



Responsibility Centre: Quality Services	POLICY SECTION Service Delivery	Sub-section: Safeguards
Subject: BATHING GUIDELINES		
Effective: April 2007	Scope: Quality Service Analysts Facilitators	Approval by: _____ Chief Executive Officer

PURPOSE

To assist CLBC staff and service providers in developing bathing practices that respect an individual's wish for privacy when bathing or for assistance with other personal care activities while addressing possible risk.

POLICY

The Ministry of Health and CLBC have endorsed the following policy and practice guidelines for implementation in both licensed and unlicensed homes to ensure the safety of individuals while bathing.

The intent is to balance the wishes of an individual for privacy with the potential risks associated with bathing, particularly unsupervised bathing for individuals with communication and/or mobility challenges. A specific concern is the use of foaming agents as bathtub jets can create very thick foam that can result in an increased risk of aspiration and drowning.

Individual Choice

Individuals will have the choice whether to authorize their bathing and personal care guidelines. It is important that individuals have been made fully aware of the real and potential safety risks.

Bath Product Safety

Only those bath products identified by the jet tub manufacturer, as safe for use in a jet tub should be used.

Service providers are expected to be proactive and address any potential risks associated with bathing or provision of personal care. Proactive measures may include but are not limited to:

- Development of appropriate bathing/personal care guidelines.
- Use of only those bath products identified by the jet tub manufacturer as safe for use in a jet tub.
- Regular maintenance of jetted tubs and associated bathing/personal care equipment such as lifts, bath stretchers, change tables, shower chairs, call bells, monitors etc.

Guidelines or protocols will be developed for each individual that acknowledge personal preferences, clearly address any identified risks and the measures that will be undertaken to minimize those risks, and promote safe bathing and personal care practices.

Individuals must be involved in any discussions concerning bathing and personal care. An individual, their family, service providers and other key persons in their life must ensure that an individual is supported by planning that addresses actual risks and anticipates potential risks associated with bathing or provision of personal care.

PRACTICE GUIDELINES

Rights

Any bathing or personal care plan must reflect the following safeguards:

- consideration of each person's rights, values and beliefs in making personal care decisions;
- development of a personal communication plan to enable each person's participation in key personal care decisions;
- identification of a person or network of people who will assist in key personal care decisions; and,
- proactive discussions on an individual's/family's desires for delivery of personal care.

Planning

Risks can be reduced by being proactive:

- bathing/personal care plans or protocols will be developed for each individual and documented in agency records;
- plans will address an individual's personal preferences; identify risks including any personal care issues (actual or potential) that require additional safeguards and outline the measures that will be undertaken to minimize those risks and promote safe bathing and personal care practices for that individual;
- plans will also identify any equipment requirements and training needs and reassessment schedules to manage any identified risks.

Assessing Risk Factors

It is important to assess the degree of risk based on an adult's personal situation and requirements, caregiver skills and training and the bathing environment. The following factors should be considered:

- an individual's personal preferences for privacy; use of bubble bath or oils; use of jets in bathtub;
- any current physical, sensory, motor or behavioural concerns that might effect bathing practices or pre-existing health conditions such as epilepsy, high blood pressure and osteoporosis;
- level and independence of mobility;
- communication skills;
- an individual's ability to use call bells or other safety devices and ability to recognize pending danger;
- an individual's understanding and general capability;
- the availability of staff familiar with an individual to enable safe and appropriate scheduling and level of supervision during bathing times;
- the potential impact of other individuals living in a home;

Bathing Guidelines (continued)

- the degree of ambient noise in the environment during bathing;
- the determination of the least intrusive options for providing privacy while still recognizing safety risk. Options might include: closing the shower curtain, partial closure of the bathroom door and staff positioning outside the bathroom when intercom /monitoring system is available in bathroom;
- knowledge and awareness of manufacture guidelines for use of foaming agents in jetted bathtubs and recommended maintenance schedules for bathtub and other special equipment; and,
- agency policy regarding personal care.



PROCEDURES

The following Risk Tool was developed in conjunction with health care professions to assist Home Activity service providers in assessment of individual risk and need for supervision while bathing.

FIGURE 1: Care Needs – Individual Factors

Lower Risk ↔	Higher Risk ↔	Rating (circle one)		Comments:
Individual with a stable condition (physical & psychosocial)	Individual with an unstable condition (physical & psychosocial)	Low	High	
No changes are anticipated	Changes are anticipated	Low	High	
Well defined, straightforward care needs	Complex care needs	Low	High	
Individual is willing and able to direct care	Individual is unwilling or unable to direct care	Low	High	

FIGURE 2: Care Needs – Task Factors

Lower Risk ↔	Higher Risk ↔	Rating (circle one)		Comments:
Low risk for harm	High risk for harm	Low	High	
High predictability; no/limited judgement required: Stable need for task Stable response to task Predictable outcome of the task	Low predictability; judgement required: Varying need for task Unpredictable or changeable response to task Unpredictable outcomes of task	Low	High	
Task has few steps and requires minimal technical/ psychomotor skill	Task has numerous steps and requires a high degree of technical/psychomotor skill	Low	High	
Task done frequently (enables staff to maintain knowledge & skill)	Task done infrequently	Low	High	
Task is not altered in different settings	Task must be altered in different settings	Low	High	

*Adapted from RNABC October 2000 document “Assigning and Delegating to Unregulated Care Providers”.

FIGURE 3: Care Environment Factors

Lower Risk ↔	Higher Risk ↔	Rating (circle one)		Comments:
Ongoing assessment, care planning	Limited or unavailable ongoing assessment,	Low	High	
Adequate time for staff training; clear written procedures available for staff	Limited time for staff training; no written procedures available for staff	Low	High	
Appropriate supervision and support allows the supervisor to monitor staff and consult or intervene as necessary	Limited supervision and support available	Low	High	
Available organizational supports: Clear policies and procedures Expert clinical consultation for agency	Limited organizational supports: Policies and procedures unclear and unavailable no clinical consultation for agency	Low	High	

FIGURE 4: Staff Factors

Lower Risk ↔	Higher Risk ↔	Rating (circle one)		Comments:
Few providers needed/infrequent staff changes	Large number of providers needed/frequent staff changes	Low	High	
Providers have standard skill base (e.g., community /home support worker course)	Providers have no standard skill base	Low	High	
Task commonly performed in the existing circumstances	Task not usually performed in the existing circumstances	Low	High	