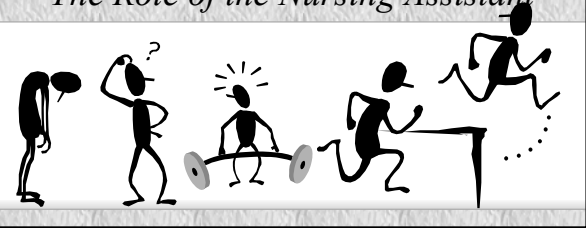


*Rehabilitative/Restorative Care  
The Role of the Nursing Assistant*



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*Intro. to Rehab/Restorative Care*

- Assist pt. to reach optimal level of ability physically, mentally, and emotionally.



Rehab- therapists are aggressive for several weeks.

- Restorative- nursing plans tx ( wks/mo/indef.)  
OBRA requires restorative care in SNF's.

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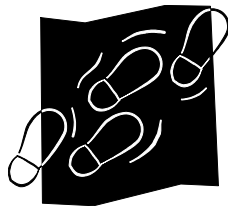
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*Goals of Rehab/Restorative Care  
begins at admission*

- To promote independence.
- Help adjustment to disability by recognizing sm. steps..
- Emphasizes abilities (learn new skills, retain old).
- Prevents complications.



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*Members of Rehab Team*

- Resident/Family
- Occupational Therapist
- Licensed Nursing Staff
- Physician 
- CNA 
- Activity Leader
- Speech Therapist
- Dietician 
- Physical Therapist 
- Clergy/Social Worker

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*Nursing Assistants role in Rehab.*  
*Use equipment knowledgeably*

- Range of motion/positioning
- Constantly encourage independence.
- Transfers/Ambulation
- Report responses to tx.
- ADL's
- Follow Care Plan
- Bowel/Bladder retraining
- Observe/Report early signs of complications.
- Maintaining nutritional status

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*Basic Needs Met by Involving Family and Resident in Rehab.*

- The need for self esteem.
- Belonging/Love 
- The need for self-actualization.
- The need for affiliation.

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*Methods to Promote Needs*

- Interact with patient, family, therapists.
- Use praise as appropriate to reinforce progress.
- Encourage patient independence.
- Be positive, emphasize abilities.

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*Self-Care Deficits exists because*

- Diseases
- Injuries
- Vision impairment
- Emotional illness
- Decreased strength
- Lack of endurance
- Limited range of motion
- Depression
- Disorientation
- Perceptual deficits

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*Perceptual Deficits usually from brain damage*

- Inability to organize a task (prepares, gathers items)
- Inability to sequence a task (puts bra on over dress)
- Inability to identify common objects (agnosia) (uses a knife to eat with)
- Inability to use common objects (apraxia)
- An inability to initiate a task
- Lack of judgment (uses the burners of the stove to heat the house.)

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*Approaches Used in Restorative Programs*

- Set-up - Put all needed items in front of patient.
- Verbal Cues- Use short simple phrases to prompt.
- Hand over hand techniques (brushing teeth)
- Demonstration- Act out what you want the patient to do (brushing teeth)

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*The Restorative Environment*

- Give patient control over decisions.
- Mental and physical activity are essential.
- Encourage pt. to be well dressed/groomed
- Use touch freely/appropriately.
- Provide cues for orientation at all times.
- Respect/understand need for intimacy

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*Guidelines for Range of Motion*

- Active- exercises carried out by patient
- Passive- exercises carried out by staff
- Without exercise:
  - 1) contractures develop    3) bones loose minerals
  - 2) muscles atrophy        4) circulation slows

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*Assignment*  
*Range of Motion*

- Check with nurse for instructions:
- NEVER exercise a joint to point of pain.
  
- Perform each exercise 3-10 times as ordered
  
- Stop if pain or discomfort develops/report.
  
- Support above and below joints.

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