



## Of Older Adults

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## **MICHIGAN HOME SKILLS ENHANCEMENT PROJECT**

### **Cleaning The Homes of Older Adults**

The Cleaning the Homes of Older Adults, Meal Planning and Shopping for Older Adults, & Food Safety and Meal Preparation Modules were written by Chris Curtin, B.A., RN,C. The Steering Committee included Lead Researcher Maureen Mickus, Ph.D.; Researcher & MSU Extension Liasion Karen Shirer, Ph.D., Michigan Office of Services to the Aging Liasion and Editor Lauren Swanson, M.A. The Home Skills Enhancement Project was piloted by Community Services Network of Michigan in 2006. The final report may be viewed on the OSA website at: <http://www.michigan.gov/miseniors>.

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## Cleaning the Homes of Older Adults

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## **Cleaning the Homes of Older Adults**

### **LIST OF HANDOUTS**

- Agenda
- PowerPoint
- Imagine Exercise
- Role Play 1
- Role Play 2
- Case Study
- Cleaning Work Plan
- Cleaning on a Shoestring
- Establishing a Household Schedule
- Things You Can Do at Home—Preventive Practices

Handouts are listed in the order referenced throughout the module

## **CLEANING THE HOMES OF OLDER ADULTS**

### **Background For The Trainer**

Cleaning is one of the most challenging jobs of a direct care worker who is working in the community setting. The skills required to provide these services include:

- Understand the needs of the person who is receiving the service.
- Recognize safety hazards such as clutter, pets and fall risk.
- Know the basics of efficient, safe cleaning methods.
- Describe how to clean rooms using the recommended sequences.

This program prepares the direct care worker to provide more efficient and effective cleaning services. Specific topics to be addressed include:

- Challenges faced when cleaning for an older adult or person with a disability.
- How the American culture of cleaning affects the preferences of older adults.
- What and how to communicate with the older adult.
- Identifying priorities
- Setting up a work plan with the older adult's input.
- Understanding what is most important to clean in the amount of time allotted.

The direct care worker will learn how to develop a work plan or cleaning schedule for the time they are in the home, and to identify other things that can be done if time allows. Safety hazards and concerns will be identified that the worker should report to the supervisor.

### **Objectives**

As a result of participating in this training program, the direct care worker will:

1. Appreciate personal differences in values and standards related to household cleaning.
2. Practice professional communication with older adults.
3. Describe approaches for addressing safety hazards related to pets, clutter and falls.
4. Prepare a cleaning work plan sensitive to the older adult's needs.
5. Describe the steps for cleaning a person's home from start to finish.

## Content Outline

- Welcome and Introduction
- Activity: Imagine Exercise
- Brainstorm Session about Challenges and Expectations
- The Culture of Cleaning
- Professional Behavior in the Home
  - Scripted Role Play 1 and 2: Setting the Mood and Tone
  - Documentation
- Assessing the Home Environment
  - Pets
  - Clutter
  - Fall risk
- Small Group Work with Case Study
  - How Often to Clean and Why
  - Developing a Schedule
  - Guidelines for Efficient Cleaning
  - Cleaning Products
- Suggested Sequence of Cleaning
  - Cleaning Work Plan -- Weekly Chores
  - Sequence of Cleaning Rooms
  - Sequence of Cleaning Within Rooms
  - Things You Can Do At Home--Preventive Practices
- Evaluation

## Handouts (Handouts follow the module in the order that they are referenced)

- Agenda
- PowerPoint\*
- Imagine Exercise
- Role Play 1
- Role Play 2
- Case Study
- Cleaning Work Plan
- Cleaning on a Shoestring
- Establishing a Household Schedule
- Things You Can Do At Home—  
Preventive Practices

\*May be copied as a handout with three boxes per page.

## Supplies

You will need a flip chart and markers. If you decide to use PowerPoint, you will need a laptop computer with a data projector or an overhead projector. The PowerPoint presentation has been included as a part of the handouts.

## CLEANING THE HOMES OF OLDER ADULTS

### Curriculum

#### 1. Welcome and Introductions ----- 10 minutes

- Introduce the trainers
- Ask the participants to introduce themselves
  - Name
  - Agency
  - Position
- How long working with older adults?
- Ask them to tell the group what type of cleaner they are.
- Draw a continuum on the flip chart, showing 1 as very relaxed and 10 as very picky in their cleaning style. As people introduce themselves, put a check mark near the number they identify. When everyone has introduced themselves, review the flip chart and note that there are many variations in our cleaning style. The older adults we work with also vary in their cleaning style and preferences. This is one reason the cleaning for older adults is very challenging.
- Encourage participation and questions during class. The levels of experience among the group members will vary. We want to acknowledge that those who have been doing this job for many years have wisdom and experience to share. We will discuss guidelines, but know that the experience of the participants will add great value to the class. Some direct care workers may be resistant to attending the class because they have been cleaning for so many years. When their expertise is acknowledged, the direct care worker may be more willing to participate.

#### 2. Understanding The Needs of Older Adults

As a person gets older, the desire to remain independent is strong. Chronic disease and sensory impairments can affect the older adult's ability to function. When a worker first goes into a home, a nurse may have previously visited and conducted a functional assessment. This looks at a person's ability to do their Activities of Daily Living or ADLs. These include normal activities people perform daily including walking, bathing, toileting, dressing, transferring and being able to feed themselves.

In order to remain independent, other skills are necessary. Instrumental Activities of Daily Living or IADLs measure a person's abilities to do these things:

- Shopping
- Transportation
- Telephone use
- Preparation of meals
- Taking medications

- Managing money
- Cleaning
- Doing laundry

Many older adults have a strong desire to remain in their own homes or a community-based setting. The older adults may be able to do some of the above things for themselves, but need help with others. A direct care worker is in their home to do what they need help with. Filling in the gaps helps the person to remain in their own home and have some level of independence.

A home that is clean, safe and comfortable plays an important role in helping the older adult remain independent.

**Activity – 30 Minutes**  
**Imagine Exercise and Brainstorming Session With Flip Chart**

Ask the participants to sit back and get comfortable. Tell them to close their eyes and listen as you read an Imagine Exercise.

**After you have finished, ask them to open their eyes**

1. How did you feel? Write the answers and comment on the feelings expressed.
2. What did you need from the direct care worker coming to your house? Write the answers down. Then ask what other expectations an older adult has when a worker comes into the home to clean. Write the expectations on the flip chart.

**The participants may identify obstacles they encounter when they go into a home. Some obstacles may include:**

- **Reluctance.** The older adult may never have had anyone in their home before to help with things such as cleaning or babysitting. They were raised during the depression and feel that hiring someone is a luxury.
- The person may be **embarrassed** about the condition of the home.
- **Sensory loss.** Older adults may have poor eyesight, not being able to see the dirt that is in the home.
- **Unrealistic expectations.** The older adult may be angry if the worker takes a day off or does not clean up to their standards.
- **Not understanding the scope of work.** For example, they may become upset if the worker is not able to move the furniture around, or do heavy cleaning.
- **Loss of independence.** Having someone help with cleaning makes the older adult face the fact that they are no longer as independent as they want to be. This loss of control can lead the person to be depressed or resentful. They may yell at the worker because they are the only outlet for their frustration. We need to try and be understanding and not take their comments personally.
- The **family** of the older adult may be suspicious or resentful that the worker is coming in to do homemaking. Sometimes the older adult may feel guilty because

they would feel more comfortable if their family completed the homemaker tasks. This can be uncomfortable for the worker and the older adult. Other family members may feel that the worker is there to clean up after them. They may leave a mess in the kitchen and expect the worker to clean it up.

**Brainstorm Session—Write Answers on Flip Chart**

**What are the expectations of the direct care worker when they go into the home?**  
(Allow time for the participants to share their experiences and give examples.)

Some answers may include:

- The home will be safe from biting pets.
- The older adult will have cleaning supplies in the home.
- The older adult will be home when the worker is cleaning if that is agency policy.
- If there is anything the older adult was not satisfied with, they will tell the worker.
- The worker will only be cleaning for the client, not other family members.

**Brainstorm Session—Write Answers on Flip Chart**

**What are the expectations of the agency that sends the worker into the homes?**

Answers may include:

- That the worker will accurately document what happened in the home
- The policies of the agency will be followed.
- The worker knows the policies related to cleaning litter boxes, if they scrub the floors on their hands and knees or not.
- The worker will report any problems as the “eyes and ears of the agency.”
- Reinforce that problems and concerns should be brought to the supervisor. Sometimes workers try to fix a situation on their own without consulting with their supervisors.

**3. The Culture of Cleaning ----- 15 minutes**

As we have seen, there are many challenges in cleaning for older adults. Many are not satisfied with the way the worker cleans their homes. It may be related to their experience with cleaning as they were growing up.

Older adults have experienced a dramatic change in housekeeping methods. They have seen the effects of the post-1950 technology boom that we take for granted such as modern plumbing, electricity, heating systems and refrigeration. Washers without wringers, dryers, vacuum cleaners, synthetic fibers, prepared soaps, dishwashers and microwaves have all made keeping a clean home much easier.

Many of the older adults we serve grew up in a different type of household. Husbands were considered the head of the family who had a job and a public life. Wives devoted all of their time managing a household. The home was the woman’s domain and a great source of pride.

The old fashioned household had a rigid schedule because cleaning was so time consuming. For many, washing day was on Monday. It was hard, physical labor which included putting all the clothes through the wringer after washing, then hanging everything up to dry. Tuesday was set aside for ironing. Everything was ironed from underwear to bed sheets. Wednesday was for sewing and repairing clothing. Some workers will remember darning socks or “turning the collar and cuffs” of a shirt to make it look less frayed. Thursday was the day that all the shopping was done at the market. For many, this was the day that people left the farm and purchased all of the things they did not grow.

On Friday, the house was cleaned. Saturday was for baking homemade breads and coffee cakes. On Sunday, families made the big meal in the early afternoon and rested up for the hard work of washing on Monday.

Laundry was very time consuming. Clothes were washed, wrung and dried on the clothesline. Then the clothes would be sprinkled with water and rolled up in waxed paper and closed with a special clothes pin. They would sit in the refrigerator overnight so there would be no mold or mildew growth. On ironing day when women were young, they began ironing handkerchiefs, and then moved to towels, finally progressing to the highest skill level of ironing shirts. The more we understand the culture of cleaning, the more we can relate to the older adult that we serve.

**Group Discussion Questions:**

- i. Is this schedule of cleaning familiar to the participants?**
- ii. When you think about your grandmothers and mothers, what cleaning lessons did you learn?**
- iii. How much did you participate in cleaning when you were growing up?**

(Many participants will enjoy remembering the rituals of cleaning that they learned from their mothers or grandmothers. Allow time for participation)

<b>4. Professional Behavior in the Home--Communicating With Older Adults ----- 30 minutes</b>
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We communicate with the older adult in many ways. What the worker says is important, how a worker dresses and behaves sends a strong message. What is truly important for older adults? They want the worker to be professional. They want a consistent person coming into their home so they won't have to get used to a new person over and over. They may be anxious when the worker arrives and fear that they will only be there once. We can help to develop a relationship with the older adult by showing professional behavior.

Knowing boundaries while working in the older adult's home is crucial to success. This can be very challenging because one of the main reasons many people work with older adults is because they are considerate and care about them.

### **Brainstorm—Write Answers on Flip Charts**

**What are some boundaries we are tempted to break in the homes where we provide services? Write answers on a flip chart.**

### **Holding Professional Boundaries—Key Points**

Show respect for the older person's value of a strong work ethic--that means showing up on time, working with purpose and not wasting time.

Dress neatly with casual but modest clothing and low heeled shoes, not sandals.

Refrain from smoking in the older adult's home, even if they invite the worker to smoke. If a worker is going to smoke outside, dispose of the cigarette butt in a proper container. If a worker is going to be late, it is helpful to take a moment to call the person. Many of our clients are concerned if the weather is bad, or if the worker does not show up on time.

Some older adults don't have enough money to purchase cleaning supplies or other household items. A worker may be tempted to stop and pick up a few things for them. This does not solve their problem. Instead, if the situation is reported to the supervisor, they may be able to identify a program or source of funding that will lead to a long term solution. Many workers report purchasing food or cleaning supplies for their clients.

Another boundary issue is appropriate conversation. If a worker is in a home over time, they become close to the person. The older adult may be lonely and want to talk about the worker's personal life.

Keep personal problems private. The older person is not there as a sounding board for the worker's problems. Learning about problems may upset the older person and it is not right to cause them undue stress because of a worker's personal life.

It is okay to talk about neutral topics such as how the person is feeling, the weather, and social or current events. It is appropriate to tell a brief humorous story about a child or a fun outing, but keep it light and brief. Then, refocus the conversation back to the older adult.

Confidentiality is very important. In small towns, people know who is receiving visits from direct care workers. It is never appropriate to tell information about another older adult that a worker is providing services for. If questioned, tell the person that this is private information, and keeping their information private is important as well. The Health Insurance Portability and Accountability Act--the HIPAA law requires that we protect a person's confidentiality.

Financial problems may be one of a worker's personal worries. It is never appropriate to ask for or receive any gifts or money from the older adult.

Many workers feel that they can share things with their clients and no one will know. Many supervisors find out about these issues when they conduct their reassessment of services.

When workers go into an older adult's home, they enter their special world. The person may be very lonely and isolated from their family. They may have no other human contact except for you. When the worker arrives, the person may be in need of conversation as much as a cleaner house. It is a great challenge to meet both needs in the short time allowed for a home visit.

Always address the person as Mr. or Mrs. or Ms. when first being introduced to an older adult. Allow the older adult to tell the worker if they want to be called anything different.

It is important to meet the social needs of the older adult. It is a heavy burden to leave a house and have the person follow the worker out, still in need of conversation and human contact. If the person seems extremely lonely, the supervisor may be able to suggest a social program, adult day services or senior companion to the older adult. In most cases we can be courteous and warm and spend the first few minutes in social conversation.

**5. Setting The Mood and Tone ----- 20 minutes**

**Activity  
Role Play 1 and Role Play 2  
(Refer to handout)**

**Ask for two volunteers who are willing to participate in a scripted role play. One will play the older adult and the other will play the direct care worker. Narrate the beginning of Role Play 1 after giving each person a copy.**

**After Role Play 1, ask the following questions:**

1. What was happening between the worker and the older adult?
2. What did the older adult need from the direct care worker?
3. Ask Mary and Mrs. Right how they felt.

**Ask them to read Role Play 2, then ask:**

1. How did the approach of the direct care worker affect the situation?
2. How did the direct care worker meet needs within the boundaries of her job?
3. Ask Mary and Mrs. Right how this role play was different for them.

**Some points to reinforce that are related to the Role Plays:**

Giving the adult undivided attention is important. It is hard not to look at the room to be cleaned, but a few minutes of quality conversation means a lot. You can talk about some of the topics that were just mentioned, or ask about an interesting picture. You

can ask about a hobby that you see a hint of such as a knitting basket or piano. It is helpful if your supervisor can give you some information about the person beforehand.

Part of providing good care is to see the older adult as a person, and to appreciate their life journey. Knowing who the person is and learning about their former occupation, hobbies and families that may be involved in care is very useful.

After a few minutes, go over the work plan for the day. Ask them how things looked the last time that service was provided. Ask if there is anything special that they want done. There may be one small thing that has to be done for them to think the house is clean.

Asking for input and encouraging conversation is important. Many times the older adult may be dissatisfied but unwilling to say anything. If something is bothering them, they will keep it inside until they explode. Asking for feedback is good communication. Try not to take anything personally. The person may be feeling frustrated and without control.

It is important to ask if other workers are coming into the home. The older adult may be receiving services from multiple agencies. Another direct care worker may be coming into the home and doing homemaking. There may be areas of the house that need attention and others that have been recently cleaned.

## **Documentation**

Many agencies require that direct care workers document their visits on a home chart. More than one agency may look at that chart and it is part of the legal documentation.

- Comments should be objective, noting things seen, observed, or done when in the home.
- Opinions are not appropriate on a home chart. Neither is gossip.
- Be factual; remember that it is a legal document.
- Be honest when recording activities in the home. The older adult knows when something was not done and may report it to the supervisor.

## **6. The Benefits of Cleaning ----- 5 minutes**

Cleaning has many rewards. It is satisfying and makes a person feel good about their environment. The direct care worker can make a big impact on a client's well being when providing cleaning services. It gives a person a sense of order and control. It is healthy to have a home free of dust and pet hair.

Efficient cleaning requires many skills, knowledge, intelligence and hard physical labor.

It is important to know how things are done, and where things are kept in each of the households.

Each home is different. Some of the homes are very rustic especially in rural areas. It is hard for us to understand why an older adult would want to be isolated and live in unclean conditions.

We all have our own opinions about how people should live. As a worker, we show respect for a person's right to live as they wish as long as they are legally competent.

Report any concern to the supervisor. If you see signs of abuse, neglect or self-neglect or any other unsafe situation, it must be reported to the supervisor.

As a direct care worker, you have to prioritize what needs to be done in the time allowed to be in the home.

How often should a home be cleaned? What are acceptable standards? Cheryl Mendleson in her book, Home Comforts, defines "good enough" as the "lowest level at which health and safety can be preserved and enough comfort and order maintained to ensure that the home is a place that is comfortable to be in." We all struggle with time and resource management and try and balance the minimal standards for health and happiness.

**Write the words Health, Safety and Comfort on the flip chart**

When we are cleaning, we focus on health, safety and comfort. Some workers have only two hours every week or every other week in a home so there are many challenges in setting priorities.

**7. Assessing the Home Environment----- 30 minutes**

Some things affect the health and safety of the older adult. These are pets, clutter and things that put them at risk for falls.

**Pets**

Having a pet is beneficial for older adults. Pets provide an opportunity to give and receive affection; cuddling a pet can evoke nurturing feelings. A pet can provide protection. Having to care for a pet gives a person the role of a caretaker, which is a familiar and comfortable role for many older adults. Pets do things that are humorous and unexpected, making people feel playful and lighthearted. Studies have shown that pets help to decrease depression, and physically lower blood pressure and heart rate. People who have pets have a higher rate of survival after heart surgery.

Many people are concerned about allergens. Between 2-15% of the population are allergic to cats. People who are allergic to pets may have a stuffy nose, skin rashes or asthma. The main source of allergens is dander. Cats and dogs shed dander, or tiny flakes of skin. Cat dander is so tiny that it floats in the air for a long time. Dog dander is larger and settles more readily. If a pet stays indoors most of the time, there will be more dander in the air. Pet hair accumulates on the rugs and furniture which we notice after sitting in a chair that is covered with pet hair.

## **Tips for Keeping Pet Allergens Under Control**

- Dust and vacuum more often. Concentrate on the rooms that the person spends the most time in, especially the bedroom and living room. Vacuuming is the best way to get rid of hair.
- Wash hands after petting, handling and grooming pets and before eating.
- Train pets to stay off the kitchen counters and the dining room table.
- Have special dishes for pets. Don't let them eat off the same plate as humans. Wash their dishes daily.
- Keep pets off of the bed and out of the bedroom.
- Store litter boxes in a well ventilated room, preferably not the bathroom. Don't have cat litter boxes in the same room where food is prepared and eaten. Change litter boxes when there is an odor.
- Brush the pet to remove hair and keep their beds clean.

These are tips that help to promote health and safety. If a direct care worker is in a home with many pets, using the vacuum on upholstered furniture and rugs will help to cut down on allergens. Focus on the areas where the pets are the most when setting priorities.

### **Group Discussion**

#### **What challenges have you had with pets in homes?**

Note: Include discussion about litter boxes and cleaning up after pets. Agencies have different policies about what a worker can do.

### **Clutter**

The dictionary defines clutter as a heap or assemblage of things lying in confusion or to lie together in confusion.

Sources of clutter are:

- Paper clutter comes from newspapers, mail, children's school papers and catalogues. Paper comes in slip by slip. Slips become piles and piles become mountains.
- Kitchen clutter accumulates when food containers are left out, or things are dropped on the counter. Many older adults keep their medications on the counter and can have multiple containers of outdated medications mixed in with their current ones.
- Clothes, towels and general stuff can accumulate on the floor. It is so easy to drop something and plan to pick it up later. This adds to the chaos in the home, and wastes time when trying to find something.

### **Group Discussion Question**

**Which type of clutter do you find most frustrating?**

**What types of clutter do you see in older adult's homes?**

### **Why Do We Accumulate Clutter?**

- Some people have the need to have extras stored for the future. Some buy and store in bulk, and cook huge amounts of food for leftovers. They feel guilty if they throw anything out. Many older adults went through the Depression and have the habit of saving everything. People never threw anything away in those days. We see older adults who receive home delivered meals save them in the refrigerator because they can't eat it all and don't want to throw anything away.
- We can keep things because of unclear goals or priorities and we accumulate things that we don't use but keep "just in case". At home, we may set aside a catalog or a piece of mail to deal with later.
- Some people think clutter is creative. They think that having a chaotic, disorganized environment is stimulating and it enhances their creativity.
- Sentimental attachment can prevent us from throwing things away. We hold on to the past. We can't let go of objects that no longer serve us or may not even like.
- Lack of storage space contributes to clutter.
- When a person has dementia or memory loss, clutter can begin to accumulate. We might see more and more reminder notes littering the counter, or newspapers and mail piling up on the floor. Trash may be left in the kitchen. This is a sign that the person is having trouble and should be reported to the supervisor, especially if there is a safety hazard. When there are rats coming in and rustling in the piles of trash and newspapers, action has to be taken.

When we accumulate clutter life becomes more difficult.

- It is frustrating to look through piles for something that is lost.
- When cleaning, it is necessary to stop and put things away or move them to clean around them.
- The clutter becomes dusty and needs to be cleaned.
- In some cases clutter can be dangerous.

**Brainstorm Session—Write Answers on the Flip Chart**  
**What strategies do you have for controlling clutter?**

**Answers may include:**

Strategies for a Clutter Free House:

- Establish a place to put things. Put them where a person would go to get it. Make popular items easy to find.
- When picking something up, don't put it down until it is put in its proper place. How often do we pick up a book, get distracted and just put it down in another room? It still has to be put away, the clutter has just moved to a new location.
- Look at the clutter. Ask yourself if you really need it if you have not used it in 6-12 months. One strategy is to put all of the clutter from a drawer, closet or cabinet and date it. Use things as you need them and then put them away in a box. After 6 months, throw away what is left.
- Spend a few minutes every day doing a quick pick up. Take a basket and go through the house quickly picking things up and putting them in their proper place.
- Set limits on things to keep.

- Keep the areas at the top and the bottom of the stairs clutter free.
- When leaving a room, quickly take a look around and see if there are things to take to their storage location.
- There are a variety of storage boxes available for organizing your stuff. Clear ones let you see the contents. Labels help you to locate things quickly.

We know that the older adult's home is their castle. We have to respect their style and taste. It can be a real challenge to clean homes with a lot of clutter. We can ask the older adult about items as we tidy up before cleaning their home. They may need a pile of newspapers moved, but are unable to carry them.

## **Hoarding**

Clutter can be dangerous. There have been incidences when people accumulated so much clutter that floors in apartment buildings have collapsed.

Hoarding is defined as excessive acquisition or possession of objects that have little use. Almost half of all hoarding complaints involve older adults. Many are women who live alone. Hoarding occurs in about 20% of persons with dementia. If you see that a person is hoarding and you are concerned about their safety, report it to your supervisor.

## **Falls**

Clutter on floors, piles of newspapers and mail along the walls is not uncommon in homes of older adults. Some have only narrow passageways through living rooms with piles of clutter surrounding them. Things on the floor can lead to falls. This is especially true for persons with dementia. When the part of the brain that processes visual and spatial things is affected, it is hard to tell where your body is in space. This can lead to falls.

Nearly 35-40% of older adults fall every year. Of those, 10-20% of the falls cause serious injuries. Falls are the leading cause of death in people over 85. More women fall, but they have a lower death rate. Fractures and brain injuries are the most serious things that happen.

- 95% of hip fractures are from falls
- 20% die within a year after the hip fracture
- 25% will be living in a nursing home one year later

## **Risk Factors Associated With Falls**

- Older age
- Female
- Chronic disease
- Mental impairment
- Too many medications
- Vision or hearing deficits

- Bowel or bladder problems
- Muscle weakness, gait and balance problems
- History of a previous fall

### Things that Contribute to Falls

- Clutter in walkways
- Lack of stair railings or grab bars
- Dim lighting conceals obstacles and tricks the eye when a person is trying to figure out depth and distances. Older adults need more light to see. They are susceptible to glare. It is important to light the way between the bathroom and bedroom at night.
- Lighting is important for the top and bottom of the stairs. There is a higher risk for falls if a stair is uneven on the top or bottom stair. Rails on both sides should reach from the top to the bottom of the stairs and be strong enough to support weight. Loose carpeting, matting or loose rubber treading can catch a foot and cause a fall. There should not be throw rugs at the top or bottom of the stairs. Stairs that are dusty can be slippery. After cleaning, make sure they are dry. Placing reflecting tape on the top and bottom stair can help a person to avoid falling as they can clearly see the step boundary.
- Rugs--Many people fall because of loose or improperly backed rugs. Throw rugs at entrances need to have a non-skid backing. Other floor surfaces that can get wet are the bathroom, shower, kitchen and laundry room.
- Furniture--There should be free traffic flow in a room so that when you walk through a room you don't have to walk around furniture.
- Electrical cords and wires from lamps, telephone wires and extension cords may be lying on the floor.
- Reaching--When older adults reach over their heads, they sometimes fall backwards. Frequently used items should be stored within reach.
- Environment--A person with dementia depends on their environment to be predictable. Many falls occur when some well meaning person moves the furniture around.

## 8. Strategies for Efficient Cleaning----- 20 minutes

**Activity  
Case Study  
(Refer to handouts)**

Break up into small groups. Read the Case Study in the attachment. Allow 15 minutes for the groups to work on the questions.

1. Where should Mary start? Look for answers that talk about the need to talk to the client first before getting started. Many will also have planned to start laundry first.

2. How does Mary set priorities? Allow participants to give their answers which may include that they do the kitchen and bathroom first. Also they will want to do laundry and put a damp cloth over the stain in the kitchen. She will want to soak the dishes so she does not waste time scrubbing them.

When going into an older adult's home, cleanliness is your goal and a cleaning schedule is your road map. If you don't have much time in the home, you have to set priorities. A regular, systematic cleaning schedule saves time, effort and frustration. If you don't have a cleaning schedule, you end up reacting to the current situation. You waste time debating what to do first. Once good habits develop, it will become routine.

Health is a priority when cleaning. Clean bedding, bathrooms, kitchens and floors are a priority. Removal of dust helps reduce allergens. One expert estimates that 50-80% of food poisoning is from food borne illness which originates in the home. Therefore, regular disinfecting of sinks, faucets, doorknobs, cutting boards, refrigerator handles and toilets are a priority.

3. In what order should she go as she cleans the house? Allow several to answer. Then give them the handout **Cleaning Work Plan**. Go over principles of dry to wet, top to bottom and in to out. Look at the sequence of cleaning each room and point out the sequence of rooms. Some may say that they want to do the kitchen and bathrooms first because they want the floors to be dry before they leave. Most report bathrooms taking 30-45 minutes depending on the bathroom and around 45 minutes for the kitchen.

Explain that these are recommendations only and meant to present ideas of what some experts recommend. The participants may feel strongly that their ways are better and respect for their opinion is important.

4. What can she substitute for cleaning products? Allow participants to give their answers and then give them the handout **Cleaning on a Shoestring**. Allow time for the participants to go through the booklet and discuss their favorite products and their uses. Many will have examples of using vinegar for a variety of reasons. Also refer to the handout, **Establishing a Household Schedule**.

There are chores that need to be done weekly to keep a home safe, healthy and comfortable. There are cleaning principles that we can follow. A work plan can be used and reviewed with the client before you start cleaning. The plan should be based upon the following things:

- The amount of time you have to do the cleaning
- The rooms to be cleaned
- The number of jobs on your list for each room
- The extra jobs listed that could be done if time allows

One of the biggest challenges is cleaning without distractions. Distractions are far more time consuming than they seem. Take all supplies into the room. Put the garbage and unwanted items into the hallway.

Make sure you tidy up a room before you start cleaning. The key to being efficient is to know what you are doing and why. When you are organized and knowledgeable, you can speed through chores in a minimum amount of time.

### **Guidelines for Efficient Cleaning**

- Proceed from higher to lower-upstairs before downstairs. Do the higher places in each room before the lower.
- Work from dry (vacuuming, sweeping, scrape and dust before you add water) to wet. Do dry rooms first (bedrooms, living rooms) before wet (kitchen, bathroom, laundry room).
- Go from inside to the outside of the house.
- Begin chores first that require a waiting time. For example, when you get to the house, strip beds and gather laundry so you can start the washing right away.
- Before you start cleaning, collect all the supplies you need together. Some people use a bucket, tray or apron with pockets.
- If something is not dirty, don't clean it.
- Spot clean if necessary. Everything may not be dirty.
- Don't spend time scrubbing. Let the cleaner do its work and remove the stain or spill for you.
- Less is more with cleaning fluids. Use only the amount of cleaning product that you need. You waste time and money mopping up.

### **Refer to the Cleaning Work Plan Handout**

- Bed linens
- Vacuum rugs, floors, upholstered furniture, lampshades
- Wash floors
- Dust surfaces, objects, pictures, mirrors, lights and light bulbs
- Wipe doorknobs, woodwork and telephones
- Bathroom toilet sink, tub, wall tiles, toothbrush holders, fixtures, front of cabinets, mirror and floor
- Kitchen refrigerator, stove, appliances inside and out, clean sink, counters and tabletops, backsplashes, floor and garbage cans.

### **Sequence of Cleaning for Most Efficient Use of Time**

- Gather laundry
- Sort clothes
- Start wash
- Go upstairs if cleaning that area
- Bedrooms
- Hallway
- Bathroom
- Go downstairs
- Living room, family room, den, dining room, bathroom, kitchen
- Porch

The direct care worker may not have time to do all of the rooms in the house. A work plan developed with the older adult will help to set priorities.

### **To Be the Most Efficient In Each Room:**

- Take in all cleaning supplies
- Stay in each room until done
- Pick up soiled laundry, put it into a basket
- Empty trash into a garbage bag
- Pile misplaced items outside the door
- Clean around the room in a circular fashion
- Start at the top and work down
- Always do the floors last, finish at the doorway
- Make sure the floor is dry before you leave the home

**The following is a detailed description of recommended cleaning steps for each room. Much of the same information is on the Cleaning Work Plan.**

### **Dusting and Vacuuming**

**Group Discussion Question: Do You Dust or Vacuum First? Have you ever had an older adult tell you that you should always vacuum first and then dust? Has anyone asked you to dust the ceiling?**

Before vacuum cleaners were invented, people would sweep the carpets with brooms. People would cover their furniture with dust cloths. The sweeping would create cloud of dust that would land on everything in the room. After the sweeping, the cloths were removed and everything was dusted. Today, with our modern vacuum cleaners, we don't stir up nearly that amount of dust. If an older adult asks you about this, talk to them about their memories of cleaning before the vacuum cleaner was invented.

**Go through each section, asking the participants what they do in each area. Ask about their challenges. They may want to share their own cleaning tips at this time.**

### **Dusting**

There are many commercial products in stores for dusting. There are spray on waxes and pre-treated dusting cloths available. Some people prefer the simple method of using a slightly damp cloth. The wood should not be left damp, so having the cloth only slightly damp is critical. Use a well worn dish towel, or piece of flannel, something that is lint free.

If you use dusting spray, spray it lightly onto the wood. Use a gentle oval motion along the grain of the wood and use a slight downward pressure. Turn or fold the cloth often, as soon as it becomes soiled. Keep several clean cloths on hand; use a fresh one for delicate or valuable items. Feather dusters are popular with some people. Others feel that they remove dust poorly and that they fling the dust into the air.

## **Vacuuming and Sweeping Floors**

When people walk on a dusty floor, their feet grind in dust and make the floor dull. Dirt and dust are harmful to carpets and upholstery, settling deep into the fibers and making tiny cuts. This causes the fibers to break down. The more often a person vacuums, the better for the carpet. A reasonable goal might be to vacuum thoroughly on cleaning day and partially clean high traffic areas once or twice more. Vacuum more often if you have a pet. Even if the floors look clean, vacuuming removes dust from the floor that is picked up and circulated in the air.

Bare floors can be vacuumed or dust mopped. Dust mopping is the least effective, but better at removing a layer of grime that adheres to the floor and cannot be picked up with a vacuum. When you are cleaning the entire floor, begin on the side of the room that is opposite your intended exit and end at the door. On wood floors, rub or vacuum in the direction of the wood. Never use dusting sprays on floors, they will become slippery.

To use a dust mop, dampen it slightly with plain water. Make all strokes in one direction. If you go back and forth, you just pull the dirt with you. Lift the mop slightly to move it back for the beginning of a stroke. You have to work carefully so you don't raise a lot of dust. You can shake the dust mop outside or into a trash can or garbage bag.

## **Vacuuming Hard Surface Floors and Carpets**

Start at one side of the doorway and proceed in a circular fashion around the room. Vacuum carpets slowly, going over each section several times. Check the bag often to make sure that it is not too full. There may be some type of filter that needs to be checked.

## **Cleaning Hard Surface Floors (Vinyl, Tile or Wood)**

Vacuum, dry mop or sweep the floors to remove and loosen dirt. Use lukewarm water and dishwashing detergent to create a sudsy solution. Dip a mop or rag into the water and squeeze it out. Rub the floor only enough to remove the dirt. Rinse the soap solution off by dipping the rag or mop in clean water and re-wiping the floor.

## **Cleaning the Bathroom**

This may be the least favorite room to clean for most people. Soap scum, mildew and hard water are the challenges in the bathroom. The goal is to prevent mold and mildew from growing in the bathroom. Older adults may have shower chairs or other things that need to be cleaned.

## **Sequence of Cleaning for the Bathroom**

- Remove throw rugs. If they have a latex backing, they can be washed alone in the washing machine.

- Squirt toilet bowl cleaner into the toilet.
- Sweep or vacuum hair from the counter sink and the floor or wipe hair up with a paper towel.
- Spray the shower, tub, walls, tile, shower door or curtain with all purpose cleaner and let it sit.
- Clean soap dish in the shower.
- Spray a small amount of cleaner on the mirror and wipe until dry with a paper towel.
- Wipe the front of cabinets, door, light switch plates and door knobs.
- Move any items on the sink to one side. Clean one side, then move and clean other side.
- Clean the sink.
- Spray off the shower top to bottom and rub with a cloth or nylon scrub pad. Wipe shower down or squeegee and replace soap dish. Pull the shower curtain across so that it can dry off or leave the shower door open.
- Finish cleaning the toilet bowl if soaking, then flush. Put seat up and spray with disinfecting cleaner. Wipe each side of the toilet off. Clean the tank, base, handle and exposed pipe.
- Clean the toilet paper holder.
- Go around the perimeter of the room. Wipe towel racks; refold towels and dust pictures and shelves.
- Sweep the floor.
- Wash the floor last. Wipe lower walls and baseboards as you do the floor.

## **Cleaning the Kitchen**

The kitchen is the most germ laden room in the house. The sink, drain, and dishcloths are germ paradise. Germs you would expect to find in the toilet rim like fecal coli from bacteria are seldom found in the toilet. But they are everywhere in the kitchen. Bacteria thrive in moisture and food. Wet dish cloths, rotting garbage, spoiled food, raw meat juices and unwashed hands all contribute to food borne illness. It takes more than vinegar and baking soda to disinfect. There are disinfectant cleaners approved for use in the kitchen. The cleaner should be used for routine and daily clean up on surfaces that have contact with raw meat juices. Look for products that kill salmonella with the EPA registration number on the label.

## **Sequence for Cleaning the Kitchen**

- Tidy up the kitchen.
- If the stove is electric, remove the drip pans and soak them in a strong solution of automatic dishwasher detergent in the sink.
- Check floors, counters, cabinets for spots, spray with cleaner and let them soak.
- Clean off stove top spills.
- Polish the stove top, knobs (be careful not to turn them on with cleaner or window cleaner).
- Scour the drip pans, dry and replace.
- Clean the refrigerator inside the door along the rubber gasket and the outside of the door.
- Use glass cleaner and paper towels to wipe off appliances.

- Going left to right, wipe off cupboards, doors and doorknobs, light switch plates, and the kitchen table.
- Clean counter tops, pull things forward, wipe and replace.
- Wash the window above the sink.
- Clean the sink, around the opening and the lip around the edge to the sink.
- Polish the sink fixtures using a toothbrush if necessary around the handles and base of the fixtures.
- Empty the trash.
- Sweep the floor. Begin at the walls and aim to collect the dirt in the center of the room. This will be the shortest distance. Sweep the dirt toward you, brushing it with repeated, light strokes from all corners of the room until you have a tidy heap that you can brush into a dust pan. Don't lift the broom off the floor at the end of a stroke or you will fling the dust and dirt into the air.

### **Germ Stopping Habits**

- Wash your hands frequently with special attention to between the fingers and under the nails. Use warm, soapy water for at least 20 seconds (the equivalent of singing the Happy Birthday song twice) and rinse. Avoid touching the faucet, use a towel to turn the water off or you will recontaminate your hands. Wash your hands when you arrive at someone's home and before you leave. Wash your hands after using the bathroom, sneezing or coughing, smoking, eating or drinking or petting animals.
- Use paper towels to wipe up meat juices. Put them in a plastic bag with the meat wrappings before you discard them. Wipe the counter with a disinfecting cleaner.
- Bacteria thrive on dirty dishes. Make it a habit to do the dishes promptly or put them in the dishwasher. Wash your hands before you put dishes away.
- Empty the trash every day.
- There are many opinions about using sponges or dishcloths. Anything that is left wet in the kitchen is a breeding ground for bacteria. Those who like sponges say that they are now antibacterial and can be cleaned by putting them in the dishwasher or a bleach solution. People who use dishcloths don't like the little nooks in the sponges where food particles can get trapped. Any odor is a sign of bacterial growth. If you wipe a counter with a dishcloth or sponge that is not fresh, you are spreading germs all over the counters.

### **See the Handout on Things You Can Do at Home--Preventive Practices**

Providing homemaking services can be a challenge. Communication with the older adult is an important part of meeting the needs of older adults. We have presented some strategies for making the job more efficient. Hopefully, some of these may make it easier to keep homes clean and less chaotic.

**Evaluation-----5 minutes**

What are the key points that you learned that were most interesting?

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

What type of things might you do differently?

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## Resources

The following resources were used in developing this module:

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