

1  **Chapter 12**

Safety

2  **Safety**

- Safety is a basic need.
- Patients and residents are at great risk for accidents and falls.
- Common sense and simple safety measures can prevent most accidents.
- The goal is to decrease the person's risk of accidents and injuries without limiting mobility and independence.

3  **A Safe Setting**

☞ In a safe setting:

- ☞ A person has little risk of illness or injury.
- ☞ The person is free of hazards to the extent possible.
- ☞ The risk of infection, falls, burns, poisoning, and other injuries is low.
- ☞ Temperature and noise levels are comfortable.
- ☞ Smells are pleasant.
- ☞ There is enough room and light to move about safely.
- ☞ The person and the person's property are safe from fire and intruders.
- ☞ The person is not afraid.

4 5  **Accident Risk Factors**

- Age
 - ☞ Children and older persons are at risk.
- Awareness of surroundings
 - ☞ The person in a coma relies on others.
- Agitated and aggressive behaviors
- Vision loss
- Hearing loss
- Impaired smell and touch
- Impaired mobility
- Drugs

6  **Identifying The Person**

- You must give the right care to the right person.
- The person may receive an identification (ID) bracelet when admitted to the agency.
- To identify the person:
 - ☞ Carefully compare identifying information on the assignment sheet with that on the ID bracelet.
 - ☞ Use at least 2 identifiers. Follow agency policy.
 - ☞ Call the person by name when checking the ID bracelet.
 - ☞ Just calling the person by name is not enough.

7  **Preventing Burns**

- Burns are a leading cause of death among children and older persons.
- Common causes include:

- ☞ Smoking
- ☞ Spilled hot liquids
- ☞ Children playing with matches
- ☞ Barbecue grills, fireplaces, and stoves
- ☞ Electrical items
- ☞ Very hot water (hand sinks, tubs, showers)

8 Preventing Burns (cont'd)

- Burn severity depends on water temperature and length of exposure. The person's condition also is a factor.
 - ☞ Superficial (first-degree) burn—involves the epidermis (top layer of skin).
 - ☞ Partial-thickness (second-degree) burn—involves the epidermis and dermis.
 - ☞ Full-thickness (third-degree) burn—the epidermis and dermis, fat, muscle, and bone may be injured or destroyed.

☞

9 Preventing Poisoning

- A poison is any substance harmful to the body when ingested, inhaled, injected, or absorbed through the skin.
 - ☞ Unintentional—the person takes or gives a substance without intending to cause harm.
 - ☞ Intentional—the person takes (suicide) or gives (assault or homicide) a substance with the intent to cause harm.

10 Preventing Poisoning (cont'd)

- Lead poisoning
 - ☞ Lead enters the body through inhalation and/or ingestion.
 - ☞ Children between the ages of 6 months and 6 years are at risk for lead poisoning.
 - ☞ Lead can affect almost every body system.
 - ☞ Signs and symptoms are gradual in onset.
 - ☞ They are not always obvious.
- Carbon monoxide poisoning
 - ☞ Carbon monoxide is a colorless, odorless, and tasteless gas. It is produced by the burning of fuel.

11 Preventing Suffocation

- Suffocation is when breathing stops from the lack of oxygen.
 - ☞ Death occurs if the person does not start breathing.
- Common causes include:
 - ☞ Choking
 - ☞ Drowning
 - ☞ Inhaling gas or smoke
 - ☞ Strangulation
 - ☞ Electrical shock

12 Preventing Suffocation (cont'd)

- Choking
 - ☞ Foreign bodies can obstruct the airway.

- ☞ Called choking or foreign-body airway obstruction (FBAO)
- ☞ Air cannot pass through the airways into the lungs.
- ☞ The body does not get enough oxygen.
- ☞ It can lead to cardiac arrest.
- ☞ Choking often occurs during eating.
- ☞ Unconscious persons can choke.
 - ☞ Common causes are aspiration of vomitus and the tongue falling back into the airway.

13 Preventing Suffocation (cont'd)

- With mild airway obstruction:
 - ☞ Some air moves in and out of the lungs.
 - ☞ The person is conscious.
 - ☞ Usually the person can speak.
 - ☞ Often forceful coughing can remove the object.
 - ☞ Breathing may sound like wheezing between coughs.
 - ☞ You should:
 - ☞ Stay with the person.
 - ☞ Encourage the person to keep coughing to expel the object.
 - ☞ Do not interrupt the person's efforts to clear the airway.
 - ☞ Call for help if the obstruction persists.

14 Preventing Suffocation (cont'd)

- With severe airway obstruction:
 - ☞ Air does not move in and out of the lungs.
 - ☞ If able to cough, the cough is of poor quality.
 - ☞ Infants cannot cry.
 - ☞ When the person tries to inhale, there is no noise or a high-pitched noise.
 - ☞ The person may appear pale and cyanotic (bluish color).
 - ☞ The conscious person clutches at the throat (the "universal sign of choking").
 - ☞ The conscious person is very frightened.
 - ☞ If the obstruction is not removed, the person will die.

15 Preventing Suffocation (cont'd)

- Relieving choking
 - ☞ Abdominal thrusts are used to relieve severe airway obstruction.
 - ☞ Quick, upward thrusts to the abdomen that force air out of the lungs and create an artificial cough
 - ☞ Abdominal thrusts are not used for very obese persons or pregnant women.
 - ☞ Chest thrusts are used instead.
 - ☞ If you assist a choking person:
 - ☞ Report and record what happened.
 - ☞ Include what you did and the person's response.

16 Preventing Equipment Accidents

- All equipment is unsafe if:
 - ☞ Broken
 - ☞ Not used correctly

- ⌘ Not working properly
 - Electrical items must work properly and be in good repair.
 - Do not use or give damaged items to patients or residents.
 - The Safe Medical Devices Act requires that agencies report equipment-related illnesses, injuries, and deaths.
- 17 **Preventing Equipment Accidents (cont'd)**
 - Bariatric-safe equipment
 - ⌘ Many agencies have bariatric equipment.
 - ⌘ This equipment is labeled with "EC" for "expanded capacity."
 - ⌘ It is also labeled with the weight limit suggested by the manufacturer.
 - ⌘ You must know the weight capacity of the equipment and the person's weight.
 - ⌘ Do not use the item if the person's weight is greater than the weight capacity.
 - ⌘ Follow the nurse's directions and the care plan.
- 18 **Wheelchair Safety**
 - Check the wheel locks (brakes).
 - Check for flat or loose tires.
 - Make sure the wheel spokes are intact.
 - Make sure the casters point forward.
 - Position the person's feet on the footplates.
 - Make sure the person's feet are on the footplates before moving the chair.
 - Push the chair forward when transporting the person. Do not pull the chair backward unless going through a doorway.
- 19 **Wheelchair Safety (cont'd)**
 - Follow the care plan for the number of staff needed to transport the person.
 - Lock both wheels before you transfer a person to or from the wheelchair.
 - Follow the care plan for keeping the wheels locked when not moving the wheelchair.
 - Do not let the person stand on the footplates.
 - Do not let the footplates fall back onto the person's legs.
 - Make sure the person has needed wheelchair accessories.
- 20 **Wheelchair Safety (cont'd)**
 - Remove the armrests (if removable) when the person transfers to the bed, toilet, commode, tub, or car.
 - Swing front rigging out of the way or detach it for transfers to and from the wheelchair.
 - Clean the wheelchair according to agency policy.
 - Ask a nurse or physical therapist to show you how to propel wheelchairs up steps and ramps and over curbs.
 - Follow safety measures to prevent equipment accidents.
- 21 **Stretcher Safety**
 - Ask 2 or more co-workers to help you transfer the person to or from the stretcher.
 - Lock the stretcher wheels before the transfer.

- Fasten the safety straps when the person is properly positioned on the stretcher.
- Follow the care plan for the number of staff needed to transport the person.
- Raise the side rails. Keep them up during the transport.

22 **Stretcher Safety (cont'd)**

- Make sure the person's arms, hands, legs, and feet do not dangle through the side rail bars.
- Stand at the head of the stretcher. Your co-worker stands at the foot of the stretcher.
- Move the stretcher feet first.
- Do not leave the person alone.
- Follow the safety measures to prevent equipment accidents.

23

24 **Handling Hazardous Substances**

- The Occupational Safety and Health Administration (OSHA) requires that health care employees:
 - ☞ Understand the risks of hazardous substances
 - ☞ Know how to safely handle them
- Exposure to hazardous substances can occur:
 - ☞ Under normal working conditions
 - ☞ During certain emergencies

25 **Handling Hazardous Substances (cont'd)**

- To protect employees, OSHA requires a hazard communication program.
 - ☞ The program includes:
 - ☞ Container labeling
 - ☞ Material safety data sheets (MSDSs)
 - ☞ Employee training
 - ☞ The agency provides eyewash and total body wash stations in areas where hazardous substances are used.

26 **Handling Hazardous Substances (cont'd)**

- Labeling
 - ☞ All hazardous substance containers need warning labels.
 - ☞ Warning labels identify:
 - ☞ Physical and health hazards
 - ☞ Precaution measures
 - ☞ What personal protective equipment to wear
 - ☞ How to use the substance safely
 - ☞ Storage and disposal information
 - ☞ If a warning label is removed or damaged:
 - ☞ Do not use the substance.
 - ☞ Take the container to the nurse and explain the problem.
 - ☞ Do not leave the container unattended.

27 **Handling Hazardous**

Substances (cont'd)

- Material safety data sheets (MSDS)
 - ☞ Every hazardous substance has an MSDS.
 - ☞ Employees must have ready access to the MSDS.
 - ☞ Check the MSDS before:
 - ☞ Using a hazardous substance
 - ☞ Cleaning up a leak or spill
 - ☞ Disposing of the substance
 - ☞ Tell the nurse about a leak or spill right away.
 - ☞ Do not leave a leak or spill unattended.
- Your employer provides hazardous substance training.

28 Fire Safety

- The entire health team must prevent fires and act quickly and responsibly during a fire.
- Three things are needed for a fire:
 - ☞ A spark or flame
 - ☞ A material that will burn
 - ☞ Oxygen
- Safety measures are needed where oxygen is used and stored.
- Agencies have no-smoking policies and smoke-free areas.

29 Fire Safety (cont'd)

- Know where to find fire alarms, fire extinguishers, and emergency exits.
- Remember the word RACE:
 - ☞ *R* is for rescue.
 - ☞ *A* is for alarm.
 - ☞ *C* is for confine.
 - ☞ *E* is for extinguish.
- Clear equipment from all normal and emergency exits.
- Do not use elevators if there is a fire.
- ☞

30 Fire Safety (cont'd)

- To use a fire extinguisher, remember the word PASS used by the National Fire Protection Association.
 - ☞ *P* (pull the safety pin).
 - ☞ *A* (aim low).
 - ☞ *S* (squeeze the lever).
 - ☞ *S* (sweep back and forth).
- Agencies have evacuation policies and procedures.
 - ☞ Patients and residents closest to the fire go out first.

31 Disasters

- A disaster is a sudden catastrophic event.
 - ☞ People are injured and killed.
 - ☞ Property is destroyed.
- There are natural and human-made disasters.

- Follow agency procedures for disasters that could occur in your area.
- Follow agency procedures for bomb threats if:
 - ☞ A caller makes a bomb threat.
 - ☞ You find an item that looks or sounds strange.

32 **Workplace Violence**

- Workplace violence is any violent act directed toward persons at work or while on duty.
- Workplace violence can occur in any place where staff perform work-related duties.
 - ☞ It can be a permanent or temporary place.
 - ☞ It occurs most often in mental health units, emergency departments, waiting rooms, and geriatric units.

33 **Workplace Violence (cont'd)**

- According to OSHA, more assaults occur in health care settings than in other industries.
 - ☞ Nurses and nursing assistants are at risk. They have the most contact with patients, residents, and visitors.
- OSHA has guidelines for violence-prevention programs.
 - ☞ The goal is to prevent or reduce employee exposure to situations that can cause death or injury.

34 **Risk Management**

- Risk management involves identifying and controlling risks and safety hazards that affect the agency.
- The intent of risk management is to:
 - ☞ Protect everyone in the agency.
 - ☞ Protect agency property from harm or danger.
 - ☞ Protect the person's valuables.
 - ☞ Prevent accidents and injuries.

35 **Risk Management (cont'd)**

- Risk managers
 - ☞ Work with all agency departments
 - ☞ Look for patterns and trends in incident reports, patient and resident complaints (patients, residents, staff), and accident and injury investigations
 - ☞ Look for and correct unsafe situations
 - ☞ Make procedure changes and training recommendations as needed
- The person's belongings must be kept safe.
 - ☞ A personal belongings list is completed.
 - ☞ A valuables envelope is used for jewelry and money.
 - ☞ Personal items kept at the bedside are listed in the person's record.

36 **Risk Management (cont'd)**

- Report accidents and errors at once. This includes:
 - ☞ Accidents involving patients, residents, visitors, or staff
 - ☞ Errors in care
 - ☞ Giving the wrong care
 - ☞ Giving care to the wrong person

- ☞ Not giving care
- ☞ Broken or lost items owned by the person
- ☞ Lost money or clothing
- ☞ Hazardous substance incidents
- ☞ Workplace violence incidents
- ☞ An incident report is completed as soon as possible after the incident.