

COMPETENCIES



SCOPE

This guideline applies to the provision of paid support services in the community. They are relevant Australia-wide or when a client is travelling overseas with their Australian team of support worker/s.

DISCLAIMER

This guideline is provided to help guide best practice in the disability, aged care and community support industry. This information does not in any way replace legislative, regulatory, or contractual requirements. Users of this document should seek appropriate expert advice in relation to their circumstances. ACIA does not accept any liability on the use of this guideline.

PURPOSE

This guideline is to assist:

Service providers (organisations and individuals), clients, stakeholders and funders regarding the appropriate planning and provision of quality care in a safe work environment to bariatric people by support workers in the community

DESIRED OUTCOME

- To maintain a quality and safe standard of care
- To assist in the appropriate planning of services to bariatric people in the community

BACKGROUND

Across Australia two in three adults are currently overweight (36%) or obese (31%) (Australian Government, 2020). Services to a bariatric client are in principle no different to any other person, however due to their size, weight or body dynamics of a person, special consideration may be required to aspects such as:

- manual handling
- work health and safety issues
- skin integrity
- circulation
- promoting client independence
- weight bias, physical causes of, and psychological issues related to, obesity

As client involvement and service direction has increased it is imperative to involve the client in all aspects of the service delivery and the direction of their services to their ability. It is further acknowledged that dignity of risk is an important part of this choice and control.

DEFINITIONS & SUPPORTING INFORMATION

Support Worker - A paid person who assists people to perform tasks of daily living so as to participate in social, family and community activities in the person's home and their community. Support Workers have been commonly known in the past as attendant care worker, disability worker, aged care worker, community worker, homecare worker, care worker or paid carer.

Service Provider - Organisation or person accountable for the delivery of supports to Clients.

Carer - a person that provides supports to the Client at no cost (generally family or friend).

Support Worker Competency - trained and assessed as competent by a Registered Nurse or a person deemed competent by the provider to safely and appropriately perform a specified task as a support worker.

Client means the service user, participant, user, care recipient, consumer or person receiving the nursing or support services.

Plan means a Service Plan, Support Plan or Individual Plan (however titled – the plan) is a document developed in response to a request for service. It is developed by a Registered Nurse or a person deemed competent by the provider from the service provider, prior to the commencement of service delivery. It outlines the expected outcomes of the requested care/services and the tasks, duties and interventions required to meet the care and service needs of the client (within the parameters of the funding program). The plan guides and directs the individual support worker or Registered Nurse in their day-to-day delivery of the services.

Registered Nurse means a person who has completed the prescribed educational preparation, demonstrated competence for practice, and is registered and licensed with the Australian Health Practitioner Regulation Agency (AHPRA) as a Registered Nurse.

Bariatric - person can be defined as anyone who is obese and where their body size restricts their mobility, health, or access to available services. The term "Bariatric" has come to be used to describe obese and severely obese people, regardless of whether or not they are receiving treatment for their obesity. In order to assist with the identification and subsequent management of obese and bariatric clients, the following definition is proposed:

Person who fits two (2) or more of the following criteria:

- Weighs ≥ 120 kg
- BMI (Body Mass Index) ≥ 35 (BMI = weight (kg) / height (m)²)
- Seated hip width >20 " (51 cms)

GUIDELINE

Service Provider

Bariatric clients will have additional or particular needs, which must be addressed if they are to be managed in a dignified and respectful manner. Service providers should consider, developing:

- Systems in place and adequate staffing for safe client management and support worker safety
- Education and support regarding their mental, physical and social health issues
- Compassion and understanding from support workers, carers, family and the general public
- Coordinated medical, dietary and psychological health care management
- The need to promote independence
- Appropriate design and access features to all areas in the home, community facilities and transport vehicles
- Access to affordable furniture and equipment appropriate to their weight, size and body shape
- Access to clothing and hygiene aids appropriate to their weight, size and body shape
- Particular attention to skin integrity
- Observation of circulation (colour of extremities)
- Maintain clean dry skin
- Active involvement in decision-making affecting their health, welfare and social wellbeing

As part of planning services for a bariatric client, the service provider should consider that bariatric clients:

- will be slower and hence take longer with their activities of daily living
- are likely to have increased levels of pain due to the presence of moderate to severe physical disabilities
- may experience stress incontinence
- may have poor circulation
- may become breathless easily
- will be prone to poor skin integrity
- are likely to have reduced function and poor balance
- may suffer from depression and anxiety

As a part of any support service delivered by support workers the service provider will:

- Assess initial care needs with the client. Including (if required) a manual handling assessment and manual handling plan. (Consider using also the Service Safety Assessment Tool when planning services for the bariatric client)
- Ensure that any lifting device is approved for the weight of the client
- Consider if an Occupational Therapist should participate in the planning process for the client and their equipment needs
- Develop plans with identified outcomes, considering the specific needs of a bariatric client
- Provide written procedures on manual handling by the support worker – this may be included as part of the plan
- Identify education needs for support workers. Provide relevant competency based education and assessment processes for the support worker/s to ensure they are competent to perform the prescribed duties, tasks and interventions
- Monitor, review, evaluate and adapt as required the service, plans and outcomes with the involvement of the client
- Manage the maintenance and repairs/replacement of the equipment required

Support Workers

Support workers may NOT:

- Lift, lower, push, pull, otherwise move, hold or restrain any of the client's body weight (unaided)
- Support workers may:
 - Perform any task on the plan
 - Use hands on assistance to guide movement only
- Support workers must:
 - Follow the plan as provided by the service provider
 - Not change the plan
 - If a client requires more than guidance only, report immediately to their supervisor
 - Take part in training on use of equipment, manual handling and risk management as determined by the service provider
 - Identify, and report to their supervisor, any gaps in their ability to deliver the required service including difficulties in completing the tasks within the allocated time

Support workers should consider the 10 principles to handling a bariatric client, which are:

- Ask the client how they normally do the task?
- Plan the task – take a second to check yourself, the equipment, the environment and the client
- Are there any obstacles and space restrictions?
- Is the equipment required appropriate?
- Is the furniture used to pull up on sturdy?
- Does the client have fragile and/or sweaty skin?
- Does the client need rest breaks?
- Allow plenty of time for the client to complete the task/transfer
- Do NOT let the client hold onto you during any task
- Communicate sensitively with the client to help put them at ease
- Do not stand right next to the client
- Use the Points of Control i.e. hip/buttock and shoulder area for MINIMAL directional assistance only
- Ensure the client has their balance once standing before moving
- Check if the client has a manual handling plan
- Participate in training and techniques of safe manual handling

Guidelines for the support of Bariatric Clients (Coker & Wolfe, 2018; Huang et al., 2021; Mendonca et al., 2022; Morissette, 2004; Rush & Muir, 2012)

- Specific bariatric equipment needs to be utilized throughout care and service provision;
- Additional time and resources need to be allocated for caring for a bariatric client;
- Additional assessment is required to consider skin integrity needs;
- Monitor diabetic risk factors;

R E S O U R C E D O C U M E N T S

- External ACIA Guidelines 002 – Care and Service Provision in the Community
- Australian Government. (2020). *Overweight and Obesity*. Canberra: AIHW Retrieved from <https://www.aihw.gov.au/reports/australias-health/overweight-and-obesity>
- Coker, R. H., & Wolfe, R. R. (2018). Weight Loss Strategies in the Elderly: A Clinical Conundrum. *Obesity (Silver Spring)*, 26(1), 22-28. <https://doi.org/10.1002/oby.21961>
- Huang, S. L., Cheng, H., Duffield, C., & Denney-Wilson, E. (2021). The relationship between patient obesity and nursing workload: An integrative review. *J Clin Nurs*, 30(13-14), 1810-1825. <https://doi.org/10.1111/jocn.15679>
- Mendonca, F. M., Silva, M. M., Borges-Canha, M., Neves, J. S., Costa, C., Cabral, P. M., Guerreiro, V., Lourenco, R., Meira, P., Ferreira, M. J., Salazar, D., Pedro, J., Varela, A., Souto, S., Lau, E., Freitas, P., Carvalho, D., & Group, C. (2022). Statin Therapy Among Bariatric Patients: The Impact on Metabolic Outcomes and Diabetes Status. *Exp Clin Endocrinol Diabetes*. <https://doi.org/10.1055/a-1743-2335>
- Morissette, J. (2004). Clinical nurse specialist as leader of a bariatric program. *Nurs Leadersh Forum*, 9(2), 75-79. http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&dopt=Citation&list_uids=16033047
- Rush, A., & Muir, M. (2012). Maintaining skin integrity bariatric patients. *Br J Community Nurs*, 17(4), 154, 156-159. <https://doi.org/10.12968/bjcn.2012.17.4.154>