A note to employers about:

Safety Training

There are several ways adult family homes, assisted living facilities, and home care agencies can use this document to help meet the three hour safety training required for Long-Term Care (LTC) workers. This training included in this document currently includes information on all department required safety training topics. Required topics can be found in WAC 388-112A-0230.

You can use:

- The entire training and add in your own policies and procedures to meet your unique needs.
- Sections of this training to supplement existing safety training materials if you are missing any required topic areas for example.

Places where you would most likely want to include your own forms, policies, and procedures have been noted in the training where you see this Insert Icon. It is not a requirement that you add something at every location. It has been included as an aide only.

The department must approve curriculum and instructors for Safety Training. Instructions on how to do this are available at https://www.dshs.wa.gov/altsa/home-and-community-services/training-requirements-and-classes.

UPDATE: SEPTEMBER 5, 2018

Page 31: Information on Advance Directives updated to reflect current accurate information - removing Physicians Orders for Life-Sustaining Treatment (POLST) as an advance directive. A new sub-heading for POLST added with updated information that aligns with POLST curriculum created by a team of experts that align with the Washington State Medical Association, Washington State POLST Task Force and the DSHS with help from the nursing commission.
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Introduction

Safety training helps you stay safe and avoid injury and illness related to performing services and support as a long term care (LTC) worker.

This training is designed to help you take ownership of your own safety and health and to take action to protect the safety and health of clients in your care.

Your role in safety as a LTC worker is to help:
1. Prevent accidents and injury to yourself and clients.
2. Stop the spread of infection and disease.
3. Prepare for and handle emergencies.

Helpful Icons

The following icons have been used throughout this training.

This icon points out the key points.

This icon points out when you may need to document and/or report something to your supervisor or the appropriate person where you work.

This icon is for supervisors, owners, or administrators only. It alerts you to where to insert your own forms, policies and procedures into the training.

It’s Up to You!

Your Safety Role as a Long Term Care (LTC) Worker

1. Prevent accidents and injury to yourself and clients.
2. Stop the spread of infection and disease.
3. Prepare for and handle emergencies.

Clients

A person requiring services and support is referred to by many different names. Examples you may hear include client, resident, consumer, or participant.

In this training, we will use client.
Safety Guidelines

Safety is very important. Below is a list of general guidelines to help you practice safety. More information about each of these topics is found throughout this training.

Prevent accidents and injury to yourself and clients
- Take care of your back with conditioning and strengthening exercises.
- Use proper body mechanics to lift materials and people safely and properly.
- Wear closed toe, slip resistant, sturdy shoes such as tennis shoes.
- Be on the lookout for and reduce or eliminate safety hazards.
- Know and practice the proper procedures if a client falls.
- Document and report any safety hazards you see where you work.

Stop the spread of infection and disease
- Use infection control practices. Wash your hand properly and often during your shift. Wear disposable gloves to stop the spread of disease and infection.
- Use standard precautions when needed.
- Clean and disinfect regularly.
- Use household gloves and make sure there is good ventilation when working with household chemicals.
- Don’t come to work when you are contagious.

Prepare for and handle emergencies
- Take the time to plan and prepare for what steps you need to take in emergencies.
- Know what the emergency action plan is for each client.
- Know the emergency evacuation escape routes for any building where you work.
- PRACTICE emergency evacuations such as fire drills.
- Stay calm and appear confident. Clients will often take your lead in how to respond.
1. Prevent Accidents and Injury to Yourself and Clients

The following are things you can do to reduce the chance of being injured on your job as a LTC worker.

**Back Safety and Conditioning**

Back disorders are one of the leading workplace injuries. Just like the finest machinery, *your back requires proper care* to keep it working.

If your back is not working right, you'll suffer. An injured back affects your ability to move your limbs, hips, neck, and head.

**Take Care of Your Back!**

Your job involves lifting or being in awkward postures that puts stress on your back. You may be at risk for a back injury.

**Keep Your Back in Good Condition**

**1. Posture**

Proper posture includes standing and sitting in an upright position without slouching or rounding your shoulders. Hold in your stomach to keep it from putting too much pressure on your spine. When standing, bend your knees slightly.

Proper sleeping posture is also important to prevent and relieve back pain. Sleep on a firm mattress, not one that sags or is too hard. Do not sleep on your stomach. Instead, sleep on your side with a pillow between your knees.

**2. Conditioning**

Proper conditioning involves aerobic exercise and strengthening and stretching core muscles of the spine and stomach. Walking, swimming, and bicycling are excellent ways to condition the entire body and improve your heart.

*Aerobic activity along with a healthy diet helps prevent weight gain - a risk factor for back injury.*

**Moderate exercise builds a healthy back**

- Walk for 10 minutes, 2 times a day.
- Build up to at least one 30-minute walk a day at least 3 times a week.
- Stretch your back 5-7 days/week (see stretching exercises below).
- Strengthen your back with exercises at least 4-5 days/week.

Begin your stretching and strengthening exercises slowly and increase levels gradually. It is recommended that you begin any exercise program with stretching.

Talk to your doctor before attempting any exercise, especially if you are already experiencing back pain.
**Stretching Exercises**

**Trunk Flexion Stretch**
- On hands and knees, tuck in chin and arch back.
- Slowly sit back on heels, letting shoulders drop toward floor.
- Hold for 45 to 60 seconds.

**Double Knee-To-Chest Stretch**
- Lie down on back.
- Pull both knees in to chest until you feel a comfortable stretch in lower back.
- Keep the back relaxed.
- Hold for 45 to 60 seconds.

**Lower Trunk Rotation Stretch**
- Lie on back.
- Keeping back flat and feet together, rotate knees to one side.
- Hold for 45 to 60 seconds.

**3. Strengthening Exercises**

Strong lower-back and stomach muscles work together to make a healthy back. The exercises shown on the following pages help strengthen the muscles of the lower back and increase flexibility.

Unless instructed otherwise, do each exercise one to five times, twice each day. Gradually increase your workout to ten repetitions twice a day. Use slow, smooth actions as you exercise.

Stop any exercise that increases back pain, discomfort, or causes tingling, numbness, or weakness in your legs. Contact your doctor if the symptoms continue.

**Pelvic Tilt Exercise**
- Lie on back with knees bent, feet flat on floor and arms at sides (a).
- Flatten small of back against floor (hips will tilt upward) (b).
- Hold for 10-15 seconds and release. Gradually increase your holding time to 60 seconds.
Curl-up Exercise
• Lie on back on the floor.
• Keeping arms folded across chest, tilt pelvis to flatten back. Tuck chin into chest.
• Tighten abdominal muscles while raising head and shoulders from floor.
• Hold for 10 seconds and release.
• Repeat 10 to 15 times.
• Gradually increase your repetitions.

Alternate Arm-leg Extension Exercise
• Face floor on hands and knees. Raise left arm and right leg. Do not arch neck.
• Hold for 10 seconds and release.
• Raise right arm and left leg. Do not arch neck.
• Hold for 10 seconds and release.

Prone Lumbar Extension
• Lie on your stomach and place your hands on the floor near the sides of your head.
• Slowly push your upper body off the floor by straightening your arms, but keep your hips on the floor.
• Hold for 10 seconds, and then relax your arms, moving back to the floor.

Alternate Leg Extension
• Lie on your stomach with your arms folded under your chin.
• Slowly lift one leg without bending it (not too high!) while keeping your pelvis flat on the floor.
• Slowly lower your leg and repeat with the other leg.

Hamstring Stretch While Standing
• Stand on right leg with left leg on table or chair.
• Stretch hamstring by slowly bending right knee.
• Hold for 30-45 seconds.
• Repeat with other leg.
**Material Handling and Lifting**

You may be asked to move or lift materials such as groceries, garbage, or equipment needed by a client such as an oxygen tank. **Lifting and mishandling of materials is the single largest cause of accidents and injuries to the back.**

Always contact your supervisor or the appropriate person where you work if you are concerned that you cannot safely move something or need more training in how to do so safely.

**Proper Lifting Technique**

1. Plan your lift. Assess your load and DO NOT pick up or move things beyond your capacity.
2. Make sure you know where you are going with your load and where you plan to put the object down. Make sure there is room before you move it.
3. Bend at the knees.
4. Get as close to the load as you can.
5. Tighten your stomach muscles.
6. Keep your back straight, bend with your knees, and stand up.
7. Lift with your legs.
8. **Never twist while lifting!** Using tiny steps, turn with your feet – not your body.

**Tips on Safe Lifting**

- Hold heavy items between your shoulders and knees.
- Look for easy ways to grasp items to be lifted.

**Lifting Overhead**

- Reduce the amount of your load. Move sections or part of a load when possible.
• AVOID awkward stretches while reaching. This stresses your back and could cause you to lose your balance.
• Use a stepladder to reach objects above shoulder height.
• Use a handrail when on stairs. Avoid climbing with a load.
• Don't lean on a shelf or storage rack to support you. They could easily give way if you pull or tug on them.
• The more times you lift or move something, the more likely you are to get hurt. If you need to move something often, use a cart.
• Get help with large loads.

You are responsible for your own back safety. Conditioning, stretching, and using proper lifting techniques are important things you can do to take care of your back!

Safely Moving People

Providing care to a client is physically demanding work. Manual lifting, transfers, repositioning, and providing care means an increased risk of pain and injury to your back.

Make sure to know and follow any specific rules your employer may have regarding safely moving people.

Contact your supervisor or another appropriate person where you work anytime you feel you cannot safety move a client or need more training in how to do so safely.

Risk Factors

There are certain known "risk factors" to your body because of these high physical demands. This is due to the large amount of weight involved; 30 to 50 pounds is considered a heavy load.

Be aware of the following risk factors you may face in your day-to-day work.

➢ Repetitive Motion such as repeatedly cranking manual adjustments for a bed.
➢ Awkward postures such as reaching across a bed to lift a client.
➢ Force such as pushing a wheelchair across an elevation change or up a ramp.

Other lifting or repositioning tasks that put your body at risk include:
• Multiple lifts.
• Lifting an uncooperative and/or confused person.
• Lifting a person that cannot support his or her own weight.

Definitions

Ambulation - Walking or moving about.

Assistive Devices - Aids to help people continue to perform a task on their own.

Transfer – Helping another person move into or out of a chair, bed, or wheelchair.

Transfer belt/gait belt - A belt worn around the waist to aid in transfers and ambulation.
• Moving or lifting a person in and out of a chair or motor vehicle.
• Trying to stop a person from falling.
• Picking up a person from the floor or bed.

Other work-related activities that can put you at risk include:
• Bending to make a bed or feed a person.
• Collecting waste.
• Pushing heavy items or equipment.
• Removing laundry from a washing machine or dryer.
• Lifting, carrying supplies, and equipment.

The duration (how long) AND frequency (how often) of these tasks may place you at greater risk.

Musculoskeletal Disorders (MSDs)
Excessive exposure to these risk factors can result in a variety of disorders. These conditions are referred to as Musculoskeletal Disorders (MSDs). While some MSDs develop gradually over time, others may result from a single event.

Early indications of MSDs can include persistent pain, restriction of joint movement and soft tissue swelling.

Musculoskeletal Disorders (MSDs) include conditions such as low back pain, rotator cuff injuries, tennis elbow or Carpal Tunnel Syndrome.

Proper Footwear
Proper footwear provides adequate support to your feet and ankles and helps prevent sprain and strain injuries.

Hazards may include standing for long periods of time, walking on uneven surfaces, or slipping and falling.

Work shoes should provide adequate support and comfort. Work shoes should:
• Be closed toed and sturdy.
• Have low and wide heels to reduce stress on the feet and the chance of ankle injury.
• Provide good traction.

Tennis shoes are a good choice of work shoes for many LTC workers.
Home Safety Practices

It is always best to prevent an accident or emergency whenever possible.

In addition, licensed adult family homes (AFH) and Assisted Living Facilities (ALF) must maintain a hazard free environment for all clients.

Alert others if you have a safety concern about a client or something in the environment of the home or facility. Who you contact depends on a client’s situation and where you work. Your employer will have specific guidelines you must follow.

Know when you are to document and/or report something and to whom.

Contact the appropriate person in your situation when:
• You are concerned about a potential safety hazard.
• You feel that the decision a client is making puts him, her or others in jeopardy.
• You notice a pattern of changes or decline in a client’s functioning.
• A client continues to refuse care or treatment.

Prevent an accident or emergency whenever possible

Checking for Safety Hazards

Always be on the lookout for existing and potential safety hazards. If you are concerned about a safety hazard, work with the client and see if there is a way to eliminate it. Always keep in mind a client’s right of choice.

Documenting and reporting safety hazards

Alert the appropriate person where you work when you are not able to fix a safety hazard or the client does not want it changed. Your safety is important. Don’t try to fix safety hazards if you could get hurt or you don’t have the skills to do it.

AFHs and ALFs must maintain a hazard free environment. Make sure you are familiar and follow the required safety hazard documenting and reporting policies and procedures where you work.

Document and report safety hazards
Safety Hazard Checklist

☐ There is an Emergency Action Plan for that client that you have reviewed and understand.

☐ Adequate Personal Protective Equipment (PPE) is available for required tasks

☐ Outside walkways are well lit, cleared of clutter, and water, ice, snow, or grease are cleaned up immediately

☐ Inside floors and hallways are cleared of clutter and lamp, extension, and telephone cords are out of the flow of traffic

☐ Throw rugs are removed or non-skid mat or doubled-sided tape in place

☐ Rug edges are not frayed and tacked down if needed

☐ Stairs have handrails and are well lit

☐ Proper lighting exists throughout the home

☐ Sharps container or closed durable, hard, plastic container is available if needed

☐ Sharp objects such as bed frames are padded

☐ Oxygen hoses are uncoiled, free of kinks, and out of walkways

☐ No smoking, open flames, or items that burn easily are near when oxygen is in use

☐ Medical equipment is stored properly

☐ Materials are stored safely and at proper height

☐ Home is free of pest infestation and animal waste

☐ Animals are controlled

☐ Medications and chemicals are labeled and stored correctly

☐ No appliances or extension cords with exposed or frayed electrical wires are being used

☐ Fire extinguishers are readily available and serviced

☐ Smoke alarms are in working condition and a schedule is established and maintained for changing batteries.
Getting the Information You Need

The following information helps you understand what to look for inside and outside the home when checking for safety hazards. It offers some tips or possible solutions for eliminating or reducing the hazard.

These materials are one source of information. You may need additional information or support. There are many resources to get it. Your local fire and police department staff or the local chapter of the American Red Cross will be happy to help or direct you to other resources. Check in with other care team members, too.

Client Falls

Falls can be serious. Frail clients can be seriously hurt if they fall. Falls can...
- Break brittle bones in the hips or legs.
- Break or seriously injure wrists and arms.
- Cause head injuries.
- Be a sign of other serious medical problems.

Fall prevention

There are many things that can cause slips, trips, and falls inside and outside of a client’s living space or home.
- Pay close attention to the type and condition of walking surfaces.
- Be observant and stay aware of your footing. Wear closed toed, sturdy, slip resistant footwear.
- Use handrails where available.
- Look for sidewalk and entryway hazards such as cracks, holes, slippery or uneven surfaces.
- Watch for rotting wood or wobbly handrails or stairs.
- Keep walkways clear - especially to the bathroom.
- Keep rooms and stairs free of clutter.
- Use nightlights in a client’s room, in the hallway, and in the bathroom.
- Avoid long robes, loose-fitting slippers, and high heeled shoes.
- Keep things used most often on lower kitchen cabinet shelves.
- Use hand rails in tubs and next to toilets.
- Use safety toilet seats to make standing and sitting easier.
- Use mats in showers and tubs.
- Vary the colors at floor level to better see where steps and edges are.
- Pay close attention to the leash when walking a dog. It is important to make sure it doesn’t get tangled in a walker or cane.
- Remove throw rugs.
Document and report any possible fall hazards to the appropriate person where you work.

If a client falls
The following are guidelines to help keep you and a client safe if he or she falls.

1. Do not try to prevent the fall. It is better if you help support his or her head and gradually ease the client onto the floor.
2. Keep your feet apart and back straight.
3. Pull the client close to you. Let the client slide down your body to the floor.
4. Gently ease the person to the floor. Often you will also "go to the floor" with the person.

If the client CAN get up...

• Ask “How do you feel?” and observe carefully for signs of injury. Keep in mind, most people are embarrassed and may want to get up or tell you everything is fine even if it’s not. Observe the client carefully. The client’s body language will give you important information.
• If the client says he or she feels unharmed and comfortable getting up, watch carefully as he or she does so.
• Depending on where you work, you may be expected to assist the client back to his or her pre-fall position. Follow your employer’s policies and procedures for what you can and can’t do.
• If the client has trouble getting up, you can help steady him or her, but do not lift him or her up.

If the client can NOT get up...

• Do NOT try to lift or move a client.
• Cover the client with a blanket.
• Do NOT offer anything to eat or drink.
• Get help. Who to call depends on where you work.

Follow the fall policies and procedures you are given – including knowing when to call 911 and what and where to document and report a fall.

Proper Lighting
A client may need brighter lighting to improve his or her depth perception and ability to read and see.

Poor lighting can lead to safety concerns such as medication errors if a client or staff has difficulty seeing the label or the medication. Poor lighting can also be a slipping and tripping hazard.
• Proper wattage should be used in lamps and overhead lighting fixtures. A lighting fixture lists the highest wattage to use in that fixture. Never exceed the listed wattage.
• All porches, hallways, and stairs (at the top and bottom) should be well lit.
• Turn on a light before entering a room.

Document and report any lighting hazards to the appropriate person where you work.

**Housekeeping**

Good housekeeping is an important factor in job safety. Many accidents are the direct result of poor housekeeping.

Make sure you know and follow any policies and procedures your employer has regarding safe housekeeping practices.

- Keep floors, hallways, and stairs free of clutter. When you see something that may be a potential risk for a slip, trip, fall, or injury, ask the client if you can put it away or move it to a safer location.
- Clean up after yourself.
- Close drawers of dressers, desks, and keep kitchen cabinets closed when not in use.
- Store items on shelves so they don’t roll or fall out. Put heavy objects on lower shelves. Put most used items within easy reach.
- Stack materials and supplies in an orderly way so they won’t topple.
- Mop or clean up spills immediately.
- Store household cleaning products safely, in their original container, and clearly labeled.
- Keep vents clear of dust and clutter.
- Pick up trash and put it in the garbage. Take the garbage out frequently to a garbage can with a tight fitting lid.
- Keep the kitchen clean to help prevent food borne illness.
- Some laundry soaps may produce a rash on you or a client. If you notice this, you may want to recommend a change in detergents/soap.

*A clean and orderly work area is a safe place to work. You are less likely to be injured or cause injury to a client.*

**Oxygen Safety**

Oxygen is both a prescribed treatment and a hazardous chemical (oxygen is a fire hazard).
Make sure you know and follow any of your employer's policies and procedures when working with oxygen.

**Keep all sources of flame or sparks away from oxygen.**

- Open flames such as candles and cooking flames should be no closer than 5 feet.
- Smokers should stay at least 25 feet away and preferably in another room. The reason for the difference between open flames and cigarettes is that smokers may not be conscious of their cigarette and approach an oxygen source with a lit cigarette.
- A **client** should stay away from products that burn easily such as Vaseline or other petroleum products, nail polish remover, grease, oil, or aerosol sprays. A client should NEVER smoke while using oxygen.

**Storage of Oxygen Tanks**

Store oxygen tanks only in well-ventilated areas. Store oxygen cylinders on their side in a storage rack or chained to the wall. If a cylinder should fall, the pressure of escaping oxygen could create a projectile or fire hazard.

All tanks evaporate a certain amount of oxygen into the surrounding air. A closed room will soon become oxygen rich and flammable. **Keep the door open and the room ventilated.**

Breathing oxygen rich air is also a health hazard. Our body is designed to breathe oxygen at concentrations between 19.5 - 23.5%. Higher or lower concentrations are not healthy.

**Oxygen Concentrators**

Plug oxygen concentrators directly into wall outlets. Do not use extension cords or power strips. Concentrators are very sensitive to power changes and may shut down as a result. Power strips, if overused, can easily overload a circuit. Extension cords, if too long, can result in voltage drop or fire hazard.

**Oxygen Tubing**

Oxygen tubing tends to coil and twist resulting in a tripping hazard. Straighten the tubing and routing frequently to prevent tripping or fall hazards.

**Ladder Safety**

LTC workers are not allowed to get on ladders in some care settings. Make sure you know the policy where you work.

- Use a ladder that is the proper height for the job. The ladder should extend a minimum of 3 feet over the surface where you will be working.
- Never stand on the three top rungs of a ladder.
• Check the ladder for any loose screws, hinges or rungs. A ladder with broken or missing parts is not going to be able to support a person safely.
• Always face the ladder as you go up and down it. Keep both hands on either side of the ladder.
• Clean off any mud or other liquids that might be on the ladder rungs.
• Use ladders only on stable and level surfaces.
• Open it completely, making sure all locks are engaged.
• Wear slip-resistant shoes, such as those with rubber soles.
• Do not hand-carry loads on a ladder. Carry tools up or down on a belt or with a rope or hoist, not in your hands.
• Do not try reaching so far that you lose your balance; move the ladder.
• Never use a folding step ladder in an unfolded position.
• Metal conducts electricity! Keep a metal ladder away from power lines and live electrical wires.
• Return the ladder to its proper storage place when you are done using it.

When you have to climb, always use a ladder NOT a chair, box, or other makeshift ladder.

Fire Safety

• AFHs and ALFs must have working smoke detectors and fire extinguishers. Make sure you know where they are located.
• HCA LTC workers should check for smoke detectors and a fire extinguisher. If there are none, suggest a client get one. Test them several times a year to make sure they work. When daylight savings time begins and ends is a good time to remember to do this. Keep extra batteries on hand.
• You may need to stay with a client if he or she smokes and can’t safely smoke alone. This can be a concern for example, if a client has dementia, gets confused or forgetful, or takes medications that cause drowsiness.
• Make sure the kitchen stove is off when not in use and that anything cooking on the stove is not left unattended.
• If a client uses a fireplace or woodstove, make sure the damper is open before fires are lit. Fireplace screens are essential and need to be kept in place. Ashes should be removed only when the fire is out and ashes are cool to the touch. After cleaning the fireplace, take the ashes outside in a metal container. Never put ashes in a paper container or next to a wooden building.
• If a client uses a space heater, the heater should be on a level, hard, and nonflammable surface such as ceramic tile floor. Keep the heater at least three feet from bedding, drapes, furniture, and other flammable materials. Turn the space heater off if you leave the area.

See the section on Fire Emergencies for tips on what to do if there is a fire.

Document and report any fire safety hazards to the appropriate person where you work.
**Electrical Safety**

- Routinely check electrical appliances for signs of wear. If the cord is frayed or cracked, don’t use the appliance until it’s fixed or replaced.
- If an appliance has a three-prong plug, use it only in a three-slot outlet. Never force it to fit into a two-slot outlet or extension cord.
- Make sure equipment is grounded and replace any missing outlet covers.
- Keep electrical appliances away from wet floors, sinks, or bathtubs.
- Make sure extension cords are not frayed and do not carry more than their proper load.
- Use a Ground Fault Circuit Interrupter (GFCI) – they are especially important in a bathroom.
- Do not use extension cords to suspend lighting or as permanent wiring.
- Never run extension cords under carpets or rugs. Pressure from walking can fray wires and cause them to spark.
- Immediately shut off and replace light switches that are hot to the touch.
- Look for telltale signs of electrical problems such as dimming of lights, frequent circuit breaker trips, or blown fuses.

Document and report any electrical safety hazards to the appropriate person where you work.

**Weapons/Firearms Safety**

If a client living in his or her own home carries a gun or keeps one too close for your comfort, discuss your concerns with him or her. Talk to a client and see if he or she can store it or put the gun or weapon away while you are present.

Talk with your supervisor or the appropriate person where you work about your concerns if you can’t work out a plan that makes you feel safe with the client.

There are inexpensive trigger safety locks that keep a gun from firing unless it is removed. Encourage a client to get one if he or she doesn’t have one. Some sheriff’s departments provide free safety locks for guns and have gun safety classes.

In most cases, a person who is confused, has dementia, certain types of mental illness, or is taking medications that can lead to confusion, should not have access to guns or weapons.

If the client is living in an AFH or ALF, all firearms must be locked and accessible only to people authorized to have access to them.
Talk with the appropriate person where you work if you are concerned that a client has access to weapons and shouldn’t. HCA LTC workers should report any firearms to their supervisor and get help in managing the situation.

**Animal Safety**

Pets or farm animals can be a safety problem whether they are a client’s pet or live in the neighborhood.

**Bites**

Even the friendliest animal can bite in certain situations and some animals are unpredictable. The following tips will help keep you safe around animals.

Don’t approach, try to pet, or assume an animal is friendly until you get to know them. Always ask the owner if it is safe to approach any animal before doing so.

Do not pet a dog that is sleeping, eating, behind a fence, in a vehicle, tied up, or seems frightened, injured, or threatening.

Cats often let you know when they have had enough petting by biting or scratching. There are certain signals that may alert you to a coming scratch or bite. These include:

- The cat’s tail beginning to twitch.
- Ears turning back or flicking back and forth.
- The cat turning or moving its head toward your hand.

If you see any of these signals, get your hands away from the cat immediately, stay quiet, and let the cat go on its way.

*It is best to contact animal control and let them handle any stray or threatening dog or cat in the neighborhood.*

**What to Do if You Are Bitten**

The most important thing you can do to prevent infection following any bite or scratch is to immediately and thoroughly wash the injury with soap and water.

Secondary infections can be a hazard from bite wounds resulting in joint or systemic infection – especially from cats. Always contact your doctor if you have any questions or concerns.

Report any animal bites to your supervisor or the appropriate person where you work.

**Tripping**

Cats and dogs can become tripping hazards. Always stay aware of where animals are in the home. If necessary, remove them from the room for certain activities that may expose you or a client to tripping.
Other Animals
Farm animals such as cows, pigs, horses, chickens or exotic pets should be secured, fenced, or stabled, prior to you coming to work.

Sanitation and Other Health Safety Concerns
Any home where you work should be free of offensive odors, excessive animal waste, pest infestation, and rodents. If this is not the case or you are concerned about you or a client’s health and safety, contact your supervisor or the appropriate person where you work.

Pet care is not a part of your job responsibilities as a LTC worker.

Always wash your hands after handling pets.

Good hygiene and proper sanitation reduce the chances that a pet will infect people or other animals with parasites or infections. There should be no pet waste on floors, overflowing in litter boxes, or left in the yard.

Encourage a client to:
- Collect and dispose of pet waste routinely and properly. Small quantities of waste are best disposed with regular trash or flushed down a toilet.
- Not allow animals to be near or on food preparation surfaces.
- Treat any pest infestation for both the comfort and safety of the animal and people.

In rare situations, a client may no longer be able to provide the minimal standards of care an animal needs. Get help for any animal in the home that does not have access to food, water, or shelter, has severe untreated illnesses, or is being physically harmed. A neglected or abused animal can not only be in danger – but dangerous. Report your concerns to your supervisor or the appropriate person where you work.

In cases of abuse, animal control should also be notified.

There are specific requirements that must be met for an animal living or visiting an AFH or ALF.

Driver Safety
Drive safely with or without a client.
- Wear your seat belt. It’s the law in Washington for a very good reason. Drivers thrown from vehicles are 25 times more likely to die in the accident.
- Never drive while under the influence of alcohol or other drugs. 40% of all fatal accidents involve alcohol.
- Check your tires for wear and tear. Faulty or under inflated tires cause many preventable accidents. The wrong tires can cause
accidents too. Be prepared for snow and ice with good traction tires.

- Follow the car’s recommended vehicle maintenance schedule. Make sure your engine, brakes, steering, shocks, lights, horn, and windshield wipers are working properly.
- Slow down! 30% of all fatal accidents involve excessive speed.
- Back off! For every 10 miles of speed, you need one car length between you and the next car. For example, if you are going 60 MPH you need 6 car lengths between cars to be able to stop in time to prevent an accident.
- Use extreme caution at intersections. Some drivers think stopping at red lights and stop signs is optional.
- Reduce distractions and concentrate on your driving. Putting on makeup, talking, or snacking can distract you and contribute to accidents.
- Pull over to make a call or answer your cell phone. It is illegal to use a handheld phone while driving.
- Don't drive while drowsy. Get plenty of sleep. Pull over and take a short nap if necessary. Caffeine is only a temporary solution.

Drive carefully! The #1 cause for workplace fatalities in the US is motor vehicle accidents.

Violence in the Workplace

As a LTC worker, you need to be aware of the potential for violent or aggressive behavior, know how to minimize these behaviors, and how to keep you and others safe if it occurs.

As a LTC worker, you may see violence or aggression:
- By a client or someone in the home against you, other clients, or other staff.
- Between others in the home such as spousal abuse.
- In a client’s neighborhood.

Always be alert and aware of what is happening around you. Have an understanding and plan for what you would do in case violence occurs.

AFHs and ALFs have a documented plan for actions you must take:
- If a client becomes violent.
- To protect other clients.
- When other care team members should be involved.

A client with a history of aggressive or violent behavior will have this documented in his or her care plan. There will be possible strategies listed that may aid in helping prevent problem behaviors.

Where to report abuse

To report suspected abuse to DSHS for a vulnerable adult living in:

- An adult family home or assisted living facility: call 1-800-562-6078
- His or her own home, call 1-866-363-4276 or 1-866-End Harm
Document and report any incidents of violence to the appropriate person where you work. Depending on the situation, this may also include calling in a report as a mandated reporter to the DSHS abuse hotline and law enforcement.

If you think a client may be in immediate danger or needs urgent help, call 911.

Possible behaviors and attitudes
The following are possible behaviors and attitudes that may be warning signs a person may become overly aggressive or violent:

• Abuse of drugs or alcohol.
• A history of violence or uncontrolled anger.
• Preoccupied or dwells on injustices or unrealistic fears.
• Blames others for problems.
• Suspicious, holds grudges.
• Talks of detailed plans of violent acts.
• Fascination with weapons.
• Intentionally frightens people.
• Rapidly shifting moods that seem unstable.
• Recent major change in behavior or appearance or withdrawal from normal activities, family, and friends.

Possible warning signs
Some early warning signs that a person may become aggressive or violent may include:

• A raised voice.
• Shaking or clenched fist.
• Prodding with fingers or finger jabbing.
• Overly anxious.
• Excessive pacing.
• Angry muttering or glaring at you.

Handling Aggressive or Violent Behavior
Never minimize threats or your own internal sense that something is “off”. Trust your own instincts if you feel uneasy.

It is best to respond early if you are concerned about aggression or violence. First, assess your risk of potential danger. A person on the edge of physical aggression has three choices. He or she can attack, retreat, or compromise. Your goal is getting the person to retreat or compromise.

Ruling Out Other Reasons for Violent Behavior
Sudden, unexplained violent or aggressive behavior can be caused by an adverse reaction or side effects from medication, an undiagnosed urinary tract or other
infections, or even the disease or condition of a client. **Always start by ruling out a medical reason for the behavior.**

To ensure you and a client’s safety, always work with other members of the care team to ensure a client gets medical attention immediately when needed.

If you do **NOT** think you are in danger:

- Remain calm and stay in control of your responses.
- Remind the person you are a friend and there to help.
- Talk calmly. Indicate your desire to listen and understand the problem or situation.
- Validate the person’s feelings but don’t condone or positively reinforce acting out behaviors.
- Do not use aggressive body language such as crossing your arms or finger pointing. Move slowly.
- Try not to stand too close or over the person, if possible. If you have an escape route, sit down.
- Do not put your hand on anyone who is angry.
- Set appropriate limits for a person demonstrating threatening or disrespectful behaviors. Tell him or her that the behavior bothers you and you want it to stop.
- Have an exit strategy planned if the anger intensifies to a dangerous level.
- Respond early if you are concerned about aggression or violence!

**It is your responsibility to know what the procedures are in these circumstances and follow them.**

If you feel you are in **danger or violence is about to happen:**

- Find a way to excuse yourself (“my cell is ringing and I have to answer it outside” or “I left something important in my car”) and leave the room/area.
- Do not turn your back on the person. Move gradually backwards.
- Avoid potentially dangerous locations such as the top of stairs or places where furniture or other objects can be used as weapons.
- Get help once you are safely away from the situation.
- Call 911 if anyone is in immediate danger.

You will be expected to fill out an incident report if working in an AFH or ALF. HCA workers will need to follow the policies and procedures of their agency for documentation and reporting.

**Witnessing or Suspecting Violence Towards A client**

If you witness violence towards a client or have reasonable cause to suspect it, you are a mandated reporter of abuse and are required by law to report it. To report suspected abuse to DSHS for a vulnerable adult living in an AFH or ALF call 1-800-562-6078 or 1-866-363-4276 if the person lives in his or her own home.
If you suspect or witness physical or sexual assault, you are also required to report it to law enforcement.

**If you think a client or anyone else is in danger, call 911.**

2. **Stop the Spread of Infection and Disease**

As a LTC worker, you must protect a client and yourself from the spread of disease and infection. Clients who are frail, elderly, or have weakened immune systems may catch infections more easily. For them, infections can lead to serious or life-threatening problems.

Germs are organisms that cause infection by entering the body and growing. Germs are spread from one person to another. Infection control stop harmful germs from entering the body.

**Stop germs before they enter the body or have time to spread.**

To control the spread of infection:

- Wash your hands.
- Use disposable gloves and other personal protective equipment (PPE) when necessary (standard precautions).
- Clean and disinfect to kill germs before they can cause harm.
- Safely get rid of contaminated waste.

**Wash Your Hands**

Hand washing is the best defense against spreading infection. You will wash your hands several times a day.

**Always wash your hands:**

**Before**

- Contact with a client
- Eating
- Preparing food
- Putting on gloves

**After**

Contact with:

- a client
- body fluids
- contaminated items
- pets

![Proper Handwashing Guidelines](image-url)
- Using the restroom
- Removing gloves or protective clothing
- Blowing your nose, sneezing, coughing
- Cleaning
- Smoking

**Washing your hands with soap and water is the best way to prevent illness.**

**Wear Disposable Gloves**

Gloves must be worn when you:

- Have direct skin contact with blood, body fluids, or another person’s mucous membranes.
- Handle things contaminated with germs such as tissues, disposable underwear, or soiled clothing or linens.
- Have contact with a client that has an open wound.
- Clean-up body fluids.
- Assist a client with toileting or other personal care tasks.
- Have a cut, scrape, or chapped hands,

**Disposable gloves help control infection**

- Learn how to put on and take off gloves correctly.
- Make sure gloves are easy to find when you need them.
- Never reuse gloves.

**Put on new gloves each time**

**How to Remove Gloves Safely**

Assume that all used gloves are contaminated.

When you remove them, follow these steps so that the outside of the gloves does not touch your bare skin.

1) With one gloved hand, grasp the other glove just below the cuff.
2) Pull the glove down over your hand so it is inside out.
3) Keep holding the glove with your gloved hand and crumple it into a ball.
4) With two fingers of the bare hand, reach under the cuff of the second glove.
5) Pull the glove down inside out so it covers the first glove.
6) Both gloves are now inside out. You can throw them away safely.
7) Wash your hands.

*Never let the outside of a used glove touch your skin.*
Protect Yourself from Blood Borne Diseases

Although your risk of exposure to blood borne diseases in the workplace is small, it still exists.

Blood borne diseases such as Hepatitis B (HBV) and Hepatitis C (HCV), and the Human Immunodeficiency Virus (HIV), have changed the way LTC workers work.

Protecting yourself from blood borne diseases on-the-job requires knowing the facts about how blood borne diseases are spread, washing your hands, and taking a few other sensible standard precautions.

YOU can protect yourself from blood borne diseases.

Standard Precautions

Standard Precautions are standard practices used to protect you and clients from exposure to blood borne diseases.

Germs and diseases can enter the body when body fluids or blood touch sores, nicks, or cuts on your skin.

ALWAYS use Standard Precautions in EVERY situation that could involve possible contact with blood or other bodily fluids.

Standard precautions should be used with every client.

Standard precautions include washing your hands, wearing disposable gloves and other PPE, cleaning and disinfecting the environment, following special laundry procedures, properly disposing of contaminated waste and handling needles and sharps correctly.

Treat all blood or body fluids as potentially infectious.

Personal Protective Equipment (PPE)

Always wear gloves to protect your hands when having direct contact with blood or body fluids. Even tiny breaks or cracks in the skin from common conditions like dermatitis, hangnails, acne, chapping, or broken cuticles can be doorways for viruses to enter your body. Throw gloves away after use and wash your hands.

Use additional PPE depending on the anticipated exposure. This could be a:

- Gown to protect your skin and clothing.

Definitions

Blood borne disease - disease causing germs spread through contact with blood or body fluids such as urine, feces, vomit, semen, and vaginal secretions.

Personal Protective Equipment (PPE) - Equipment or clothing such as gloves, gowns, or masks, designed to prevent injury or illness from a specific hazard in the workplace.

Standard Precautions - accepted practices used to prevent infection from blood borne diseases.

Contaminated - dirty, or having touched blood or bodily fluids.

Immune system - what the body uses to fight off infection.
• Mask to protect your mouth or nose.
• Goggles to protect your eyes.
• Face shield to protect your face, mouth, eyes, and nose.

The risk of transmission of a blood borne pathogen to you as a LTC worker is extremely small if standard precautions are used.

Cleaning and Disinfecting Blood or Body Fluids

• Wear gloves to protect your hands. Avoid tearing your gloves on any equipment.
• Use disposable paper towels to soak up most of the blood.
• Disinfect with an appropriate disinfecting solution such as ten parts water to one part bleach.
• After cleaning up, disinfect mops and other cleaning equipment.
• Remove gloves and throw them away.
• Put all contaminated towels and waste in a sealed color-coded or labeled leak-proof container. Double bag all contaminated materials that are being thrown away.
• Wash your hands when tasks are completed.

Wear gloves and use other needed PPE when you clean surfaces soiled with blood or other body fluids.

If you are exposed to blood or body fluids

If you get blood or other body fluids:
• On your skin: immediately WASH with non-abrasive soap and water.
• In your eyes: immediately FLUSH with running water for 5 minutes in each eye at the sink or at an eyewash fountain.

If you:
• Get a needle stick or puncture wound, wash thoroughly with soap and water or pour a small amount of hydrogen peroxide on the wound. Get medical attention for further action.
• Have any open area on your body such as a bite, scratch, or lesion that may have had blood or body fluid exposure, wash the area thoroughly with soap and water or pour a small amount of hydrogen peroxide on the wound. Get medical attention for further action.
Reporting exposure
There are specific guidelines you must know and follow if you have an unprotected exposure to blood or other body fluids in your job. It is your responsibility to know who you contact and the basic procedures you are to follow.

Hepatitis B virus (HBV) vaccination
Depending on where you work and your job responsibilities, your employer may offer the HBV vaccination to you free of charge if you choose to get it. The vaccination protects you against the HBV virus. There is a series of three shots beginning with the first one and then again in one and six months.

Other Exposure Hazards
You may be exposed to blood borne diseases while cleaning or doing household tasks for a client. Blood, even if you can't see it, can be almost anywhere you have to clean such as toilets, sinks, laundry or trashcans.

Laundry
Laundry can conceal contaminated items such as bloody or soiled sheets, clothing, rags, or contaminated sharps.
Protect yourself when handling laundry.
- Wear gloves.
- Always hold and carry it by the top. Never place a hand underneath to support it.
- Remove gloves and wash your hands before handling clean laundry.

Disposing of contaminated waste
Proper disposal of garbage and waste is part of infection control.

The three types of waste are:
1. Regular garbage or trash.
   - Never place your foot or hand in a garbage can to compact the trash.
2. Contaminated waste: Anything that might have come in contact with blood or bodily fluids.
   - Separate contaminated waste from regular garbage.
3. Sharps: syringes, razors, finger sticks, or other things with sharp edges.
   - Never put sharps in a regular wastebasket or garbage can.
   Use all disposable and single-service supplies and equipment only one time as specified by the manufacturer.

No sharps in garbage bags
- Put all “sharps” in a special hard-plastic sharps container. The type of container used depends on where you work.
- Never put sharps into a regular trash bag or directly into a garbage can - sharps could prick someone’s skin and pass on germs.

Safe disposal prevents injury and infection.
Regulations for proper disposal of sharps containers vary by county and/or garbage disposal companies. Check with your local Health Department or your supervisor if more information is needed.

**Clean and Disinfect**

Stop the spread of infection by cleaning up as you go. This is especially important in bathrooms and kitchens.

There will be a cleaning schedule where you work. It is your responsibility to know what that schedule is and follow it.

**Cleaning Tips:**

- Clean kitchen and bath surfaces with soap and water to wash away dirt and germs.
- Disinfect with a disinfectant product.
- Note: A disinfectant can be made by mixing one tsp. bleach with one gallon of water. The bleach solution is only good for 24 hrs.
- Wear household gloves when cleaning.
- Flush bodily fluids and dirty water used for cleaning down the toilet.
- Wash dirty dishes in soap and hot water. Rinse with hot running water, and air dry. Put dishes away when dry.

**Working with Household Chemicals**

Maintaining a sanitary environment helps prevent illness. Clean and disinfect household surfaces with a sanitizer such as bleach. Follow the manufacturer’s instructions for usage. Don’t make the solution any stronger than what is recommended.

**Product Labels**

Always look at a product’s label before using it. The product label indicates how toxic or hazardous a product might be. Look for the words caution, warning, and danger.

- **Caution** means that a product could hurt you. It could bother your skin, make you sick if you breathe the fumes, or hurt your eyes if contact occurs.
- **Warning** is more serious than caution and means you could become sick or seriously hurt with improper handling of the product. It also identifies products that can easily catch on fire.
- **Danger** indicates serious concern. Be extremely careful when handling products that contain the word danger on the label. If used incorrectly, you could become very sick.
Never remove product labels. Besides these warnings, they also contain important emergency treatment information.

**Tips on Working With Household Chemicals**

- Never mix two different kinds of cleaners together, especially products containing ammonia and bleach.
  
  Mixing bleach with ammonia produces a dangerous gas which can cause serious breathing problems and be potentially fatal if inhaled in great quantities.

- When working with oven cleaners or drain cleaners always wear gloves and safety goggles. Do not breathe the fumes. Make sure the work area is well ventilated.

  **Use household chemicals only in well ventilated areas.**

- When working with all-purpose cleaners, always wear rubber gloves to protect your skin.

- Keep hazardous products in a cool, dry place, away from pilot lights, stoves, or water heaters.

- Stack products so that they can’t fall over.

- Do not smoke when using a flammable cleaning product.

- Stop using a product if you become dizzy, sick to your stomach, or develop a headache.

**If You Get Chemicals on You**

Generally, if you get chemicals on you, wash or brush off powders, liquids, gels or pastes and then rinse with lots of water.

If you have any question about the danger of a chemical, are not sure what it is, or have significant symptoms, go immediately to the nearest hospital's emergency room, call your health care provider, or depending on your situation, 911.

If you get a chemical in your eye, begin washing your eye immediately for 15 minutes. The longer a chemical is in your eye, the more damage occurs. Washing away any particles that may have been in the chemical is extremely important.

Even though it may be uncomfortable, open your eyelids as wide as possible as you rinse your eye(s). You might want to do this in a shower. This first washing is critical to your safety.

Visit the The American Association of Poison Control Centers website for more information on poison safety. [www.aapcc.org](http://www.aapcc.org)
Remember medications are small, powerful chemicals. Some drugs can be dangerous if you get them on your skin, breathe them in, or get them on your hands and then handle food or utensils.

**When You Are Sick**

Do not expose clients to your germs if you have a contagious infection such as the flu. If you are sick and contagious, don’t come to work.

Remember, many clients are frail and have weakened immune systems. This makes it easier for a client to get sick and can lead to serious complications. Call your supervisor or another designated person where you work as soon as you know you are sick and can’t go to work. Give them as much time as possible to find a replacement for you for that shift.

**Know who to call if you can’t go to work. Have all important contact numbers with you at home.**

**4. Prepare for and Handle Emergencies**

As a LTC worker, you must always be prepared to handle emergency situations. In some care settings, you may be the only person to provide help at the time of the emergency.

Your employer has policies and procedures you must follow in emergency or disaster situations. In addition, any specific requirements for a client during an emergency are documented in his or her care plan.

You need to know:
- What you are to do, and in some cases not do, in different types of emergencies
- Who you contact or work with during and after the emergency is under control.
- How best to keep everyone, including yourself, safe.
- The specific needs of individual clients.

**Know your role in an emergency before it strikes.**

**Evacuation planning**

You need to know ahead of time what the evacuation plan is in case of emergency or disaster and your role in it.

The evacuation plan will list what to do if clients need to be moved to another part of the building, outside the building to a safe area or moved to a separate location altogether.
You need to know:

- Each client’s evacuation plan. It may be different for each client depending on his or her physical and/or mental abilities.
- The best route of evacuation.
- Where the primary and secondary safe area is.

**Staying calm during an emergency**

Staying calm is essential to handling any emergency. Of course, that can be easier said than done. Here are some helpful tips.

- Know the plan. Staying calm is often a result of knowing what to do next. You will feel more in control if you know what steps to take.
- Practicing the plan is even better! Take drills and planning seriously.
- Take several deep breathes and steady yourself.
- Assess the situation. Have an idea of the entire situation before you act.
- Stay in the moment. Focus on what you need to do to get through the emergency.
- Detach yourself from the high emotions of the situation. Others will likely take your lead and remain calmer if you do.

**Advance Directives**

Clients can have legal documents drawn up “in advance” that detail what he or she wants done regarding his or her physical and mental health care if he or she can no longer make these decisions. Advance directives help make sure a client’s wishes are known and followed.

**In an emergency, you need to know if a client has advance directives, where they are located, and give them to emergency responders.**

**Physician’s Orders for Life-Sustaining Treatment (POLST) form**

The Physician’s Orders for Life-Sustaining Treatment (POLST) form is a summary of a person’s wishes regarding life sustaining treatment and is intended for people in the last stages of a life threatening illness. It should be recognized as a set of physician orders, to be implemented as any physicians orders would. This order is signed by both the resident (or their surrogate) and the medical provider regarding resuscitation and medical intervention. The POLST explains what action the resident wants in the event of a medical emergency, which also includes wishes related to care and treatment measures and directives on whether or not to start Cardiopulmonary Resuscitation (CPR).

In Washington State, this form is usually printed on bright green paper. Photocopies and faxes of signed POLST are legal and valid and may be copied in different colors, other than lime green.
**Medical Emergencies**

Examples of medical emergencies include when a client:
- Has serious trouble breathing.
- Passes out and can’t be easily awakened.
- Has fallen and is hurt.
- Overdoses or has a serious drug interaction.
- Has any serious and sudden change in health.

Your employer will have set policies and procedures for handling medical emergencies. This plan will include who to call for help and when. A client with a medical emergency must receive immediate help.

Document and report any medical emergencies once the situation is under control.

**Fire Emergencies**

Those working in AFHs or ALFs will have periodic fire drills to practice what to do in case of a fire. Take these drills seriously — they save lives.

HCA workers should know the evacuation plan for a client, the best evacuation route out of the home, and the address and cross street of the client’s home. This information is available in a client’s care plan.

If you discover a fire, remember R.A.C.E. to help you respond safely and correctly.

**R** = **RESCUE**: Stop what you are doing and get clients to safety.

**A** = **ALARM**: Sound an alarm. This might be pulling a fire alarm or calling 911.

**C** = **CONFINE** the fire by closing all doors and windows you can safety reach.

**E** = **EXTINGUISH** the fire with a fire extinguisher if it is safe to do so.

**OR** **EVACUATE** the area if the fire is too large for a fire extinguisher.

Never:
- Put water on a grease or liquid fire. Water will cause the fire to spread.
- Put water on an electrical fire. It can give you a serious shock.
- Re-enter a burning building to save pets or valuables.
- Try to move a burning object out of the room.
- Use an elevator as a fire escape route.

**Calling 911:**

If you need to call 911:
- Describe the nature of the emergency.
- Give the 911 operator the telephone number, address, nearest major cross-street, and directions to your location.

Write this information down and keep it by the phone. In an emergency, it is easy to forget in the chaos of the moment.

**If fire prevents you from evacuating stay with a client.**

- Call 911 and tell them that you are trapped.
- Stay in a room with the door shut to slow the fire down.
- Stuff clothing or towels in openings around doors and vents.

**Heat and smoke rise - Stay close to the floor where there is less smoke**
SMOKE is usually the enemy, not the fire.

Using a fire extinguisher
A fire extinguisher is required in all AFHs and ALFs. HCA workers should encourage a client to have one if it isn’t in the home. A fire extinguisher that says “ABC” on the front will but out all types of fires, wood/paper, oil/grease and electrical.

The word P.A.S.S. will help you remember the steps to using a fire extinguisher.

P = Pull. Hold the extinguisher upright and pull the ring pin, snapping the plastic seal.

A = Aim. Stand back from the fire, aim at the base of the fire nearest you.

S = Squeeze. Keeping the extinguisher upright, `squeeze the handles together to discharge.

S = Sweep. Sweep from side to side.

When the fire is out, watch to make sure it stays out. Evacuate everyone from the area and ventilate the area immediately after using a fire extinguisher.

Any fire needs to be documented and reported.

Preparing for Natural Disasters
Natural disasters can come on without warning and be a major threat to you and a client.

Emergency Kits
An emergency kit is a collection of supplies that allows people to live without assistance for at least three days in case of emergencies. Emergency supplies must be available if you work in an AFH or ALF. Become familiar with where they are located.

If you work for a HCA, encourage a client to have an emergency supply kit available.

Earthquakes
During an earthquake, keep yourself safe and assist a client when the shaking stops.
You should:
• Stay in the building, take cover under a desk or table, and hold on.
• Stay away from windows, heavy cabinets, bookcases, or glass dividers.
• When the shaking stops, get out of the building. Don’t attempt to move a seriously injured person unless he or she is in immediate danger of further injury.

• If you are outside: stand away from the buildings, trees, or telephone and electric lines.

• If you are on the road: drive away from underpasses or overpasses. Stay in the vehicle.

Weather Emergencies

Weather related disasters may or may not give you warning. Weather conditions that may result in an emergency situation include wind, rain, heat, lightning, or flooding.

If you will be outside with a client, be sure to check the forecast ahead of time.

Exposure to sun or high temperatures can be a hazard. Encourage a client to:

• Apply sunscreen with a protection factor of thirty or higher.
• Wear sunglasses and a hat.
• Drink plenty of fluids on hot days.
• Sit in a shaded area if he or she will be outside for an extended period of time.

NEVER leave a person or a pet in a vehicle on warm, sunny days.

Power Outages

AFHs and ALFs must provide emergency lighting or flashlights in all areas of the home.

If clients are in total darkness, especially at night:

• Take the time to assure all clients are safe and aware of what is happening.
• If power is out in the neighborhood, disconnect all electrical heaters and appliances to reduce the initial demand and protect the motors from possible low voltage damage.
• Unplug computers and other voltage sensitive equipment to protect them against possible surges when the power is restored.
• Conserve water, especially if water source is a well.
• Keep doors, windows, and draperies closed to retain heat.
• Leave one light switch in the “on” position to alert you when service is restored.
• Keep refrigerator and freezer doors closed. If the freezer door remains closed, a fully loaded freezer can keep foods frozen for two days.
• Be extremely careful of fire hazards caused by candles or other flammable light sources.
• When using kerosene heaters, gas lanterns, or stoves inside the house, maintain ventilation to avoid build-up of toxic fumes.
• Never use charcoal or gas barbeques inside, they produce carbon monoxide.

**When working in a client’s home:**

• Register any life-sustaining equipment a client needs (if any) with his or her utility company.
• Encourage a client to consider buying a generator or know where to rent one if he or she needs life sustaining equipment that requires electricity. Have phone numbers available for rental generators if a client can’t buy one.
• Post the telephone number of a client’s local utility company for reporting power outages or outage updates.
• If a client has an electric garage door opener, learn how to open the door without power.
• Encourage a client to have an alternate heat source and a supply of fuel.
• If a client’s house is the only house without power, check the fuse box or circuit breaker panel. Turn off large appliances before replacing fuses or resetting circuits.

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**In Conclusion**

This training is a good start at knowing what to watch for and do to safeguard you and your client’s safety and wellbeing.

Precaution is often an unsung hero. It takes planning, focus, and commitment to eliminate or minimize safety risks. It often takes just a few extra minutes each day to stay healthy and safe in your job.

Every time you remove or minimize a safety concern, help prevent an accident, stop the spread of infection and disease, or effectively handle an emergency, you help prevent or lessen the pain, fear, anxiety, and suffering that may have resulted to you or others in your care.

As a LTC worker, you make a difference in the lives of others every day. Take pride in what you do to keep yourself and those in your care safe and well.

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*It’s Up to You!*
Appendix A: Emergency Action Plan for Home Care

(Employer and employee should develop this plan and post next to phone)

Employer Name: __________________________ Date: ____________

1. EMERGENCIES- LIFE THREATENING – CALL 9-1-1 Tell them the number you are calling from

Home Address: ____________________________

Major Crossroad: __________________________

Home Direction from Crossroad: __________________________

2. EMERGENCIES- NON- LIFE THREATENING: List the following local numbers

Fire/Paramedics: __________________________ Physician: __________________________

Hospital: __________________________ Ambulance: __________________________

Police/Sheriff: __________________________ Poison Control: __________________________

Other: __________________________

3. HOME EVACUATION: Make a sketch of the home in this space and show where exits are. Draw arrows to show escape routes. In the event of a fire, get yourself and your employer out.

4. TEMPORARY RELOCATION SITES: List alternative places to go when the home is unsafe.

Name: __________________________ Phone: __________________________

Address: __________________________

Name: __________________________ Phone: __________________________

Address: __________________________

5. SAFETY EQUIPMENT- The fire department may help you with installation information.

Fire Extinguishers: __________________________ Smoke Alarms: __________________________

6. OTHER EMERGENCY EQUIPMENT- Identify location of first aid kit, blankets, food and water, flashlights, radio and other emergency equipment.

Location: __________________________