

# Recognizing and Instituting Emergency Procedures

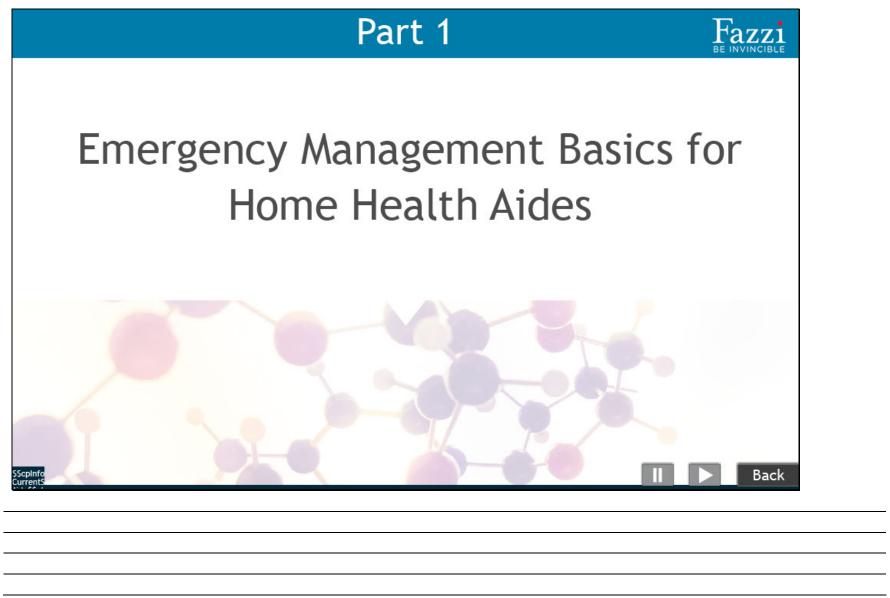
Slide 1 - Recognizing and Instituting Emergency Procedures



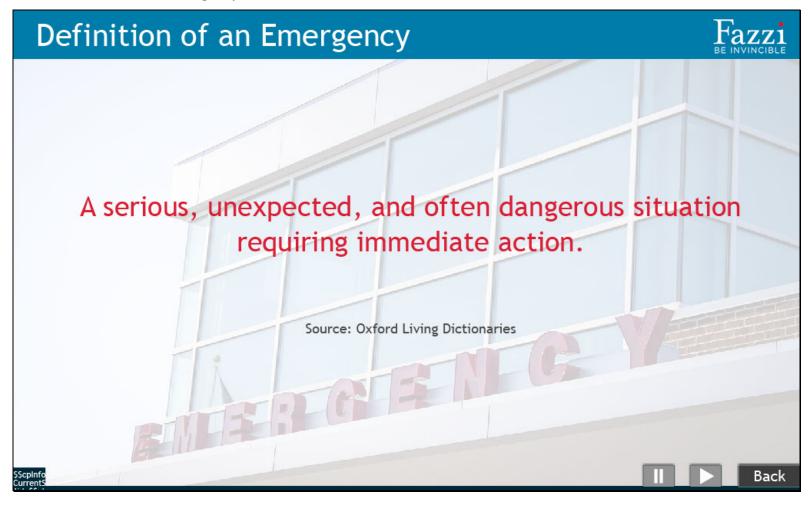
#### Slide 2 - Learning Outcomes

# **Learning Outcomes** • Describe the aide role in emergency situations · List steps for managing medical and mental health emergencies · Describe natural disaster safety preparation and procedures · Explain how to respond to home accidents · Describe how to prevent and manage safety emergencies Back

Slide 3 - Part 1: Emergency Management Basics for Home Health Aides



Slide 4 - Definition of an Emergency



#### Slide 5 - Medicare Home Health Emergency Preparedness Guidelines

## Medicare Home Health Emergency Preparedness Guidelines

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- The agency has an updated employee communication plan
- · Each patient has an emergency plan
- Patient emergency contacts are listed in the medical record
- · The agency identifies each patient's risk level
- The agency has a plan to maintain operations during an emergency



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Slide 6 - Know Your Agency Emergency Procedures

## **Know Your Agency Emergency Procedures**





- · Your job responsibilities in an emergency
- Communication with your agency in an emergency
- · Patient risk levels
- · Patient emergency plans
- · How to create your own personal emergency plan

Slide 7 - Home Health Patient Risk Levels

### Home Health Patient Risk Levels · Home visit within 24 hours · High priority Level 1 Require uninterrupted services High Risk Condition unstable, may deteriorate or require inpatient admission if not seen Home visit within 48-72 hours Level 2 Caregiver available to provide basic care Medium Risk · May postpone visit if nurse or therapist makes telephone contact · Condition somewhat unstable, but could be postponed without harm to patient · Home visit can be deferred longer than 72 hours Low priority Level 3 Condition stable Low Risk · Basic care provided by family caregiver · Can safely miss a scheduled visit Source: Office of Public Health Preparedness, Michigan Department of Health and Human Services, Home Health Emergency Preparedness, A Handbook to Assist Home Health Care Providers in Emergency Preparedness Planning Back

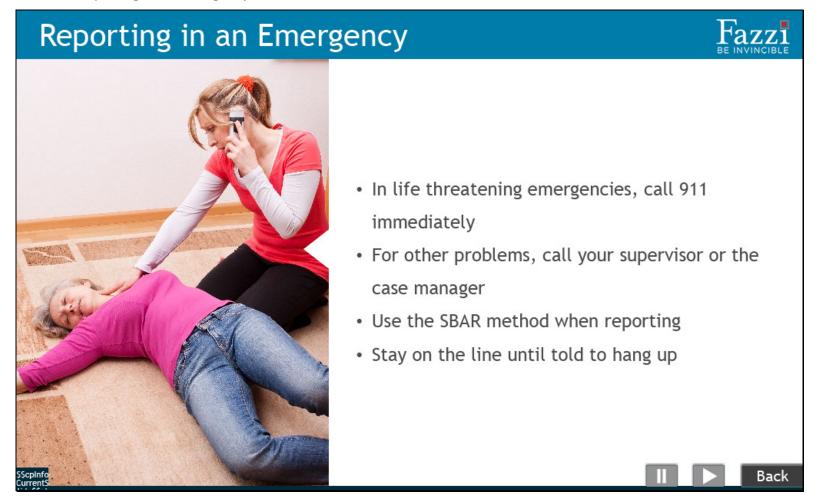
#### Slide 8 - Quiz 1: Following Emergency Procedures

# Quiz 1: Following Emergency Procedures Check off three important things that aides must do to follow agency emergency procedures: Give your supervisor an updated list of your current phone numbers Get out of the area as soon as a disaster is predicted Check for messages from your agency using the method described in the agency emergency procedures section of this program Go right out to see your patients as soon as a disaster is over without waiting to hear from Create your own personal emergency plan Submit Next

Slide 9 - Four Steps to Good Emergency Management



Slide 10 - Reporting in an Emergency



Slide 11 - Use the SBAR Method for Efficient Reporting

## Use the SBAR Method for Efficient Reporting Situation: I am calling to report that Mrs. Jones has just cut her arm. Explain what is happening and why it is important. **Background:** She slipped on a scatter rug while walking to the bathroom. The wound was bleeding heavily, so I put pressure on it and Describe the circumstances that led up to taped a sterile gauze pad over it. the situation. Assessment: The cut is just oozing a small amount of blood now. The cut is about 2 inches long and fairly deep. Her vital signs are OK and she is calm. Describe the current situation. Recommendation: I think she needs to see a doctor. She might need stitches. Explain what you think needs to be done. Back

Slide 12 - Stay Calm in an Emergency

# Stay Calm in an Emergency Prepare yourself by learning emergency procedures Take deep breaths and count to 10 Use self talk: "I can cope with this." "I know what to do." Focus on actions you need to take, not on your own emotions Back

#### Slide 13 - Meet Caroline

## Meet Caroline

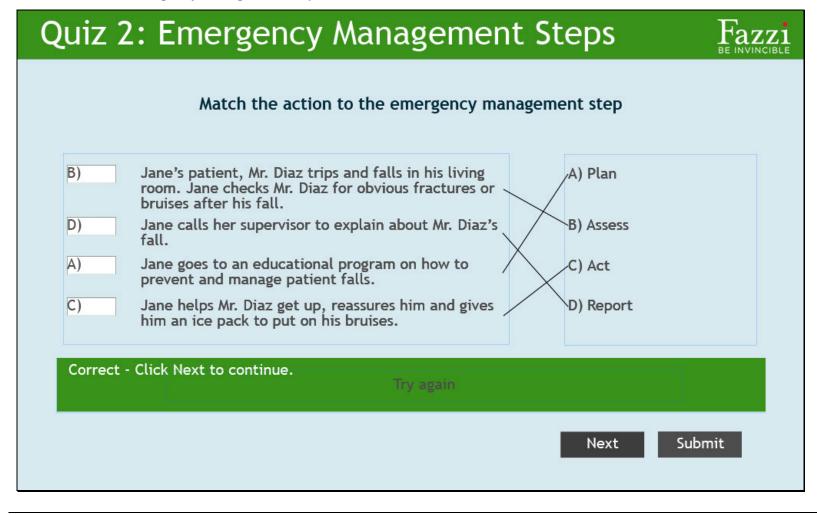
Caroline is a home health aide with 5 years experience. She attends her agency's emergency preparedness program. After the training, Caroline decides to get serious about planning for emergencies.

- She takes a first aid course, learns hands only CPR and how to manage choking
- She thinks about how she would fight panic in an emergency
- She creates an emergency plan with her family and teaches her children how to call 911
- She puts together a personal emergency supply kit in her home
- When there's a fire in her building, her family all get out safely
- When there is a blizzard in her area, she follows emergency procedures and is able to care for some high risk patients as soon as the snow is cleared.

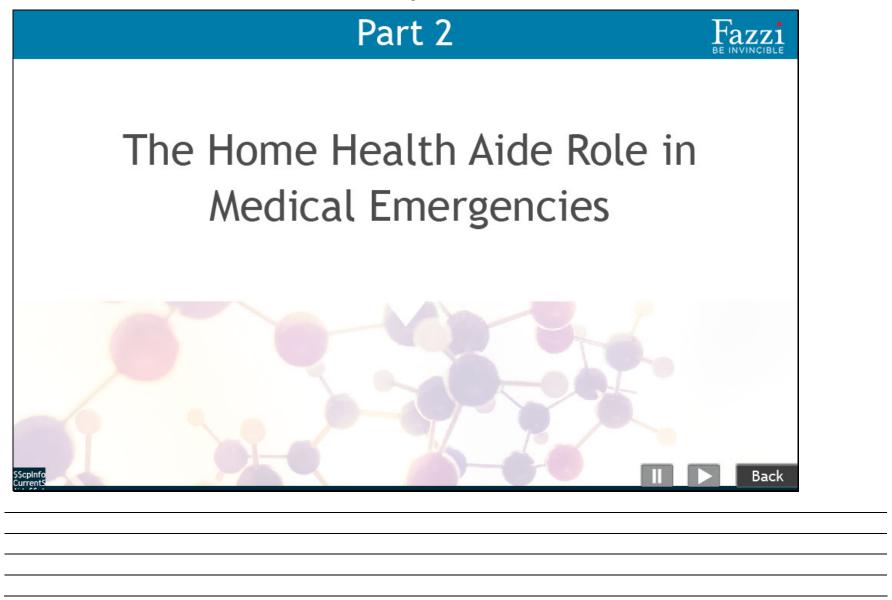


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Slide 14 - Quiz 2: Emergency Management Steps



Slide 15 - PART 2: The Home Health Aide Role in Medical Emergencies



#### Slide 16 - The Home Health Aide Role in Medical Emergencies

# The Home Health Aide Role in Medical Emergencies A medical emergency is a medical problem that could cause death or serious injury if left untreated. In medical emergencies aides should be able to: • Assess the seriousness of the situation, first checking the ABCs (Airway Breathing, Circulation) · Call for help, describing the situation clearly · Provide basic first aid · Provide comfort and help calm the patient · Give an accurate report to emergency personnel and to your supervisor Back

#### Slide 17 - Possible Life Threatening Medical Emergencies

## Possible Life Threatening Medical Emergencies

Fazzi BE INVINCIBLE

- · Severe shortness of breath
- Choking
- · Severe bleeding
- · Crushing chest pain
- · Unconsciousness, especially with no pulse
- Very severe pain that won't stop
- Sudden confusion or not being able to speak
- · Poisoning or overdoses

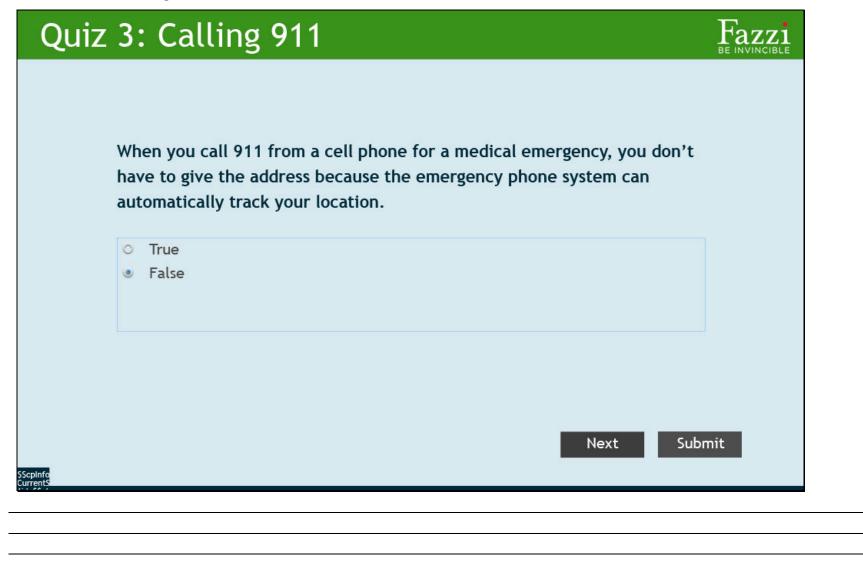




#### Slide 18 - Making a 911 Call

# Making a 911 Call When you call 911, state: · The patient's address and name · What happened and the patient's condition · What you have done to help · Your name and position · Your phone number Stay on the line until the dispatcher tells you to hang up.

Slide 19 - Quiz 3: Calling 911



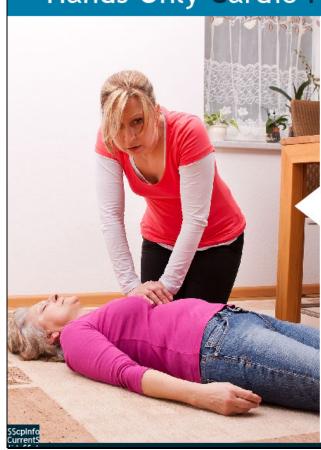
#### Slide 20 - Helping a Patient Who is Having a Heart Attack

# Helping a Patient Who is Having a Heart Attack Heart Attack Signs: Sudden, severe, chest pain, shortness of breath, dizziness, bluish skin, weak pulse, severe anxiety If these symptoms occur, call 911 to get help right away Place the patient in a comfortable position · Loosen the patient's clothes · Check pulse and breathing rate Prompt the patient to take any medication that has been prescribed for a heart attack If the person stops breathing, do "hands only CPR" · After help comes, call your supervisor to report Back

Slide 21 - Hands Only Cardio Pulmonary Resuscitation

## "Hands Only Cardio Pulmonary Resuscitation"





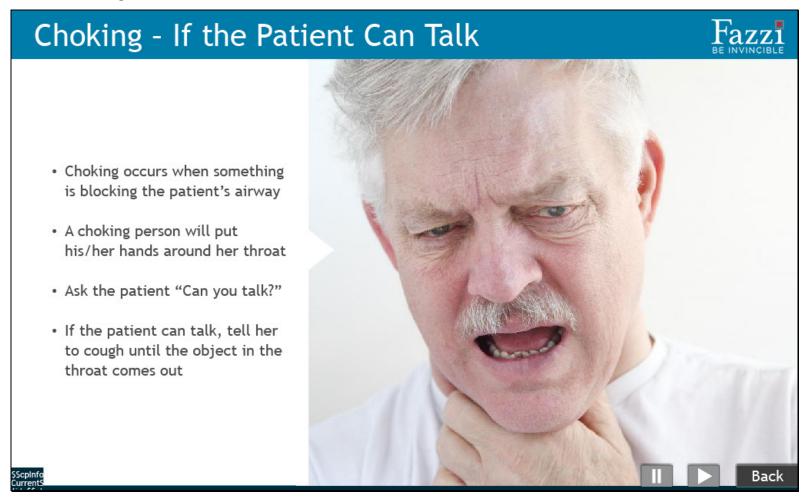
- If a person has no pulse, call 911 and start "hands only" CPR
- Kneel beside the person and place the heel of one hand on the center of the chest
- Place the heel of the other hand on top of the first hand and lace your fingers together
- Position your shoulders directly over your hands and keep your back straight
- Push down hard (about 2 inches), and fast, using your body weight. Wait for the chest to rise before doing the next compression
- · Do 100 compressions per minute
- · Keep pushing until the person breathes, or help arrives
- · Report to your supervisor

Source: www.redcross.org





#### Slide 22 - Choking - If the Patient Can Talk



Slide 23 - Choking - If the Patient Can't Talk or Breathe

## Choking - If the Patient Can't Talk or Breathe





- If the patient is choking and can't talk or breathe, call
   911
- Stand behind the person and bring your arms up under his arms. Wrap your arms around the person's waist
- Make a fist with one hand. Place the flat, thumb side of the fist against the person's abdomen, below the breastbone
- · Grasp your fist with your other hand.
- · Pull both hands up and towards you quick and hard.
- Repeat until the object in the patient's throat is pushed out
- · After help comes, report to your supervisor





#### Slide 24 - When a Patient Feels Faint

## When a Patient Feels Faint



Fainting is caused by decreased blood flow to the brain. Signs include: dizziness, nausea, black spots in front of the eyes, weakness, pale skin

- · Have the patient sit down and bend forward with his head between his knees
- · Loosen tight clothing
- · Keep the patient bending forward for at least 5 minutes after symptoms stop
- After symptoms have stopped, help the patient get up slowly.
- · Continue to observe and stay with him until he is better
- · Report to your supervisor







## Slide 25 - If a Patient has Fainted or is Unconscious If a Patient has Fainted or is Unconscious · Lower the patient to the floor or a flat surface · Position him on his back(or side if he has vomited or is bleeding from the mouth) · Speak loudly using the patient's name. Tap him/her on the shoulder and say "Are you all right?"

- If there is no response, call 911
- · If the patient has no pulse, start CPR



Slide 26 - Controlling Bleeding



Slide 27 - Quiz 4: What Should Annelle Do Differently?

# Quiz 4: What Should Annelle Do Differently? Annelle's patient, Mr. Arnold, falls while she is in the kitchen making lunch. She sees that he has a long, deep cut on his arm which is bleeding heavily. Annelle panics and puts a tourniquet on the arm. She makes him sit up and keep his arm hanging down. What should Annelle have done differently? Next Back

#### Slide 28 - Quiz 4: What Should Annelle Do Differently?

# Answers - What Should Have Been Done Differently? · Use self calming techniques to avoid panic. • Do not use a tourniquet. Tourniquets are a last resort and are used only for life threatening bleeding. · Put on gloves and press firmly on the wound with a clean gauze pad until the bleeding slows. Don't let the arm hang down. That will speed up bleeding. Prop the arm up higher than the heart.

Report to her supervisor using the SBAR method.

Next



#### Slide 29 - Managing Shock

## **Managing Shock**



Shock occurs when organs don't get enough blood. It usually happens after an injury or serious medical problem. Shock is life threatening. A person in shock has increased pulse, cold, clammy and bluish or pale skin, rapid breathing, weakness and dizziness, anxiety or confusion.

To treat a person in shock:

- · Call 911 immediately
- · Lay the patient on his back
- · Cover the person with a blanket
- · Elevate the feet, unless there is a broken bone
- · Do not give anything to eat or drink
- · Stay with the patient and talk, trying to help them stay conscious
- · Report to your supervisor after help comes







Slide 30 - Managing Burns

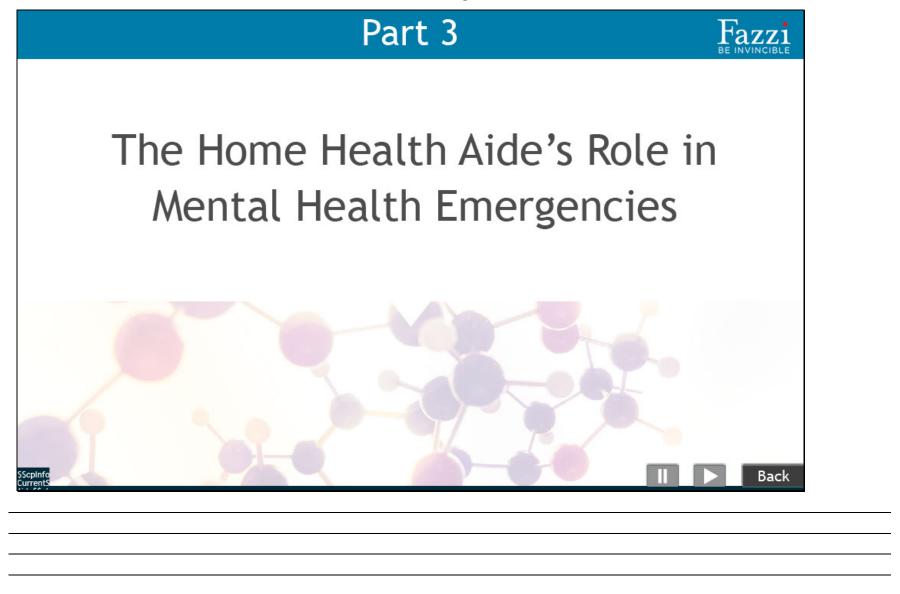


Slide 31 - Controlling Patient Nosebleeds

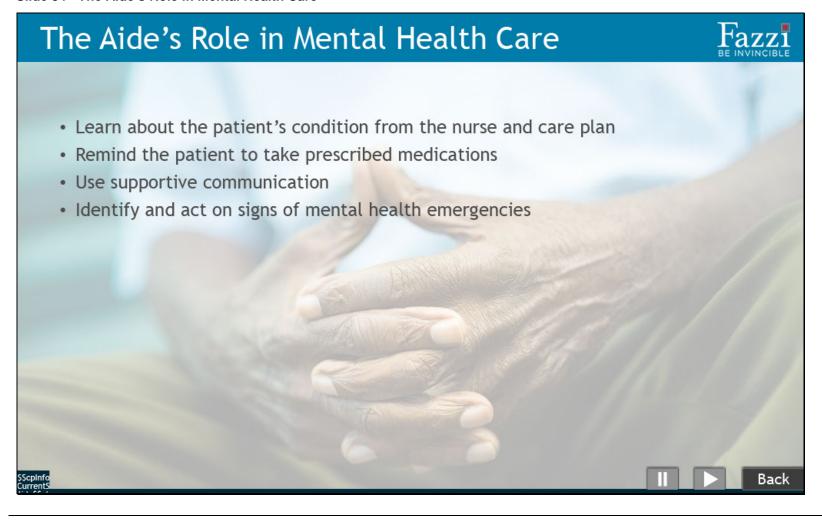
# **Controlling Patient Nosebleeds** · Ask the patient to lean forward · Offer tissues to catch the blood · Put on gloves · Squeeze the bridge of the nose. Apply firm pressure for at least 10 minutes · Remove gloves and wash hands · Notify your supervisor Back

# Slide 32 - Common First Aid Mistakes Common First Aid Mistakes These days, there are countless resources to turn to for medical information and advice. By means of the Internet, magazines, television and more, almost anyone can publicize their remedy for any ailment with little to no regulation. So, when seeking out health and safety recommendations, it is important to be able to identify the credible sources and disregard popular myths. Listen to these examples to see if you have your facts straight. And, don't forget to enroll in a first aid class to learn how to respond correctly in an emergency situation. Back

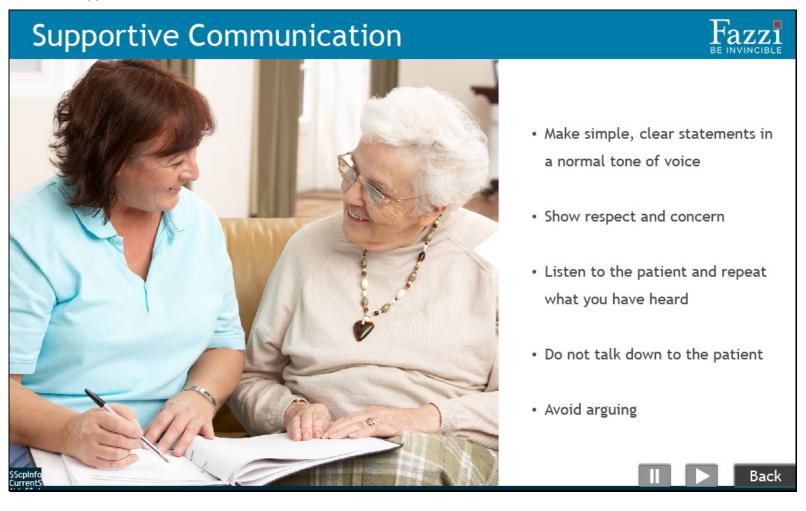
Slide 33 - PART 3: The Home Health Aide's Role in Mental Health Emergencies



Slide 34 - The Aide's Role in Mental Health Care



Slide 35 - Supportive Communication



#### Slide 36 - Mental Status Changes

## Mental Status Changes

A sudden change in a person's thinking, mental state or behavior could be a sign of a worsening mental or physical condition. Signs of mental status changes include:

- · Reduced awareness and concentration
- · Sudden memory loss
- · Hard to understand or nonsense speech
- Hallucinations
- · Trouble reading or understanding speech
- Severe anxiety
- · Sudden signs of serious depression
- · Intense fear
- · Sudden sleep disturbances





#### Slide 37 - Managing Mental Status Changes

## Managing Mental Status Changes

- Check the person's mental state by asking her to tell you: her name, the day and date and where she is
- Call 911 if the symptoms started very suddenly and are very severe
- Call your supervisor if the symptoms came on gradually or are less severe
- Use SBAR to report, being sure to identify when the symptoms started and what happened before the person's behavior changed
- · Reassure and calm the patient until help arrives

Source: Mayoclinic.org





Slide 38 - Coping with a Mental Health Emergency

## Coping with a Mental Health Emergency





- Signs of a mental health emergency: Imminently threatening harm to self or others, severely disoriented, unable to function, distraught and out of control
- Take precautions for your own safety
- Call 911 or
- Call your supervisor and ask for instructions
- · Use supportive communication
- Stay with the person until help comes, if you are safe from harm





#### Slide 39 - Suicide and the elderly

## Suicide and the elderly • The American Association of Marriage and Family Therapy describes the serious problem of suicide in the Elderly: Older adults make up 12% of the US population, but account for 18% of all suicide deaths. This is an alarming statistic, as the elderly are the fastest growing segment of the population, making the issue of later-life suicide a major public health priority. • The rate of suicide rises for every year that the patient gets older. Further, elder suicide may be under-reported by 40% or more. Not counted are "silent suicides," like deaths from overdoses, self-starvation or dehydration, and "accidents." The elderly have a high rate of completing suicide because they use firearms, hanging, and drowning. Double suicides involving spouses or partners occur most frequently among the aged. Back

Slide 40 - Suicide Prevention and Home Health Aides

### Suicide Prevention and Home Health Aides





#### 1. Recognize suicide warning signs:

- Behavior changes
- · Talking about hopelessness
- · Talk about how the patient plans to commit suicide

#### 2. If you see or hear these signs:

- · Ask if the patient plans to harm herself and how
- Use supportive talk
- · Call 911 if the threat of suicide is immediate
- Report to your supervisor right away if the threat is less serious

Source: National Institute of Mental Health





Slide 41 - Quiz 5: The Home Health Aide and Suicide Prevention

Quiz 5	: The Home Health Aide and Suicide Prevention ${ m Fazzi}_{ m \scriptscriptstyle ELINVINCIBLE}$
ŀ	Ajika's patient, Mrs. Hemblan, is 85 and has cancer and heart disease. She has a loving family and support, but has been depressed and tells Ajika that she has thought about "ending it all."
	One thing that Ajika should do in this situation is to ask: "Have you planned out how you would "end it all?"
	True
	O False
	Next Submit
pinfo rentS	

#### Slide 42 - Coping with Combative Behavior

## Coping with Combative Behavior



Patients with dementia or mental health problems may sometimes become violent or hostile and hit, kick or bite.

- · Protect yourself, but don't hit back
- · Step out of the way or get out
- If the behavior is truly threatening, call 911 and remove any object that could be used as a weapon
- · Remain calm, lower your voice, don't respond to verbal attacks
- · Move slowly and don't use gestures that might startle the patient
- · Be calm, patient and reassuring
- · Think about what might have triggered the incident
- · Report to your supervisor right away







#### Slide 43 - Understanding Combative Behavior in Dementia

### Understanding Combative Behavior in Dementia Fazzi



#### The Alzheimer's Association explains combative behavior this way:

There are many myths around combative behavior and Alzheimer's disease. Combative behavior has nothing to do with personality and it is a common symptom of the illness, occurring in approximately a third of individuals who have Alzheimer's. To manage this problem it helps to understand why this occurs.

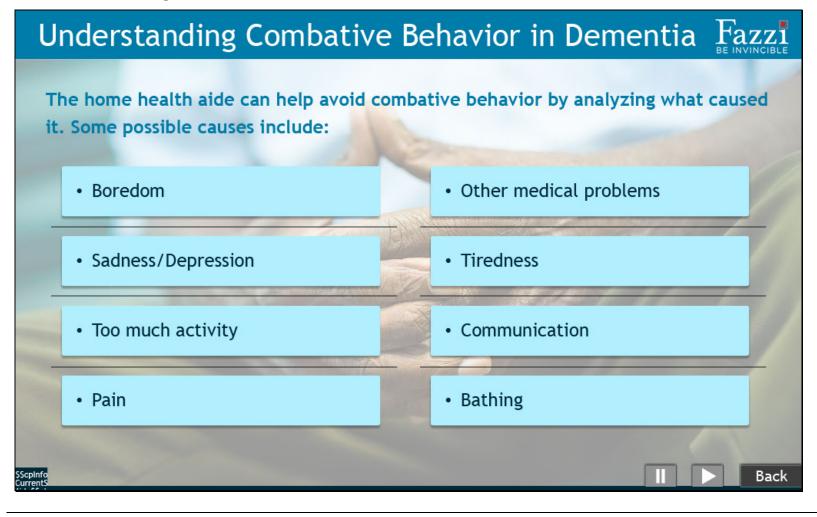
As Alzheimer's progresses, the person has less and less tolerance for frustration. Alzheimer's disease eventually affects the part of the brain that controls behavior. When that happens, frustration can quickly turn to resistance, verbal aggression or violence. In Alzheimer's there is no protection between thoughts and action. Thoughts become live without the benefit of the part of the brain that tells one what is kind, would have consequences, or would hurt another.



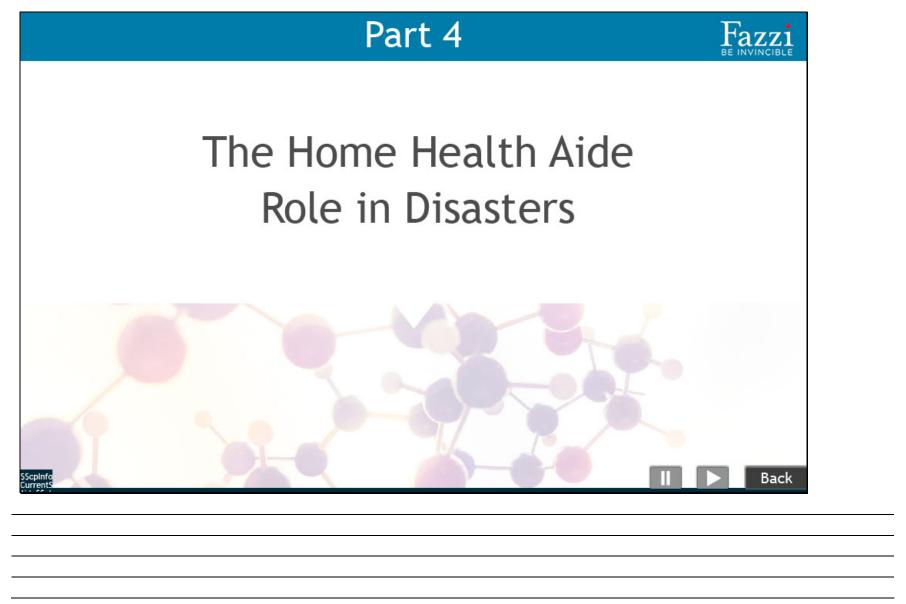




Slide 44 - Understanding Combative Behavior in Dementia



Slide 45 - PART 4: The Home Health Aide Role in Disasters



Slide 46 - Understanding Disasters

## **Understanding Disasters** A disaster is a sudden event that causes damage or loss of life. There are natural disasters such as tornadoes, earthquakes, blizzards, hurricanes and wildfires. Man made disasters include terrorist attacks, chemical spills or large scale accidents like building collapses. There are federal, state and local agencies responsible for disaster planning, notifying the public of what to do in a disaster and providing emergency services during and after a disaster. Back

#### Slide 47 - Prepare Yourself for Natural Disasters

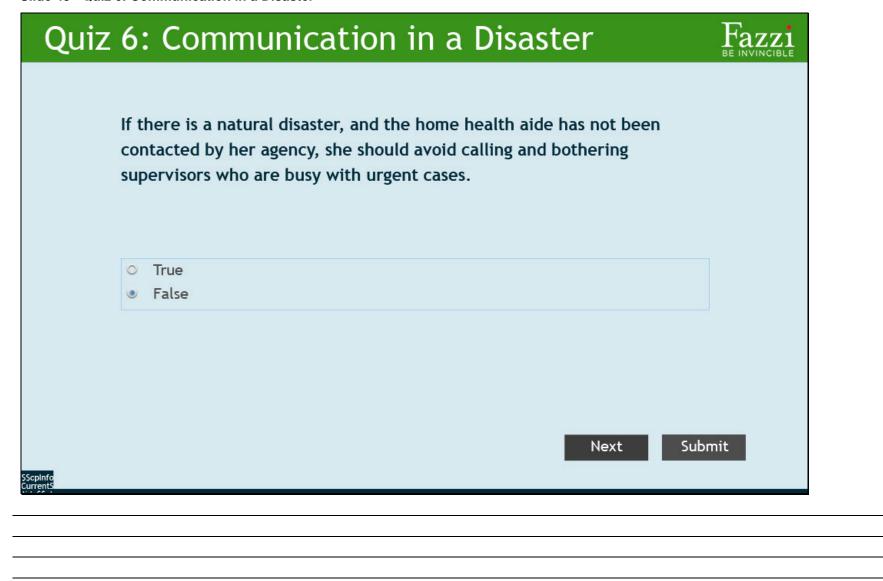
## Prepare Yourself for Natural Disasters

- · Know what type of disasters are common in your area and what to do if one strikes
- Stock an emergency kit and make a family emergency plan
- · Charge your cell phone and fill your car with gas
- · Watch the news for weather or disaster updates
- · Get agency instructions about whether to stay home or to visit patients
- · If evacuation is likely, plan an escape route





Slide 48 - Quiz 6: Communication in a Disaster



Slide 49 - Stock Emergency Supplies for Sheltering in Place

## Stock Emergency Supplies for Sheltering in Place Water · Food (dried or canned) · Emergency equipment ENERGENCY PREPA · Prescription medications · First aid kit Water Containers · Nonprescription medicines First Widkin · Warm blankets for winter storms · Battery powered radio · Flashlights or lanterns and extra batteries

#### Slide 50 - Staying Safe in a Tornado

## Staying Safe in a Tornado · Change of clothes and shoes · Prescription medicines **Emergency Preparedness** · Medical equipment · Important personal documents · Cash in small bills · Cell phone and car charger Back FEMA News Photo

#### Slide 51 - The Elderly and Natural Disasters

# The Elderly and Natural Disasters According to the Centers for Disease Control, older adults are more vulnerable than younger adults during a disaster because they are more likely to have impaired physical mobility, diminished sensory awareness, chronic health conditions, or social and economic limitations that interfere with their ability to prepare for disasters and to respond and adapt during such events. Back

Slide 52 - Help Patients Prepare for Emergencies

## Help Patients Prepare for Emergencies





- · Talk through emergency plans
- · Check emergency supplies
- Put instruction labels on medical equipment
- Keep emergency phone numbers visible
- Help your patients stay informed about predicted emergencies
- Inform your supervisor if the patient is not properly prepared





Slide 53 - Quiz 7: Planning for Natural Disasters

# Quiz 7: Planning for Natural Disasters Paul talks with his patient, Mr. Lavarge, about his emergency plan for a predicted blizzard. He finds that Mr. Lavarge's emergency contacts are not really people he can count on to help him. Paul checks the pantry for emergency supplies and finds that there is some water, but no flashlights, batteries or other emergency supplies. What should Paul do? Next Back

#### Slide 54 - Quiz 7: Planning for Natural Disasters

## Answers - Planning for Natural Disasters · Paul should ask Mr. Lavarge if he has other, more reliable emergency contacts. · He should suggest that Mr. Lavarge get help to assemble a more complete emergency kit. · He should report the situation to his supervisor. Next Back

Slide 55 - If Unexpected Disaster Strikes



#### Slide 56 - Staying Safe in a Tornado

## Staying Safe in a Tornado

- · Check weather alerts
- Get to a basement, lower floor or interior room
- Stay away from windows and outside walls
- Afterward, avoid debris such as broken glass
- If the home is safe, stay inside until outside debris is cleared
- Call your supervisor to report

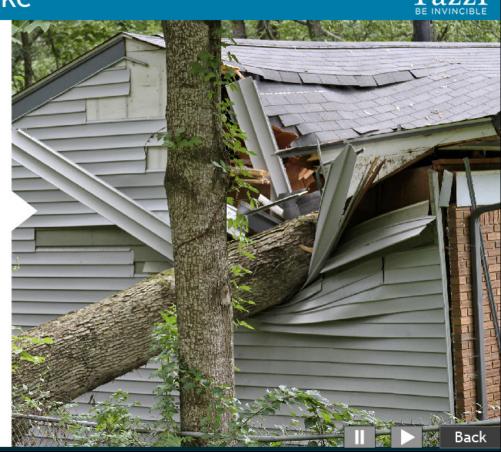




#### Slide 57 - During an Earthquake

## During an Earthquake

- If you are inside a building, stay there
- Hide under a table or desk or crouch in a corner or against a wall
- Go under a doorway if you know it is strongly supported
- Stay away from windows, glass and bookcases
- Don't go outside until the shaking has stopped





#### Slide 58 - Preventing Heat Emergencies

## **Preventing Heat Emergencies**

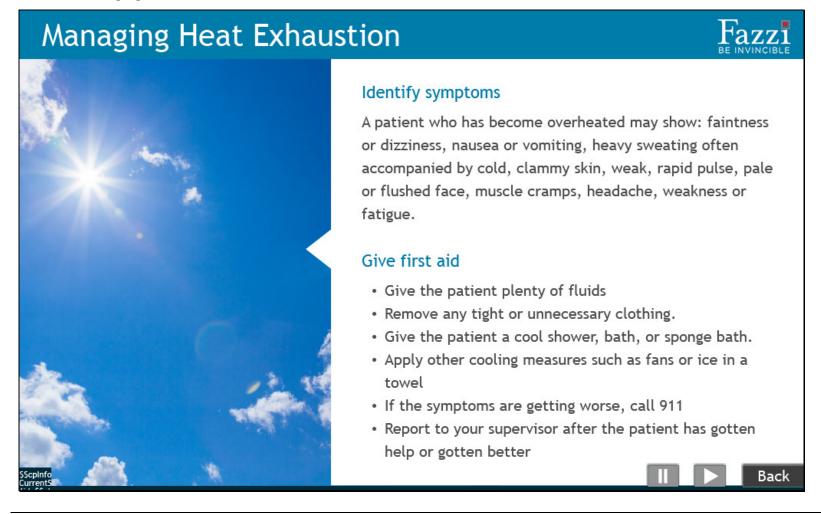
The elderly are very susceptible to heat related problems. Take special care to prevent overheating during a heat wave:

- · Keep your patient in an air conditioned room if possible
- · Encourage your patient to drink more water than usual
- · Give the patient loose, lightweight, light-colored clothing.
- · Help the patient take cool showers or baths to cool down.
- Don't let the patient do strenuous activity and make sure she gets enough rest
- Call your supervisor to help get your patient to a local cooling center if she is at risk of a medical emergency due to overheating





Slide 59 - Managing Heat Exhaustion



#### Slide 60 - Manage Heat Stroke (A Medical Emergency)

## Manage Heat Stroke (A Medical Emergency)



#### Heat Stroke: Identify signs and call 911:

Heat stroke signs: Fainting, a change in behavior, body temperature over 104°F, dry, flushed skin and a strong, rapid pulse or a slow, weak pulse, not sweating even if it is hot

#### Give first aid for heat stroke:

- · Move the patient to a cool location
- Take the patient's temperature and write it down
- Lower the body temperature with a cool bath cool cloths or sheets sprayed with water and ice packs to the armpits
- Don't give the patient anything to drink unless he is alert and oriented
- Keep trying to cool the person until help arrives
- Report to your supervisor after the incident





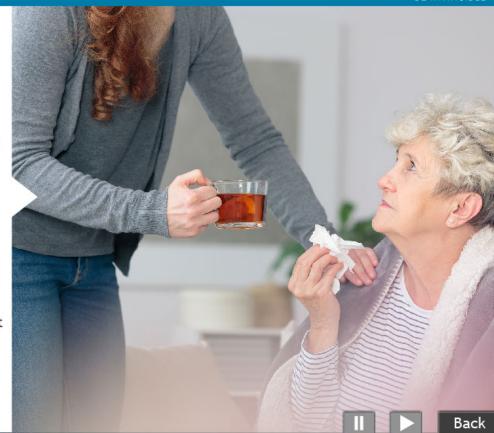
#### Slide 61 - Helping Patients in Blizzards and Extreme Cold

## Helping Patients in Blizzards and Extreme Cold

## Fazzi

## Keep the patient warm and safe in cold weather storms

- Keep the elderly person inside in a warm room
- · Help your patient dress warmly
- Cook and serve the patient warm meals and warm drinks
- If the power goes out and there is no heat, call your supervisor to get help for the patient





#### Slide 62 - Managing Hypothermia (low body temperature)

## Managing Hypothermia (low body temperature)

Fazzi BE INVINCIBLE

- Identify signs of hypothermia (low body temperature): shivering, exhaustion, confusion, fumbling hands, memory loss, slurred speech, drowsiness
- · Call 911 or your supervisor, if symptoms are mild
- · Give hypothermia first aid:
  - Get the core of the body warm (chest, neck, head, and groin) with blankets or towels
  - Give the patient a warm drink if he is conscious and alert
  - Keep the person wrapped in blankets until help comes
  - Report to your supervisor





Slide 63 - Actions to Take in a Hurricane

### Actions to Take in a Hurricane





- · Listen to the radio or TV for information
- Secure the home, close storm shutters, and secure outdoor objects or bring them indoors.
- Turn the refrigerator and freezer to the coldest settings and keep the doors closed.
- Avoid using the phone, except for serious emergencies.
- Fill the bathtub and other large containers with water to use for cleaning and flushing toilets
- · Evacuate, if told to do so by authorities

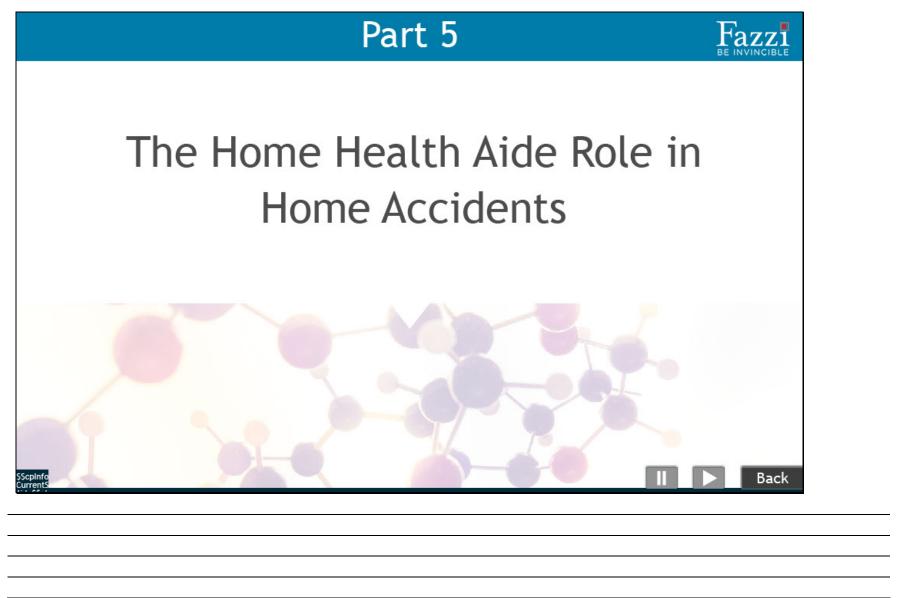




Slide 64 - After a Natural Disaster

## After a Natural Disaster · Review any new care plan information · Observe the patient for any change in condition · Express concern and sympathy for any losses · Help the patient get her home back in order · Make sure the patient has food, water and medications · Help find lost pets · Report the patient's situation and condition to your supervisor Back

Slide 65 - PART 5: The Home Health Aide Role in Home Accidents



#### Slide 66 - Being Prepared for Accidents

## Being Prepared for Accidents



- Use accident prevention techniques
- Consider accidents that might occur based on the patient's condition and home situation
- Learn how to manage common accident situations



Slide 67 - Home Health Aide Fire Prevention



#### Slide 68 - What to Do in Case of Fire

## What to Do in Case of Fire

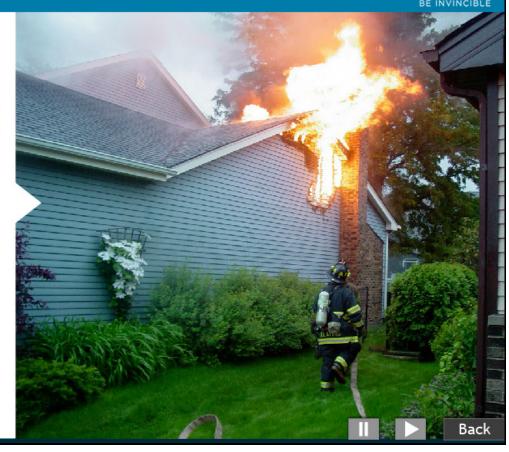
#### Remember to **RACE**

Remove the patient from danger

Activate 911

Contain fire if possible

Extinguish or call the fire department to extinguish the fire



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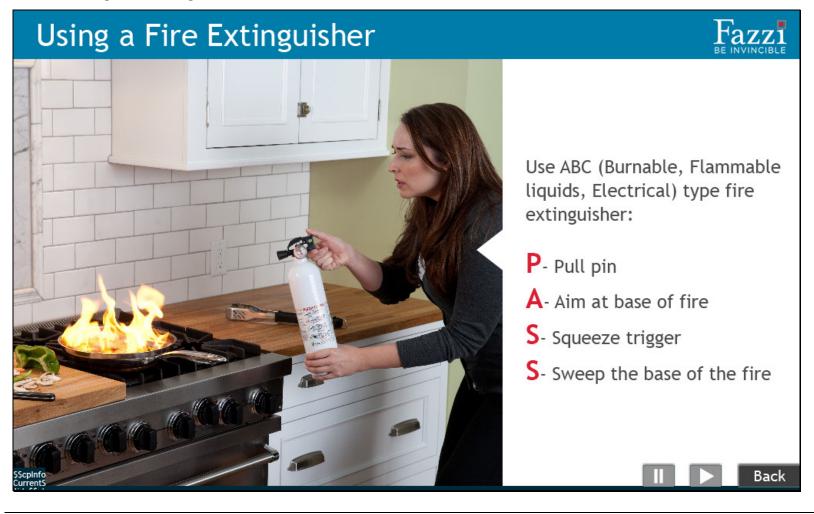
Slide 69 - Quiz: Breaking the Chain of Infection

# Quiz 8: The Home Health Aide and Fire Evette is in a home with a frail patient when a fire breaks out in the kitchen. It starts to spread rapidly into the walls and cabinets. What steps should Evette take to keep herself and her patient safe? Next Back

#### Slide 70 - Quiz: Breaking the Chain of Infection

# Answers - The Home Health Aide and Fire · Get herself and her patient out of the house to a safe location. • Call 911 as soon as she and the patient are safe. Next Back

Slide 71 - Using a Fire Extinguisher



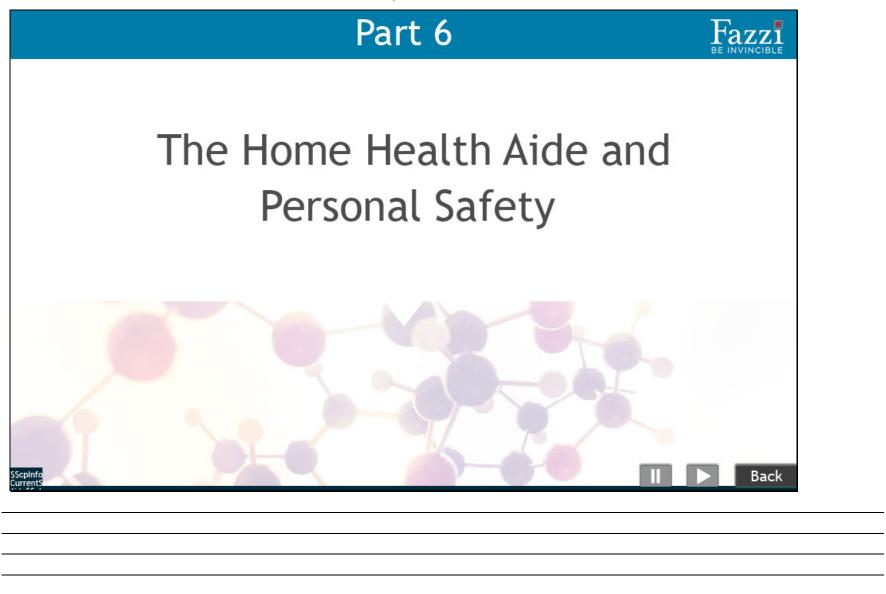
Slide 72 - Evacuation in a Fire

# Evacuation in a Fire If a fire starts to spread -Get out! · Know your escape routes · Close windows and doors Call 911 · Exit the home, keeping low and moving quickly · Get people who can walk out first · Wrap and slide bed bound people to get them out of the house. Back

#### Slide 73 - If You Are Not Able to Exit in a Fire

# If You Are Not Able to Exit in a Fire • Place wet towels or blankets under doors to keep smoke out · Never open a "hot door" · Go to the furthest room away from the fire · Call for help or hang a brightly colored towel out the window • If there is a phone in the room, call 911 and report your location in the house · If your clothes catch fire: Stop, Drop and Roll Back

Slide 74 - PART 6: The Home Health Aide and Personal Safety



### Slide 75 - Home Health Aide Personal Safety Actions

## Home Health Aide Personal Safety Actions



- Take a self defense course
- · Call to be sure the patient will open the door
- · Park in well lit areas
- · Don't carry valuables or a purse
- · Carry a whistle to call for help
- · Keep your keys in your hand
- · Walk confidently
- · If see something that makes you uneasy, leave immediately







Back

### Slide 76 - Be Alert to Signs of Possible Violence

# Be Alert to Signs of Possible Violence

Stop, look, listen and think. Be concerned if you see or hear:

- · Loud, threating talk
- · Words of frustration, anger, cursing
- · The presence of weapons
- · Aggressive gestures, pacing
- · Signs of drug abuse





### Slide 77 - Keep Yourself Safe in the Home

## Keep Yourself Safe in the Home



Don't let anyone get between you and the door

Try to calm things down if you are not in immediate danger:

- · Present a calm, caring attitude
- · Use a level, calm voice tone
- · Do not match threats
- · Do not give orders
- · Acknowledge the person's feelings

If you feel threatened, get out immediately!

- Call 911 if there is an urgent threat
- · After the incident, call your supervisor to report



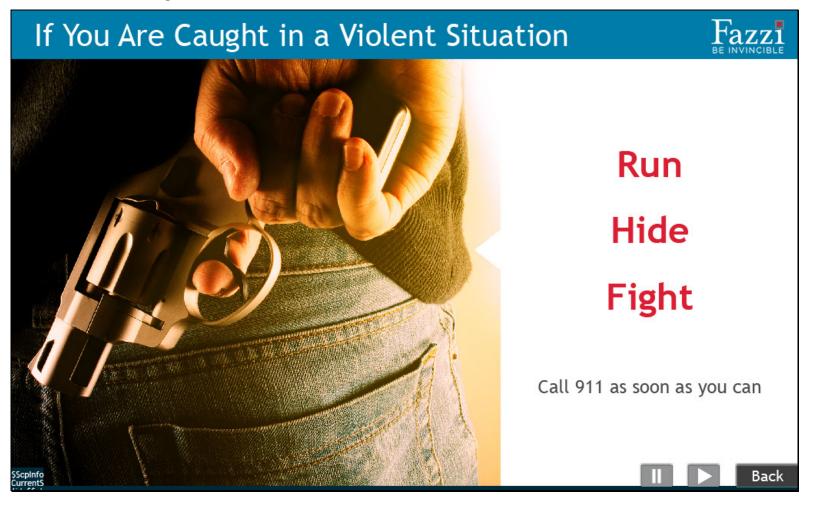




Slide 78 - Quiz: When Violence Threatens

# Quiz 9: When Violence Threatens If a home health aide is in a home where there are signs of potential violence, she should do these two things: · Position herself so no one can get between her and the door making sure the door hasn't been locked from the inside. · Assess the situation to see if she is in immediate danger; and if she is, leave right away. True False Submit Next

Slide 79 - If You Are Caught in a Violent Situation



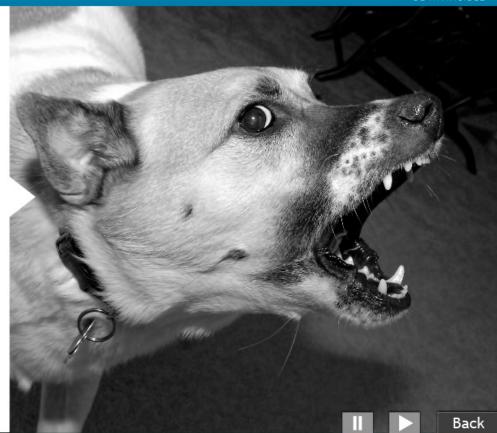
## Slide 80 - Managing Threats from Aggressive Pets

## Managing Threats from Aggressive Pets

Fazzi

# Any pet may consider you a threat to the patient

- Know your agency policy about pets in the home
- Ask that the pet be put in a separate room
- If you feel threatened by a pet, leave the home and call your supervisor

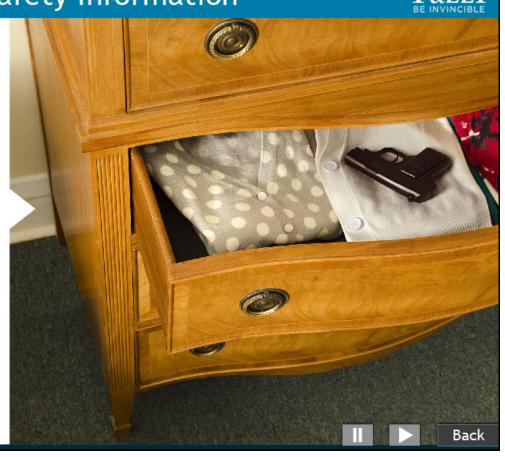


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### Slide 81 - Report Important Safety Information

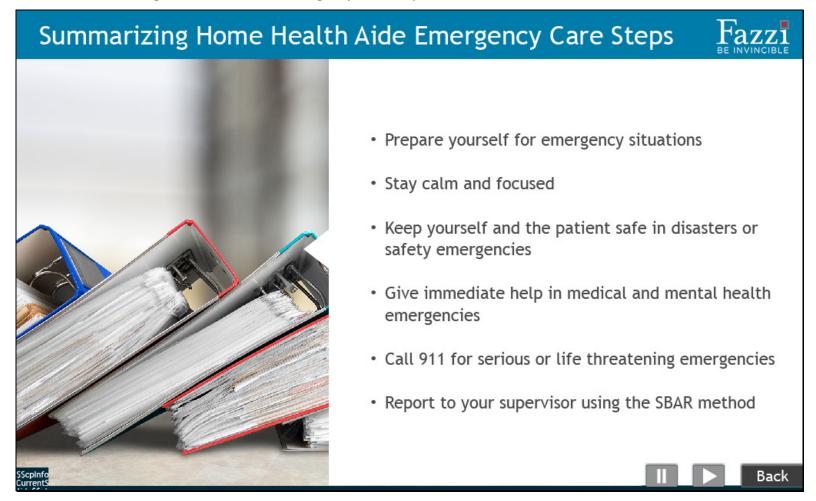
## **Report Important Safety Information**

- Prepare yourself for emergency situations
- · Stay calm and focused
- Keep yourself and the patient safe in disasters or safety emergencies
- Give immediate help in medical and mental health emergencies
- Call 911 for serious or life threatening emergencies
- Report to your supervisor using the SBAR method



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Slide 82 - Summarizing Home Health Aide Emergency Care Steps



#### Slide 83 - References

## References American Red Cross, Hands Only CPR, http://www.redcross.org/take-a-class/cpr/perfoming-cpr/hands-only-cpr, retrieved, Nov 18, 2017 Centers for Disease Control, Emergency Preparedness and Response, CDC website, retrieved, Nov 18, 2017, https://emergency.cdc.gov/ Federal Emergency Management Agency. (2013). Are you ready?: An in-depth guide to citizen preparedness. [Washington, D.C.]: FEMA National Institute for Occupational Safety and Health, (2010), NIOSH Hazard Review, Occupational Hazards in Home Healthcare, https://www.cdc.gov/niosh/docs/2010-125/default.html Leahy, W., Fuzy, J., Grafe, J. (2013). Providing Home Care, A Textbook for Home Health Aides, Albuquerque, NM, Hartman Publishing Office of Public Health Preparedness, Michigan Department of Health and Human Services, Home Health Emergency Preparedness, A Handbook to Assist Home Health Care Providers in Emergency Preparedness Planning VNAA., (2014). Clinical Procedure Manual, 19th Edition, Visiting Nurse Association of America Back

#### Slide 84 - Thank You!

