Information Sheet



Personal Care

Personal hygiene is important in maintaining good health. The impact of dementia on a person's ability to care for themself will vary from one person to another, and is also likely to change as the illness progresses.

People's personal care routines and preferences vary. Changes in motivation, mood, memory, capability, understanding and behaviour can all affect a person's normal personal care routine.

How you can help

The very personal nature of these tasks can make it difficult both to offer and to accept help. The person may not recognise that he or she needs assistance and become frustrated or anxious at being reminded, hurried or helped.

Your relationship to and with the person may also make it difficult for you to carry out some personal care tasks.

Providing support requires patience, understanding, tact, and a positive approach to maintain abilities and self-esteem.

Maintaining independence

Avoid taking over when someone is having problems. It is important to try to help the person stay independent for as long as possible, while at the same time keeping them safe, and maintaining their dignity.

Think about how much help is needed and how you could encourage, prompt or make it easier for the person to carry out his or her personal care tasks.

Co-operation

How, or how much, the person co-operates with you can fluctuate considerably. Try to avoid arguments as it's quite likely

the person with dementia will forget the dispute, however, you may be left tense, angry and exhausted. Instead, use your knowledge of what helps the person to feel comfortable and confident such as talking about happy memories, singing a favourite song or listening to music.

Be flexible

If something proves difficult, try again later, try a different approach or choose a time of day when the person is relaxed and not too tired. Consider if this task really needs to be done right now or if you could leave it for a while until you have both have calmed down.

Some tips on personal care General tips

- allow plenty of time for tasks, for example washing and dressing
- make sure the room is warm and comfortable
- try to make things as relaxed as possible
- provide as much privacy as you can –
 make sure blinds and curtains are closed,
 and that no-one else is likely to come
 into the room
- try giving prompts (one at a time to avoid confusion) before you step in to help. If you do need to help, do it tactfully and explain what you are going to do as you go along
- try to avoid discussions and arguments and approach tasks positively
- when the person is trying to do things, give encouragement. Give compliments and generally take an interest in the person's appearance
- try and work out if the person is more amenable to doing things at certain times of day and plan round that.

Hands and feet

Even if the person with dementia refuses to take a bath or shower, it is important that they wash their hands after using the toilet and before meals. Anti-bacterial gels or wipes may help in the short term, but they are not a substitute for soap and water particularly for cleaning under finger nails.

Nails generally become harder with age, so it is recommended that you trim nails when softened, either following a bath or after soaking feet or hands in a basin. Relatively inexpensive foot spas with built in massager and bubbles may be one way to get someone to soak their feet. If soaking feet, do not do this for more than 10 minutes as it can cause the skin to dry out.

If the person won't let you use clippers at all, try filing the nails with a nail file or emery board weekly to keep them short.

If you're struggling to cut them yourself, arrange for a podiatrist (chiropodist) to do it. People with circulatory problems, especially those with diabetes, have to take special care of their feet and regular chiropody may be essential. If the person with dementia also has diabetes, you should get their feet checked by a health professional at least annually as part of their annual diabetes review.

If the person with dementia receives personal care from a paid carer, that carer is unlikely to be allowed to cut nails but may be able to soak and file them.

In 2013, the Scottish Government published a DVD and booklet aimed at helping people look after someone else's feet. They are available to view and download at www. knowledge.scot.nhs.uk/home/portals-and-topics/personal-footcare/education-forcare-providers.aspx

Hair

If the person has been a regular visitor to the hairdresser, try to keep this up. Simple, easily cared-for styles are best. If a visit to the hairdresser is not possible, see if a home visit can be arranged instead.

If washing and styling hair at home, choose

a comb or brush which is easy for the person to grasp.

You may need to accept that the person doesn't have their hair washed as often as you (or they in the past) would want.

If the person is worried about shampoo getting in their eyes, you could try a nonsting brand and a hand held showerhead for rinsing. If that doesn't work, the person might be willing to try a dry shampoo or a "shampoo cap".

Cleaning teeth/dentures

A person with dementia may neglect cleaning teeth, and dentures can become ill fitting due to weight loss. Other problems include oral infections, inflammation and difficulties with chewing food.

Remind the person when necessary about cleaning teeth. It might help if you clean your teeth at the same time as a reminder of what to do. You may need to apply the toothpaste to the brush and give it to the person as a prompt.

When replacing a worn toothbrush, aim to buy one as similar as possible to the old one so that the person recognises it as familiar and is therefore more likely to use it. An electric toothbrush might give a better clean and might be easier for someone to hold and manipulate if gripping a brush starts to become harder.

Regular check-ups are important too – if visits to the dentist prove too difficult, ask about the home dental service.

Contact the local NHS Board for help if the person's usual dentist is unable to visit.

Dressing

If someone is having difficulty remembering where they keep various types of clothing, labelling where they are stored may help them select their own clothes.

Give the person choice about what to wear as best you can, but in some situations too much choice is a bad thing and just leads to confusion or stress.

Lay items of clothing out in the order the person will put them on, ideally keeping to

the order that the person was in the habit of using. If necessary, prompt him or her which item goes on next or hand each item to the person to put on themselves.

If the person tries to put something on the wrong way, try to correct this tactfully and help, explaining what you are doing. The more patient you are, the less likely the person is to become annoyed and uncooperative.

If the person requires complete assistance with dressing, dress him or her in stages, clothing just the top or bottom half of the body at one time. If a person has a weakness on one side, such as after a stroke, it is easier to put clothing on this side first and remove it last. Try not to leave the person completely naked as this may make them feel vulnerable and may deprive them of dignity. Male carers may find it difficult to help with bras and tights or stockings. Hold-up stockings should be used with care, as they can sometimes cause circulation problems.

Tips to make dressing easier:

- several thinner layers are preferable to fewer thicker layers
- zips, poppers or Velcro fastenings over buttons and hooks
- dressing aids, e.g. long-handled shoehorns, elastic shoelaces, sock or stocking holders, may help to maintain independence and make it easier to help
- tops with wider or looser necks will be easier to get off and on
- loosening a tie to remove it rather than completely untying it will make it easier to put on next time
- if tying shoelaces is a problem, a wellfitting pair of slip on shoes or shoes with Velcro fastenings may help

Getting undressed

If the clothes need to be washed, remove them at night to prevent them from being worn again.

Track suit style tops and trousers can be very useful, particularly for those with incontinence issues. They are usually easy

to put on and take off, are quick to wash and dry and don't usually need ironing. However, they are not right for everyone. Other styles of trousers with elasticated waists may be smarter and more easily accepted as well as easier to slip down to use the toilet.

Disinhibited behaviour

Some people with dementia may undress or fiddle with clothes in public, having forgotten when and where it is appropriate to remove their clothes. If this happens, take the person somewhere private, and ask if they are too hot, uncomfortable or want to use the toilet.

Washing and bathing

It can be difficult to persuade the person with dementia to have a bath or shower. He or she may insist that they have recently had a bath, when you know that is not the case. A daily bath or shower may not be necessary, even if it's what the person would have done in the past.

Even when the person does get into the bath or shower there can be difficulties. Some people forget how to wash themselves, wash one part of the body several times but completely ignore the rest, forget to use soap or forget to rinse it off.

For those who refuse washing with water, there is are other options, e.g. waterless body washes or bathing wipes.

Help with such intimate care can be difficult for both the person with dementia and the carer, especially if you are caring for a parent. Talking with the person about your respective feelings should help, especially if you reassure the person that you want to help them.

There are things you can do to make the experience of washing and bathing less frightening, embarrassing and safer for both parties:

- ensure bathing is viewed as a relaxing experience
- make bathing a social activity by talking

- about your day or reminiscing
- if the person doesn't like water in their face, use a damp facecloth or wipe to wash their face before/after a shower
- if the person isn't comfortable feeling exposed, buy a waterproof poncho and wash them underneath it
- ensure you have everything you need in the bathroom so you don't have to leave the person unattended
- cover or remove bathroom mirrors if the person doesn't like looking at themself
- help the person feel independent by allowing them to be involved as they want in bathing
- add a shower seat to the cubicle to help the person feel more comfortable

Some people find it easier to be bathed by someone they don't know, such as a care worker. If you (or the person you care for) do not feel comfortable or physically able, ask your doctor or social worker for advice about services to help you both with bathing. In some instances, day care services provide support with personal hygiene.

Be aware of the importance of carefully washing and drying skin folds. These areas are particularly vulnerable to soreness. Check for areas of redness, dryness, rashes or sores. If you are worried about anything you observe, you should report it to the GP.

Talcum powder may be best avoided as it can be an irritant and cause inflammation, especially on moist or broken skin or if someone has a chest condition or uses

a urinary catheter. If you do use talcum powder, apply it very sparingly.

Tips for staying safe while washing and bathing:

- ensure the bath is a safe and comfortable temperature before letting the person step in
- ensure the bath isn't too deep, this is both safer and can help reduce fear of water
- use a non-slip rubber mat in the bath or shower cubicle and make sure that the flooring is non-slip and free from puddles
- use bath and shower oils with care as they can make surfaces slippery
- seek advice from an occupational therapist if you have to help the person in and out of the bath to ensure you're not risking your own safety
- if the person is bathing alone ensure they can't lock themselves in the bathroom
- keep cleaning products out of reach so they can't be mistakenly used

Getting help

If you are worried about the personal care of someone with dementia, you can ask for help and advice from your community nurse, doctor, dental hygienist, occupational therapist or podiatrist.

For more information you can call the 24 hour Dementia Helpline Freephone on 0808 808 3000



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