

Social Services Department

Guideline for

Qualifying the sitters of Elderly and People of Determination

First Edition 2020

Index

Topics

- Introduction
- The social Axis
- The Religious Axis
- ✤ The Independence Axis
- ✤ The Behavioral Axis
- ✤ The Precautionary Measures and Preventive Measures Axis
- ♦ The Health Axis
- The Livelihood Axis
- Test your knowledge

Introduction

Introduction

The Department of Social Services of Sharjah government (DSSS) pays great attention to the elderly and the people of determination group by providing many social, psychological, economic, and health services as per the Department's strategy aimed at its vision to attain a society that enjoys well-being, security, family stability and social inclusion embodying the vision of the United Arab Emirates in achieving the highest levels of satisfaction and happiness for .the various members of the society

This guideline aims to highlight the role of sitters of elderly and the people of determination in the proper dealing with, caring, empowering and supporting such sensitive groups, as well as providing them with all aspects of services they need, and equip them with the skills and awareness necessary to meet .their requirements and needs

In this guideline, qualifying the sitters of elderly and people of determination, we highlight the most important topics that must be recognized when safely dealing with the elderly by the sitters, service providers, and those dealing with the elderly and the people of determination, considering the physiological and

The importance of this aspect lies in providing a normal and straight life away from isolation and loneliness, as the social communication between the elderly, his relatives and friends helps him to overcome that feeling

Also, participation in social activity plays a great role in influencing the health and psychological wellbeing of the elderly in a positive manner

The Social Aspect



Interactive Home Activities and Programs

The sitter should provide some activities that can be applied at home with the elderly to be integrated in society, entertain him and enhance his independence, for example

- Celebrate the birthday of the elderly
- Henna Night Celebration
- Talk of memories
- Group family meal (family or friends feast
- Working to strengthen the family kinship (visits and communications)
- Giving gifts to the elderly on occasions or otherwise, and urging the rest of the family to do the same
- $_{\otimes}$ Learning from an elderly a craft he knows

Caring for and sitting with the elderly or people of determination

Providing and purchasing

the needs

The sitter should work permanently to provide all the personal and living needs and other requirements necessary for the elderly to ensure a decent life for him, and enable him to be involved in the provision of his needs

Recreational programs and activities

- Trips and going out for walks
- ♦ Social celebrations and cultural festivals
- Home activities, such as drawing, painting and playing mind games
- ♦ Going to restaurants or cafes to change routine of their lives

The Social Aspect



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The people of determination and Unconscious Elderly

Members of this category are not obliged to do any of the religious rulings, neither purity nor fasting, except for zakat al-fitr and zakat on the funds which are obligatory for the money if it reaches the Nisab (the minimum amount .liable to Zakah), and a year has passed

The people of determination and Conscious Elderly

- Purity for this category is assigned to all religious rulings, only to the extent of his ability , i.e. if he can perform .ablution, or Tayammum , while if he is unable, he can pray, without purity
- He is assigned to pray only to the extent of his ability, so he stands in his prayers even if he leans on a wall or a stick. If he is unable to perform, he can pray while sitting, or prays as he is or lying down, even if he is not directed .to the Qiblah
- $\boldsymbol{\diamondsuit}$.Zakat is absolutely obligatory on money if it reaches the Nisab
- As for the fasting, for the elderly, he must feed a poor person every day for the number of days in Ramadan
- As for the Hajj, he is enjoined to do, so if he can find a way for it to go on his own, otherwise he will pay from his wealth to someone who performs Hajj on his behalf. In case he does not have money, then no sin on him

The Disabled and Unconscious Elderly

This category is governed by the ruling of the first category (disabled and unconscious) because the mind is the justification for the assignment, so no provision is obligatory on him, except for zakat on funds and Zakat al-fitr, which shall be paid by his guardian or the sitter if he owns such amount or its value

The Disabled and Conscious Elderly

The rule of healthy people in all the provisions of Sharia, and the provisions of Sharia does not drop on the elderly of such case

The Alms and Charity

✤ For alms and charitable work for these groups and donating on behalf of them in charitable projects, whoever is insane, the permission for his money is a must, while whoever is unconscious, then his money will not be disposed of .as long as he is alive, and no one has the right to dispose of his money even his guardian for any reason whatsoever

The Religious Axis

Maintaining Identification Documents and Papers

- It is necessary to maintain all documents and papers of the elderly against loss and damage and make sure that all his documents are valid, such as
- ♦ .Residence permits of employees, drivers or workers
- ♦ .Driving license
- ♦ .Vehicle registration card
- ♦ .Post office box
- ♦ .Mobile SIM cards
- ♦ .Health insurance policy
- ♦ .Health Cards
- ♦ .Commercial contracts, if any
- ♦ .Bank cards
- ♦ . Travel
- ♦ ID card

The Religious Axis

Behavioral Axis

Etiquette of Dealing With the Elderly

The elderly suffers from many aging symptoms, such as: dementia, poor memory, and a weak ability to express affection or gratitude, as the elderly may attack his children or grandchildren for not contacting him because of his forgetting that such matters happened shortly. We can deal with such problems by trying to cope with the symptoms and signs of dementia he suffers from :, through



.Choosing the right time to relax and listen to him to know his needs

Avoid telling him the disturbing news in an inappropriate way

.Asking him about the service he would like to have in order to consider it

In the event that the elderly refuses the help, you should not give up

It is preferable to support the elderly to keep in contact with his friends

Consider to notify the elderly about the safety through the implementing

Involve him in using modern technology so that he feels that he is still an

Consider his physical needs, observe his mood, encourage him to move and

Involve the elderly in family decisions as long as his mental

DONNING AND DOFFING OF GLOVES: (Putting and Removing gloves)

Press and pull the outer part of the glove to a position

Pull the glove till being removed, hold the inside of the removed glove with the outside part of the glove put on the other hand

Start pulling the glove down until the inside part of the hand being held



Hold the glove from outside on the wrist, without touching the skin



Hold the taken off glove with the other hand wearing the glove



Then take off the other glove upside down by pulling it away from the body and wrap it inside the other glove

Wash your hands immediately after removing gloves with soap and water, or use alcohol based hand sanitizer if soap and water are not available.



Pull the glove out of the hand palm by removing it upside down



Insert the bare fingers between the top of the wrist and the glove



Dispose of the gloves in a safe manner, consider not to reuse them



The Health Axis



Health parameters

The Health Axis

Drugs

Giving food and drink

safety measures of oral feeding

Training on how to give food and drink Soft food – in normal method – with tube

Not to lie down immediately after eating - safety How to administer, arrange and store drugs

Drug administration

The elderly should continue to take medication, as sometimes his vision impairment may cause to take the

.dose incorrectly



Medication chain

An innovative model presented by the Social Services Department to its elderly to ensure that their medications are kept when they attended in hospitals

.and emergencies



Providing self-care services (personal hygiene)

How to provide self-care services How to bath



for more, visit the link below:

https://youtu.be/9VKox-wy4fU

How to take care of the elderly hygiene in general



- How to clip nails.
- How to remove hair.
- Dental Care.

for more, visit the link below:

https://youtu.be/GF6smAEFbNE

Basic measures OF BED ARRANGEMENT



The Livelihood Axi

The rules of a patient's safe sleep

Various sleeping positions to avoid bed sores

Proper bed positioning to prevent bed sores







Changing the elderly position

- The elderly position should be changed every two hours to avoid the formation of bed sores.
- Check frequently.
- The bony prominences should be covered with a soft material.



Cancer Research UK Original diagram by the Tissue Viability Society

Medical Axis

Safe transfer activities

Safety of the surrounding environment









Transfer activities for the wheelchair



How to move the elderly from the bed to the wheelchair



How to Use the Pivot Maneuver









circulatory exercise to prevent deep venous thrombosis

In order to avoid deep vein thrombosis, you should move the feet, wear compression socks, and use a negative compression Daily movement exercises recommended to maintain blood circulation, muscle flexibility and joint flexibility



First aid and how to act in emergency

First aid for fractures

- Help the victim to relax, taking care not to move the injured limb to relieve pain and facilitate the transfer process.
- Fix the limb with a hard object.
- Ensure that the victim is comfortably positioned until safely transferred.

In cases of epilepsy or sezures

- Do not move the limbs
- Secure the place so that not to harm the patient.
- If failed to awaken the patient after a seizure, Call an ambulance.

Heat exhaustion for heat exhaustion

• It is an acute condition that results from exposure to high temperatures for a long period of time.

Heat exhaustion treatment FIRST AID OF HEAT EXHAUSTION

- Transfer the patient to a cool place
- Give the patient a cup of water every quarter of an hour
- If failed to awaken the patient after a seizure.
- Take off any clothes or tight clothes

First aid and how to act in an emergency

<u>First aids</u>	<u>Signs</u>	<u>Causes</u>	<u>First aids</u>	<u>Signs</u>	<u>Causes</u>	<u>Degree</u>
 Remove the tight clothing and expose the victim to fresh air The unconscious victim will not be given 	 Rapid heart rate Shortness of 	 temporary decrease in blood flow to the brain. 	 Wash the burn with cold running water for 10 minutes Leave the burn to dry with air Apply cooling ointment 	 Skin temperature Redness Pain 	 Sun ray Weak heat for long time 	First 1
 anything by mouth, except after making sure that awareness is restored. If you notice an unconscious person who breathes, keep the airway clear, by putting him in the recovery position, and monitoring him if 	breath, followed by acceleration • Pallor of the face • Feeling	Low blood sugar.hypotension.FatigueSick conditions.	 Wash the burn place with cold running water for 10 minutes. Apply a saline serum to prevent deformation and skin stretches. Use a burn gauze. Use sterile gauze and wrapped with gauze. 	 Redness Swelling Pain temperature Distortions 	 High temperature Hot metals High temperature for a short period 	second 2
 Reassure the patient if he returns to his consciousness. Follow the patient's condition in the absence of vital signs, call an ambulance to respond to urgent and critical cases, if the service is available in your area, and start the provest time. 	 weak and malaise dizzy Loss of consciousnes s 		 Cover the burn Transfer to the hospital as soon as possible Keep the person away from the source of danger Call the ambulance service at (999) 	 Deformity Smell of burning Severe pain around the burnt area Blackening 	 Chemicals Atomic radiation laser 	third 3
 resuscitation. Transfer the patient to the nearest health center in the event that an ambulance service is not available. 						

<u>First aids</u>

- Make five thrusts on the back.
- Make five thrusts on the abdomen.
- Take off any tight clothes at the neck and chest.
- Inability to speak
- Difficulty in breathing or breathing accompanied by sound.
- A whistling sound when trying to breathe
- First, redness of the skin, then pale or bluish skin.
- The skin, lips, and fingernails turn blue.
- Unconsciousness.

<u>gns</u>

<u>Causes</u>

- Asphyxia occurs when a foreign object sticks in the throat or trachea that obstructs the passage of air.
- The food or drink is the cause of the choking, and when occurs, it prevents oxygen from reaching the brain

The Livelihood Axis

First aid and how to act in an emergency

How to stop hemorrhage

- Direct pressure, while putting on the glove
- Cold fomentation
- Raise the injured part
- Ligature at the pressure points





The bandage

• Internal hemorrhage is more dangerous than the external hemorrhage and when the affected area is on the chest, trunk or pelvis, it is necessary to go to the hospital immediately

First aids for diabetic coma

<u>First aids</u>	<u>Signes</u>	<u>Causes</u>	<u>Degree</u>
Measure the random sugar to know the patient's health status. Immediately give the patient, if he is conscious, fast-absorbing sugars (a piece of candy - juice – sugar sweetened water or by intravenous glucose solutions) Go to the nearest hospital if needed. Give the patient a piece of sugar under the tongue or intravenous glucose solution if the patient is unconscious, observe his temperature, keeping it within the normal limit, and constantly monitor the breathe and pressure until going to the nearest hospital.	 <u>Hypoglycemic coma</u> Unconsciousness, lack of consciousness for minutes in people with insulin dependent diabetes. Tremor and sweating. Sometimes vomiting. Measurement of sugar, mostly less than (50) <u>Hyperglycemic coma</u> Increased thirst Frequent urination and dry mouth Changing the level of consciousness The measurement of sugar is mostly higher than (600) (The hypoglycemic coma is more dangerous than Hyperglycemic coma) 	 <u>Hyperglyce</u> <u>mia</u> <u>hypoglyce</u> <u>mia</u> for very long periods that can lead to a diabetic coma. 	hypoglyc emia hypergly cemia

Method for clearing the airway and tongue swallowing



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The Livelihood Axis

First aid and how to act in an emergency

Causes of respiratory and cardiac failure

Heimelk choke maneuver



The Livelihood Axis

First aid and how to act in an emergency

Secure the place: Lift the chin and Check the pulse Make sure of the following: Open the airway incline the forehead Electrical hazards **Chemical hazards** Toxic and non-toxic gas Look and observe Level of awareness or the breathing response Solid objects Flame Unstable places

#	Question	Choose the correct answer			
1	What are the most prominent activities and programs that can be applied in the social aspect of the elderly?	Celebrating an elderly birth- day	Providing and purchasing the needs	Going to restau- rants or cafes	
2	What is the ruling on the capable and conscious elderly people in performing religious enjoins?	The sharia provision of healthy people applies.	No provision applies But Zakat on money and zakat al-fitr.	No provision ap- plies	
3	One of the below options is not etiquette in dealing with the elderly?	Mercy	Respect	First Aid	
4	the most important vital signs to be recorded for the elderly is?	blood pressure measurement	Burn treatment	Heimelk's suffoca- tion maneuver	
5	What is the option that is not a safety surrounding environ- ment?	Medicinal aid equipped bath	Easy-to-use water taps	Raised sinks	
6	What is the most important fracture first aid for an elderly?	Fix the limb to a solid body	Transfer the patient to a cool place	Warming	
7	Mention one of the options below that is not considered a mea- sure to stop hemorrhage in the elderly?	Cold fomentation	open airway	Bandage	
8	The causes of respiratory and cardiac failure in the elderly?	Toxic gas	Shock	Hypotension	
9	Changing the position of the elderly is a rule of?	Basics of Bed Arrangement	First Aid	Move the patient to a safe place	
10	How long can the brain last without oxygen?	10 minutes	4 minutes	6 minutes	





Social Services Department

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Our Location

googl map

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