fall: VIDEO 1**
 - If your loved one loses their balance and you are walking near to them, you can utilize the gait belt as well as your hands/arms on their body to slow their fall. You may not be able to catch their fall, however you can slow it by planting yourself at a safe range from them to avoid being hit on the way down, and utilize pressure and hand hold to slow the fall.

- **Catch the Fall: VIDEO 2**
 - This technique takes a little more care as well as strength. You are placing yourself between the patient and the floor in this situation, so it should only be performed if you are a strong individual and understand the technique to perform.
 - As the patient goes down, you perform a squat as you are slowing their fall. If you are able to get a knee underneath your loved one's bottom, you can steady them for a moment; if there is a chair nearby, this is the time for someone to help slide it underneath your loved one to provide support.

- **Getting Up After a Fall: VIDEO 3**
 - To stand up after a fall, your loved one needs to be able to get to all-fours and crawl to a nearby chair. From this position, with hands on the seat of the chair, they can pull one foot underneath them, while the other knee is on the ground still. Have them push up from the foot as well as the hands in the chair, to get to standing or chair level. From here, sit in the chair and rest.
 - Now you will want to re-assess and likely call your doctor.

- **Steps to Perform After a Fall: VIDEO 4**
 - Again, the goal of this is to avoid falls, however falls happen and it is necessary to know what to do after a fall.
 1. Assess your loved one. Are they hurt or grimacing in pain? Any visible injuries? If so, calling 9-1-1 may be the immediate step to take.
 - a. After a fall, proceed slowly and carefully. Do not rush standing up. Also thoroughly assess your loved one. If they have hit their head or neck, it is necessary to call 9-1-1 immediately.
 2. If no injuries are present, then help them perform the stand from floor using a chair, as shown in the previous video.

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3. Once they are sitting in a chair. You can re-assess for injuries or pain. From here, it is best to call EMS or your doctor to let them know about your fall, and to receive next steps from a medical standpoint.