

Module 12: Accidents, Incident Reports, Falls, and Restraints

Objectives

- Identify the risk factors that can lead to accidents and falls.
- State ways to prevent a fall.
- Describe how to minimize the risk of injury during a fall.
- Become familiar with your facility’s Fall Policies.
- Describe complications associated with use of restraints.
- Identify restraint alternatives.

Key Terms

- Risk Factor
- Impaired Mobility
- Impaired Senses
- Incontinence
- Assistive Devices
- Incident Reports

Content

!!! REMINDER !!!	
<ul style="list-style-type: none"> • ALWAYS FOLLOW YOUR FACILITY'S POLICIES AND PROCEDURES. • ALWAYS FOLLOW THE CONSUMER’S CARE PLAN. • NEVER WORK OUTSIDE YOUR JOB DESCRIPTION OR SCOPE OF TRAINING. • NEVER PERFORM MEDICAL/CLINICAL PROCEDURES OR INTERPRET MEDICAL CONDITIONS OR RESULTS. • REPORT OBSERVATIONS TO SUPERVISOR UNLESS INSTRUCTED OTHERWISE. 	
REFERENCE TEXTBOOK: UNIT 3: CHAPTER 13: PATIENT SAFETY AND RESTRAINT ALTERNATIVES	
TEXTBOOK SECTION	NOTES
Accidents and Incidents*	
Risk Factors*	
• Age*	
• Medication*	
• Paralysis*	
• Poor Mobility*	
• Sensory Impairment*	
• Limited Awareness of Surrounding*s	
• Effects of Medical Conditions or Treatments*	
• Environmental Conditions*	
Avoiding Accidents and Incidents*	
• Preventing Falls*	Fall Risk Factors <ul style="list-style-type: none"> • Age • Medication • Impaired Mobility

	<ul style="list-style-type: none"> • Impaired Senses • Medical Treatments • Incontinence • Environment • Frayed carpet and scatter rugs • Loose tiles or lifted edges of linoleum • Wet floors • Cluttered hallways or paths • Presence of ice or snow • Lack of appropriate footwear • Poor lighting • Inadequate handrails on staircases • Pets that are underfoot • Entering and Exiting Bathtubs/Showers • State of Emotions • History of Falls • Incorrect Use of Assistive Devices • Defective Assistive Devices • Lack of Knowledge of Surroundings • Physical Fitness/Health • Consumers who are bedbound may have muscle weakness and joint stiffness when first attempting to get out of bed. They may be unsteady as well as “lightheaded” which will compound their risk of falling. This lightheadedness is due to changes that take place in their blood pressure while lying in bed for prolonged periods of time. <p>Include:</p> <ul style="list-style-type: none"> • Guidelines Box 13-1: Guidelines for Preventing Falls*
REFERENCE TEXTBOOK: UNIT 3: CHAPTER 12 – WORKPLACE SAFETY	
TEXTBOOK SECTION	NOTES
♦ Preventing Falls*	<p>Include:</p> <ul style="list-style-type: none"> • Box 12-1: Minimizing the Risk of Injury as a Result of a Fall*
REFERENCE TEXTBOOK: UNIT 9: CHAPTER 47: SAFETY AND INFECTION CONTROL IN THE HOME HEALTH CARE SETTING	
TEXTBOOK SECTION	NOTES
♦ Falls*	
SUPPLEMENTAL INFORMATION	

<ul style="list-style-type: none"> • Reporting Falls 	<p>Falls must be reported per your facility's policies and procedures.</p>
<ul style="list-style-type: none"> • Facility Fall Policies 	<p>Learn your facility's Fall Policy.</p>
<p>REFERENCE TEXTBOOK: UNIT 3: CHAPTER 13: PATIENT SAFETY AND RESTRAINT ALTERNATIVES</p>	
<p>TEXTBOOK SECTION</p>	<p>NOTES</p>
<ul style="list-style-type: none"> • Preventing Burns* 	<p>Most people associate burns with flames. In fact, burns are caused more often by liquids than by flames. Hot water can cause a serious burn quickly. It can maim or even kill. Very young children, people who are handicapped, and older people are particularly vulnerable to tap water burns. Supervise children and older people in tub baths. Young children are able to turn on the hot water by themselves. Older or handicapped people are prone to falling. They should never be left alone in the tub, even momentarily. Remember that the water temperature feels cooler than it is if you are wearing gloves.</p> <ul style="list-style-type: none"> • Children cannot always tell the difference between the hot and cold-water faucets. They have delicate skin, and often cannot get out of hot water quickly, leading to possible hot-water burns. • Older people and people with handicaps are less agile and they may have less ability to sense when water is too hot. <p>Check water heater thermostat level. Most water heaters are set to heat water well above 140°, but a tap water temperature of 120° should be hot enough for washing clothes and dishes. Although many automatic dishwasher instructions suggest 140°, cleaning is usually satisfactory at much lower temperatures. Few people bathe at temperatures above 110°. If you believe the water is set too hot, contact your supervisor.</p> <p>HOT WATER CAUSES THIRD DEGREE BURNS:</p> <ul style="list-style-type: none"> • in one second at 156° • in two seconds at 149° • in five seconds at 140° • in fifteen seconds at 133°. <p>HOT WATER BURNS ARE PREVENTABLE</p> <p>Keep hot liquids out of the reach of children.</p> <ul style="list-style-type: none"> • Babies, the most frequent victims of hot liquid scalds, need only a split second to grab a coffee cup, or bump a sipping parent's arm. Spilled hot

	<p>coffee or tea, usually hotter than 160°, will cause severe injury.</p> <ul style="list-style-type: none"> • Toddlers can spill hot liquids by pulling at tablecloths, pot handles, and cooking appliance cords. They may be underfoot while someone is carrying pots around the kitchen. • Protect babies or toddlers by placing them in a high chair or playpen while you are cooking.
♦ Preventing Accidental Poisonings*	
Reporting Accidents and Incidents*	
Restraints*	<p>Your facility will train you on restraints if they are needed for your job. PSSs should learn and follow all facility policies on restraints. Misuse of restraints is violation of a Consumer’s Rights and must be reported by Mandatory Reporters.</p> <p style="text-align: center;">PSSs ARE MANDATORY REPORTERS</p>
♦ Use of Restraints*	
♦ Complications Associated with Restraint Use*	
♦ Restraint Alternatives*	
♦ Tell the Nurse!	
What Did You Learn?*	Questions 5, 6, 7, 8, 10 only
SUPPLEMENTAL INFORMATION	
Incident Reports	<p>Incident reports are documents that record any unusual happening. Report all Incidents to your supervisor and follow facility policies on filling out the incident reports. In general, the report will identify the specific nature of any incident or accident, note any persons who have witnessed the incident, record any follow-up or treatment that occurred, and identify persons notified, such as physicians, guardians, pharmacists, family members, or caseworkers. Some typical situations in which an incident report would be made out are:</p> <ul style="list-style-type: none"> • Consumer injury; • Consumer to Consumer altercation or fight; • Visitor injuries; • Missing possessions; • Consumer elopement (Consumer runs away); and • Staff to Consumer altercations.
	NOTE: Figure 13.5* in previously mentioned chapter can be used as an example report.