Soothing Touch CNA Training Model
Hospice & Palliative Care Center

Objective: To achieve a consistent, intentional use of Soothing Touch techniques by HPCC/RHPC CNA’s in their direct care of patients. The practice of Soothing Touch furthers the mission of HPCC by providing highly competent, quality, patient-centered care within homes, inpatient facilities, and long-term care facilities.

Why touch?
Touch is a critical component of quality, compassionate, and effective patient care.

“It is easy to incorporate meaningful, thoughtful touch into a visit.” - HPCC Aide

- Touch communicates the CNA’s feelings and intention for the visit.
- Touch gives the patient messages about the CNA’s presence (or lack of presence) “in the moment.”
- Being present with a patient creates security for the patient, and ensures that their needs are being noticed and responded to by the CNA.

“What you think comes through your hands.”

Being present is a necessary practice in providing quality patient care.

“We have only this moment, sparkling like a star in our hand ... and melting like a snowflake. Let us use it before it is too late.” - Marie Beynon Ray

Practicing Presence
- Feel your feet on the floor
- Visualize a backpack or bag and leave your (personal) stuff on the door step
- Be aware of your breath

Setting self aside to increase patient focus
- Sit comfortably with both feet flat on the floor
- Allow your spine to be long
- Push your feet onto the floor
- Take 3 long, slow breaths
- Image you have a back pack in front of you
- Take 3 long, slow breaths
- Image you empty it on the floor in front of you
- Only pick up what you need in this moment, leave the rest
- Take 3 long, slow breaths

What you think really does come through your hands!
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Exercise A:
- Stand more than an arm’s length behind a partner
- Allow your mind to get REALLY busy- thoughts, worries, frustrations, grocery list, to do list, etc.
- Place your hands on the shoulders of your partner
- Have your partner notice what they feel and are experiencing
- Step away from your partner

Exercise B:
- Become present, standing at least an arm’s length behind your partner
  - Breathe
  - Push feet into floor
  - Clear your mind
  - Think only of the person in front of you
- Step up and place hands on shoulders of partner
- Have your partner notice what they feel – is there anything different from part A?
- Exchange places and practice Exercises A and B again
- Talk about the exercises

When is Soothing Touch indicated?
Soothing Touch interventions must be initiated by the Skilled Nurse before they can be applied. These techniques may:

1) provide extra tools for care and connection when a patient declines a visit,
2) enable the CNA to soothe an anxious or resistant patient and ultimately complete personal care guidelines,
3) bring greater comfort and nurturing to the patient as the guidelines are carried out.

Soothing Touch techniques are most often easily integrated into the normal course of care. They are not designed to create additional requirements for the completion of a visit. Soothing Touch may not stand alone on the CNA guideline: the guideline must also indicate a need for personal care.

Do not provide Soothing Touch to a patient before consulting with the SN if changes in the patient’s condition (i.e. swelling, wounds, reported pain, etc.) are observed. This may indicate a need for changes to the CNA guideline.

How is Soothing Touch different from Massage Therapy?
Simply put, Soothing Touch is not the same as Massage Therapy. CNA’s do not have the training of a massage therapist, and are not providing massage to patients. Soothing Touch should not be referred to as equivalent to Massage Therapy. However, CNA’s can provide comforting touch within their scope of practice. Soothing Touch elevates that use of touch so that it is intentional, consistent, and provides the greatest possible level of nurturing to the patient.
1. Hand Rub
   - Apply lotion to the patient’s hand
   - Cradle patient’s hand (palm up) in both of your hands
   - Work in a circular motion on palm of hand, using both of your thumbs
   - Work from the center of the palm to the sides of the palm
   - Turn the hand over, continuing to support in one of your hands
   - Provide light, long gliding strokes up the back of the hand, connecting to the wrist
   - Gently massage each finger from the base of the finger to the tip
   - Place hand in a comfortable position and continue with other hand, as indicated on guideline
     - Do not rub reddened or open areas
     - Consult with SN before hand rub if swelling appears to be present

2. Foot Rub
   - Ensure that the patient’s body is well-supported and that foot is resting in a comfortable position
   - Apply lotion to the patient’s foot
   - Work in a circular motion on the sole of the foot, using both of your thumbs
   - Work from center of the foot to the sides of the foot
   - Provide light, long gliding strokes up the top of the foot, connecting to the ankle
   - Return foot to a comfortable, supported position and continue with other foot, as indicated on guideline
     - Do not rub reddened or open areas
     - Consult with SN before foot rub if swelling appears to be present

3. Back Rub over clothing
   - Ensure that patient is in a comfortable, supported position
   - Working over clothing, stroke upward from base of spine to neck, around shoulders and down sides of back and buttocks
   - Use long, gliding strokes and circular motions with light pressure
   - Avoid direct pressure to spinal column
   - Use gentle rocking motions to evoke a deeper relaxation response

4. Back Rub during bathing
   - Complete bath
   - Apply lotion to your hands
   - Stroke upward from base of spine to neck, around shoulders and down sides of back and buttocks
   - Use long, gliding strokes and circular motions with light pressure
   - Avoid direct pressure to spinal column
   - Use gentle rocking motions to evoke a deeper relaxation response
   - Continue with lotioning protocol
     - Do not rub reddened or open areas