



Personal Grooming & Hygiene Procedure

Procedure Number
WCDHB-PG-0022

Version Nos:
4

1. Purpose

This Procedure is performed to ensure the mental, emotional and physical health as well as the social well being of all West Coast District Health Board (WCDHB) patients/consumers/residents.

2. Application/Responsibilities

This Procedure is to be followed by all WCDHB clinical staff members.

3. Definitions

There are no definitions associated with this Procedure.

4. Responsibilities

All WCDHB Staff Members are required to ensure they abide by the requirements of this Procedure.

5. Resources Required

This Procedure requires:

- i) Patient/Consumer/Residents Clinical Record

6. Process

- 1.00 WCDHB acknowledges the importance of patient/consumer/resident hygiene and grooming. Personal hygiene promotes mental, emotional and physical health as well as the social well-being of the resident.
- 1.01 Hygiene is of paramount importance to avoid skin breakdown and the formation of decubitous ulcers. Skin is to be checked or monitored on bath/shower days. If there are indications of problems developing, the requirements of the *WCDHB Skin Cares Procedure* are to be followed.
- 1.02 For rest-home residents, their hygiene and grooming requirements and patterns are outlined in the their Personal Lifestyle Care Plan (which is based on an RN assessment). Preferred shower/bath times and days are to be negotiated with each resident on admission. This information is written on the office whiteboard for caring staff to confirm.
- 1.03 The multi disciplinary team will be consulted where the residents requires specialised input such as Podiatry or Dentistry.
- 1.04 Shower gels and synthetic soaps with a low ph are preferred over standard soaps to avoid the resident's skin from drying out.
- 1.05 Bathing and toilet facilities are operated in such a way as to maximise privacy and dignity.
- 1.06 Toenails and fingernails are cleaned and trimmed regularly to prevent injury and fungal infections. Nails are cut straight across and then filed until rounded.



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- 1.07 If the Resident is Diabetic or has any other medical condition, which may give rise to poor nail health or circulation, the Resident's feet are assessed on a regular basis and Podiatry input is requested as required.
- 1.08 In the event that the Resident has dentures, these are documented in the Lifestyle Care Plan. Dentures are cleaned in resident's own rooms. This prevents mix-ups and losing dentures.
- 1.09 All Residents are to have their mouths cleaned after meals and in the case of dentures, the dentures removed and cleaned.
- 1.10 The Resident's teeth and mouth are assessed as to their appearance, odour of breath, dryness of mouth, thrush.
- 1.11 While staff take all care with Residents personal items (including dentures) any damage arising from the dentures passing through the laundry is the responsibility of the Resident (as per the Resident's agreement signed on admission).
- 1.12 The Resident's hair care preference is documented in the resident's Lifestyle Care Plan. Regular hairdresser visits are scheduled at the home for those who wish them or are unable to attend appointments in town. Arrangements for Residents who prefer to use their regular hairdresser are made with family/whanau input. Transport can be organised in-house where needed.
- 1.13 Patients/consumers/residents who can feed themselves are to be allowed to eat at their own pace.
- 1.14 Patients/consumers/residents who are being fed by staff members must not be hurried, but be allowed to eat at their own pace.
- 1.15 Provision of modified eating utensils to assist Patients/consumers/residents with disabilities is to be arranged by nursing staff in consultation with Dietician and Occupational Therapist.
- 1.16 All meals are to be presented in an attractive manner and not mixed together.
- 1.17 The temperature of the food will be checked by nursing staff and maintained at an acceptable temperature eg microwaved for those taking a long time.
- 1.18 When giving homogenised food, staff members must be aware that the volume (eg a full plate) is actually more food than a full plate of normal diet and adjust accordingly.

7. Precautions And Considerations

- ➔ Each Inpatient/consumer/resident is to have their dietary needs assessed and recorded on the WCDHB Nutritional Screening Form.
- ➔ Types of food to be provided and the method of delivery is to be clearly documented in the patient/consumer/resident's clinical record



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- The type, quality, quantity and variety of foods offered are to be acceptable to patients/consumers/residents, meet their identified nutritional needs and are to be in accordance with the current New Zealand food and nutrition guidelines.

8. References

New Zealand Food And Nutrition Guidelines

9. Related Documents

WCDHB Clinical Documentation Procedure

Revision History	Version:	4
	Developed By:	Quality Improvement Co-Ordinator/ Dietician
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