

Guide to specification for moving & handling in a toilet environment



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Regardless of ability, 20% of our adult population has difficulty doing everyday tasks.¹

Going to the toilet is one of the top 10 most 'dangerous' activities² in and out of home.

Yet it is something we all do, on average, eight times a day.

Falls cost the NHS at least £4.6m/day, represent 50+% of hospital admissions.³

Low falls cause five fatalities and over 150 major injuries to care residents each year.⁴

People handling is the most common cause of injury to health and social care staff, with over 500 injuries to employees per annum. Transfer from a wheelchair to toilet was rated as the most stressful task undertaken by care workers.³

Using appropriate mobility, moving and handling aids when going to the toilet reduces risk of falls and injuries, restores some or all of the user's control over their limitation, enhances their dignity and independence, and reduces carer cost. Good specification requires balancing short-term budget costs and user needs, to the user's potentially changing requirements over time, achievement of best value from the chosen aid(s)' lifetime costs.

There is also the consideration of the financial cost of providing carer support for the user's needs now, and as they change, against the cost of appropriate equipment be it for the short, medium or long term.

MOVING

For the majority of elderly or disabled people, the main issue is just getting on and off the toilet.

Grab rails/support arms



Assistive technology as basic as a grab rail can give extra leverage and security as the user gets on and off the toilet, whether or not a carer is in attendance. Such rails do require a relatively high degree of flexibility in the legs. The type of grab rail depends on the size of the room, and the room's wall construction/strength. The rail needs to be within easy reach, without causing unnecessary stretching, and at a distance and height to provide stability and leverage.

Walls may be too far away, nor bear the load, especially if a modern stud wall. Then, drop down rails may be an appropriate solution, either fixed to the wall or floor behind the WC.

If space is really limited, and/or wall or floors not suitable for fixed rails, drop down rails/ support arms may be attached to the toilet. It is possible with some support arms to further have a pommel fitted to either or both arms, giving additional, 'stepped' leverage.

Paediatric solutions

One child in 20 under the age of 16 is disabled – a 62% increase in the past 25 years. Children of all ages need proper support when going to the toilet. Research shows that using functional rooms, including the toilet, was the second biggest problem for families with a severely disabled child. It also impinges on the child's self-care skills.⁷

The most basic toilet supports provide orthopedically-contoured backs to position the child or young adult correctly over the toilet, with straps to support them in that position.

Where greater support is required, a full seat version delivers functionally-correct postural support through back to and including the pelvis.

Bariatric solutions

A quarter of the UK's adult population is now obese.⁵ Obesity poses problems in ensuring users are properly positioned, and supported, on the toilet. Their weight places additional loading on seat fittings.

Whilst there is no standard weight limit, most bariatric aids will bear up to 55stone/770lbs/346.5kg.

A bariatric toilet seat has a wider seat and stronger fixings to address these issues.

Where the user is of greater girth/width, a bariatric bench gives greater surface area for sitting, with an appropriately proportioned opening over the toilet pan, and greater body support whilst sitting.

Toilet lifters



If leg flexibility, or balance, are issues, toilet lifts automatically lower and raise the user onto and off the toilet. Toilet lifts replicate the natural motion of standing up and sitting down. They gently raise and lower the user to position them accurately over the toilet as required whilst enabling their feet to remain in contact with the floor and maintaining the centre of gravity above the feet for balance. After toileting, the lift can be raised by degrees to ease access for cleansing.

Shower & toileting chairs



Commonly referred to solely as shower chairs, they have an appropriately-positioned opening in the padded seat to enable access to the toilet pan. They are purpose-designed and engineered for optimum suitability to the environment in which they will be used, with stainless steel (rust-free) frames, and wipe-clean upholstery.

Self-propelled and carer-propelled options are the standard, but versions exist which can be converted from one to the other as the user's needs change.

Paediatric options

A Hygiene & Toileting System (HTS) delivers optimum adaptability to accommodate personal hygiene requirements – showering, toileting and bathing – from one core unit. It has been purpose-designed to ensure the occupant is supported, in the best position for good hygiene.

Available in small, medium and large options, the standard system can be easily adjusted through height, seat depth and backrest, without tools, according to needs, and as the child grows. A range of accessories including lateral supports, seat and back pads and a footboard enable the system to be tailored to specific occupier and carer requirements.*

HANDLING

By law, workers should not attempt to move anything, or anyone, weighing more than 25kg single-handedly.

Hoists



When the user needs greater physical assistance to transfer, a hoist ensures the manoeuvre is undertaken securely and safely, for both user and carer.

Variants include wheeled frames and ceiling track. Choice is influenced by budget, and whether it is for:

- a single or multi-user environment,
- for use in one room or beyond,
- the layout of the room ie whether ceilings and

walls are robust enough to bear the necessary load, and the positioning, and style/protuberance of fixtures and fittings.

The transfer requirement is also a major factor, be it moving someone from wheelchair to toilet (at similar height), or a requirement for height adjustability eg from wheelchair to changing table.

Changing tables



Studies suggest that in the UK "major faecal incontinence" affects 1.4% of the general population over 40 years old, and similar numbers of young children. Of those older people in institutional care, 25% are affected by bowel incontinence.⁶

A changing table provides a safe, stable and hygienic environment on which to lay a child or adult to clean them and change continence pads. They can be folded flat against the wall when not in use to optimise space, and usually feature water collection elements to avoid water being splashed onto the user or carer, and for ease of cleaning after use.

Wall-mounted fixed, mobile and height adjustable variants are available and again choice comes down to structural wall strength, room size and the ability, or otherwise, for the carer to manually lift their charge onto the table.

Clos-o-Mat

The UK's first, and still biggest-selling, supplier of automatic wash and dry toilets, Clos-o-Mat has sold over 40,000 units since it was founded some 50 years ago, many of which are still in daily use 30+ years after being first installed.

Today the Clos-o-Mat Palma Vita floor-standing automatic toilet is the industry benchmark, being the only one of its kind developed specifically for disabled people.

The Palma Vita is the only unit of its kind to achieve Medical Device Class I certification.

Clos-o-Mat has extended its expertise to now offer a range of accessible bathroom and wetroom equipment, including shower chairs, the Aerolet range of toilet lifters, which replicate the human action of standing and sitting, positioning the user exactly over the toilet if the person has mobility, balance and/or flexibility issues. A range of changing tables, hoists and support systems are also available, enabling a single-source for toileting independence.

As a result, the company is unique in delivering in house design advice, supply, installation, commissioning and aftercare service & maintenance through its own dedicated team of engineers.

1. RICA inclusive design research
2. RoSPA (HASS,LASS)
3. Age UK
4. Health & Safety Executive report into care homes
5. Health & Social Care Information Centre survey
6. Hunskaar, S., Lose, et al. (2003) Prevalence of Stress Urinary Incontinence in Women in Four European Countries
7. Every Disabled Child Matters survey into housing needs



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