

Long-Term Care Worker Safety Training



Department of Social and Health Services
Aging and Long-Term Support Administration

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Language Access

This document is available in multiple languages at:

dshs.wa.gov/altsa/training/dshs-curriculum-and-materials-available.

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A Note to Employers about Safety Training

Long-term care workers who have not yet become certified Home Care Aides and who are not exempt per [WAC 388-71-0839](#) or [RCW 18.88B.041](#) must complete 2 hours of long-term care worker orientation and 3 hours of safety training before they can provide care to clients ([WAC 388-112A](#) and [WAC 388-71](#)). In residential facilities, individuals who are exempt per [RCW 18.88B.041](#) and volunteers must complete facility orientation training before having routine interaction with clients ([WAC 388-112A-0200](#)).

This document introduces all the topics for a long-term care worker safety training as required by [WAC 388-112A-0230](#) and [WAC 388-71-0855](#). Adult family homes, assisted living facilities, enhanced services facilities, and home care agencies are encouraged to use the information in this document to deliver the required 3-hour safety training to long-term care workers who have not yet become certified Home Care Aides.

This is a generic safety training. Employers must include their own policies and procedures to make training relevant to their specific organization.

This document includes space for the long-term care worker to take notes. Employers can use the entire document as it is or restructure the information into their own format.

As an employer, you may also be required to provide additional safety training to your employees by other state agencies.

What is long-term care worker safety training?

This safety training is an introduction to the basic and essential safety practices for long-term care workers. It encourages the long-term care worker to:

- Learn and follow their employer's policies, plans, and procedures.
- Always think about safety as they work to protect themselves and clients from illness and injury.
- Value safety as an integral part of client independence and wellness.
- Recognize safety hazards and take appropriate action to resolve them.

Why are orientation and safety training important?

The time you take for effective orientation and safety training is an investment in employee retention and safety for both employees and clients. It shows employees that they are important to you and your organization, and it sets the tone for your relationship. It is also an investment that pays for itself:

- A positive onboarding experience can increase retention by 82 percent.
- Many workers compensation claims happen within the first two weeks of employment. Back injuries, slips and falls are often due to lack of training. These injuries affect the employee, staffing and may even include injury to a client.
- It can cost you 16-20 percent of each caregiver's annual wage to replace them (recruiting, interviewing, training).

How should employers teach safety training?

This safety training document is not intended for the long-term care worker to read through alone. DSHS does not approve self-study safety training. It is impossible for a long-term care worker to understand your policies, plans, and procedures by reading this generic safety training document.

Ideally, new long-term care workers should be guided through safety training by an instructor. The instructor should relate each topic to their specific work setting. Show the long-term care worker where they can find the equipment and supplies needed to keep themselves, clients, and everyone else safe. Make sure they know how to report safety concerns and what to do if they or the client has an emergency. Safety training should be engaging. Encourage the learner to take notes and ask questions.

Who can teach this orientation?

Adult family homes, enhanced services facilities, and assisted living facilities are approved to teach Orientation and Safety Training (ORSA) upon initial licensing or when there is a change of ownership.

Home care agencies must become approved community instructor training programs in order to train their own staff. For more information, visit dshs.wa.gov/altsa/training/home-care-agencies.

Community Instructors who wish to teach ORSA must be approved by the Department of Social and Health Services.

For more information about approval of curricula and instructors, visit dshs.wa.gov/altsa/home-and-community-services/training-requirements-and-classes.

Where can employers get the 2-hour orientation?

Materials for the 2-hour long-term care worker orientation can be downloaded from dshs.wa.gov/altsa/training/dshs-curriculum-and-materials-available.

Do instructors issue certificates for orientation and safety training separately or together?

Orientation and safety training certificates are available as two separate certificates or together as one certificate. Contact the training unit for more information.

- Facility training programs: trainingapprovaltpa@dshs.wa.gov
- Community Instructor training programs: trainingapprovaltpc@dshs.wa.gov

Printing these Materials

This document is designed to be “printer-friendly.” Image backgrounds and colors are adjusted to save ink or toner. You can print in color or grayscale (black and white).

Thank You!

Most of us will need long-term care at some time in our lives. As an employer and trainer of long-term care workers, you are developing the skilled and compassionate workforce we rely on. Your businesses and organizations protect independence, health, and wellbeing and create safer, more rewarding jobs for caregivers.

Thank you for promoting choice, independence, and safety so we can all live with good health, independence, dignity and control over decisions that affect our lives.



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Introduction to Safety Training

As a caregiver, you help people live with independence and wellbeing. Promoting safety empowers the people you support to live their lives to the fullest.

Working safely can prevent injury and illness. A safe environment can prevent accidents and give clients freedom to move confidently. Preparing for emergencies helps keep everyone healthy when disaster strikes.

Without safety, you and the people you support are in danger of illness, injury, pain, and suffering. Be a champion of safety for yourself, the people you support, and everyone else in your workplace.

Be a champion of safety!

Safety Guidelines at a Glance

Work safely	<ul style="list-style-type: none"> • Do not try to lift people manually. Use assistive devices. • Lift objects with your legs, not with your back. • Stretch and exercise to strengthen your back. • Wear closed toe, slip resistant, sturdy shoes.
Minimize falls	<ul style="list-style-type: none"> • Learn the risks of falls. • Remove tripping hazards and improve visibility. • If a client is falling, protect their head and ease them to the floor. • Follow your employer's policy about helping a client after they fall.
Stop the spread of infection	<ul style="list-style-type: none"> • Perform hand hygiene for at least 20 seconds before and after contact with a client. • Wear a new pair of disposable gloves whenever you risk touching blood or other body fluids. • Clean and disinfect the environment and dispose of contaminated waste correctly. • Stay home when you are sick or have a contagious illness.
Communicate	<ul style="list-style-type: none"> • Communicate with clients and listen to their concerns. • Work with the client and their care team to solve problems. • Alert others to safety concerns and follow up to resolve them. • Follow your employer's policy about documentation and reporting.
Maintain a safe environment	<ul style="list-style-type: none"> • Resolve safety hazards before they cause an accident. • Check if the home has working smoke detectors and fire extinguishers. • Use and store oxygen away from sources of sparks or flames. • Keep the home free of pest infestations and animal waste.
Prepare for emergencies	<ul style="list-style-type: none"> • Learn the signs of medical emergencies and how you should respond. • Follow the emergency and evacuation plans for your workplace. • Stay informed for weather alerts in your area. • Be calm and follow the plan when there is an emergency.

Emotional, Mental, and Spiritual Safety

Most of the topics in this long-term care worker safety training focus on physical safety, such as preventing injury and infection. A person's wellbeing also depends on their emotional, mental (psychological), and spiritual safety.

Samuel's Story: *At 45, Samuel had a stroke. He could not speak or get out of bed. He was dependent on the hospital staff to care for him. Samuel felt very afraid. Earlier in his life, he had experiences with medical staff that made him feel unwelcome and disrespected. He avoided going to the doctor for years. However, Samuel was surprised and grateful that the staff at this hospital respected him! The administrators were kind to his boyfriend and allowed him to stay overnight even though he was not legally a family member. They welcomed Samuel's spiritual guide and gave them privacy to pray in their own way. The staff also took time to communicate with Samuel, even though he could not speak, and made sure he directed his own care. Because the hospital staff protected Samuel's emotional, mental, and spiritual safety, as well as his physical safety, he was able to heal.*

Imagine yourself at the hospital with a serious medical condition. How could the hospital staff help you feel welcome and safe?



Creating a Welcoming Environment

Creating a welcoming environment is a team effort. Everyone in the care setting, including caregivers, administrators, staff, and residents can make people feel welcome (or unwelcome) by what they say and what they do. Each of us can help each other by honoring differences and using respectful language.

- **Use the name and pronouns each person gives you.** Do not assume a person's gender identity based on their appearance.
- **Support all partners and relationships.** Do not assume everyone is heterosexual. About 1 in 20 people in Washington identify as lesbian, gay, bisexual, asexual, or another sexual orientation other than heterosexual.
- **Show respect for religious and spiritual expression and practices.** Do not ask people to hide their beliefs to make other people comfortable.
- **Use person-first language,** such as "a person with a disability" instead of "a disabled person." Avoid using negative language that insults or shames people. Many common expressions in English, such as "crazy," "drug addict," "homeless," and "illegal immigrant" are harmful to people.
- **Report abuse.** Bullying (insults, threats, harassment) humiliates and isolates people. If you witness a vulnerable adult experiencing any kind of abuse or neglect, you must report it by law. Refer to your long-term care worker orientation training for complete information about mandated reporting.

We all make mistakes with our language and behavior sometimes. When we do, we can apologize, correct ourselves, and do better next time. Showing people that you care will help them feel welcome.

People feel safe where they feel welcome.



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Job Safety

Isaiah's Story: *Isaiah was a long-term care worker for a home care agency. One of the clients he supported needed help standing up and sitting down. Another client needed help carrying laundry and groceries. All the bending and lifting was hard work, but Isaiah was strong. He also believed that he would get in trouble if he asked his employer for help. One day, while he was bending over to reposition a client in bed, he felt something *pop* in his lower back, and he could not straighten up again. He could not return to work for several weeks until his back healed. What could Isaiah have done differently to avoid this injury?*

Caregiving is a physical profession. Improper lifting techniques and repetitive movements can injure your back, shoulders, and joints. Unfortunately, these injuries are common for long-term care workers, ranging from mild to severe. You can keep yourself healthy and safe by understanding the risks and working carefully.

Definitions

Ambulation - Walking or moving about.

Assistive Devices - Aids to help people to continue to perform a task as independently as possible.

Transfer – Helping another person move from one place to another such as a chair, bed, wheelchair, vehicle, commode, shower chair, or toilet.

Transfer Belt/Gait Belt - A belt worn around the waist to aid in transfers and ambulation.



Risks of Injury

Many of your job duties have some physical risk. Lifting too much weight, doing repetitive motions, and working in awkward positions can hurt your body. Recognizing these risks in your daily tasks and using safer techniques can help you avoid injury.

Routine Activities

- Pushing a wheelchair across an elevation change, up a ramp, or across grass or thick carpeting
- Assisting a person who cannot support their own weight
- Assisting a person in and out of a chair or motor vehicle
- Pushing heavy items or equipment
- Lifting and carrying supplies or equipment

Repetitive Activities

- Repetitive motion such as repeatedly cranking manual adjustments for a bed
- Assisting clients to move several times during a shift
- Frequently bending over

Working in Awkward Positions

- Reaching across a bed to reposition a client
- Assisting an uncooperative and/or confused person
- Bending over to make a bed
- Picking up garbage and waste
- Removing laundry from a washing machine or dryer

Dangerous Techniques to Avoid

- Manually lifting a person
- Trying to stop a person from falling by catching them
- Picking up a person from the floor or bed



Doing any activity too long (duration) or too often (frequency) can cause injury.

Musculoskeletal Disorders (MSDs)

Musculoskeletal Disorders (MSDs) include conditions such as low back pain, rotator cuff injuries, tennis elbow or Carpal Tunnel Syndrome. While some MSDs develop gradually over time, others can happen from a single event.

Early indications of MSDs can include persistent pain, restriction of joint movement and soft tissue swelling. If you have these symptoms, you should evaluate how you are doing your work, tell your employer, and talk to your doctor.

Safely Assisting Clients

Many of your daily tasks will involve helping clients move. For example, they may need assistance to stand, reposition in bed, dress, bathe, or use the toilet. These tasks can strain your body and put you in awkward physical positions such as bending or twisting. Knowing your limits and getting the help you need can protect you from injury.

Know Your Limits

There is no safe weight limit for manually lifting a person. You should always use assistive devices to avoid manual lifting whenever possible.

Under perfect conditions, using more than 35 pounds (15.8 kilograms) of effort can cause overuse injuries for most people. To experience what 35 pounds of effort feels like, try lifting 4 gallons (or 15 liters) of water. Everyone is different, and your limit may be less than 35 pounds.



Assisting a person to move is physically complicated, and the conditions are almost never perfect. Bending, twisting, reaching, using only one hand, or maneuvering in a confined space such as a bathroom makes the effort harder on your body. The client's physical/medical condition or sudden movements can also make the transfer more strenuous.

**There is no safe weight limit for manually lifting a person.
Use assistive devices to avoid manual lifting whenever possible.**

Get Help

Contact your supervisor, employer, or another caregiver if a client needs more support than you can safely provide. There might be assistive devices, training, or other resources available to make the situation safer for both you and the client. Other members of the client's care team may also update the client's service plan to provide more support and give you more help.



Use Assistive Devices

There are tools and equipment that may be available to help assist a client with mobility. Transfer belts, low-friction slide sheets, grab bars, walk-in showers, sit-to-stand devices, and total body lifts are some examples.

Make sure you receive training on any assistive device before you use it. Trying to use equipment without training is dangerous and can cause injury or death.

Know your Employer's Policies

Your employer may have policies, procedures, training, and resources about safely assisting clients to move in your work setting. Speak to your employer and make sure you understand their policies and know what resources are available to you.

**What are your employer's policies about safely assisting clients to move?
What resources are available to you?**

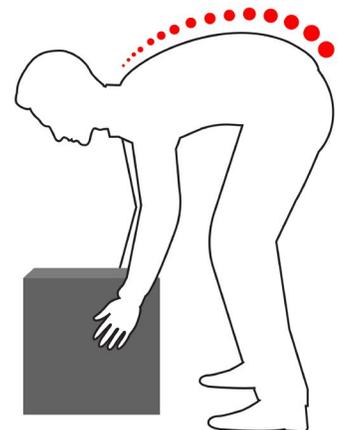
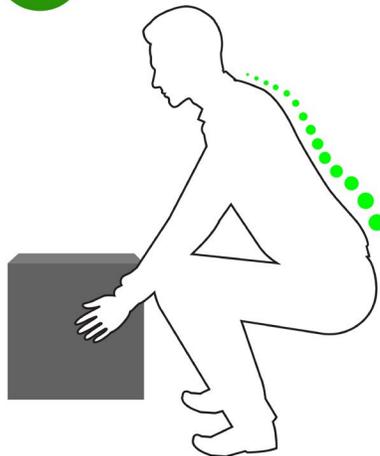
Lifting and Handling Materials

Part of your job may include lifting materials such as groceries, garbage, or equipment that a client needs such as an oxygen tank. Lifting and moving heavy objects is a common cause of injury for long-term care workers. Using proper body mechanics and getting support when you need it can help keep you safe.

Body Mechanics

The different ways you move and use your body in everyday activities are called body mechanics. Using proper body mechanics when you lift or move objects helps you avoid injury.

- ✓ **Keep your back straight.**
- ✓ **Bend at the knees.**
- ✓ **Lift with your legs.**



Plan Your Lift

1. Assess your load and do not lift or move objects that are too heavy for you.
2. Use a hand truck or other lifting device if available.
3. Get help from another person if you need it.
4. Make sure the path is clear and there is room to put the object down at your destination.

Provide a Good Base of Support

1. Make sure your body is steady in a strong position.
2. Spread your feet about shoulder width apart and put one foot slightly in front of the other.

Proper Lifting Technique

1. Look for easy ways to grasp the items.
2. Hold the weight as close to your body as you can.
3. Hold heavy items between your shoulders and knees.
4. Keep your back as straight as possible.
5. Keep your back and neck in a straight line.
6. Bend at the knees.
7. Tighten your stomach muscles.
8. Lift with your legs.
9. Keep your back, feet, and trunk aligned and do not twist at the waist.
10. If you need to change direction, shift your feet and take small steps.



Lifting Tips

- 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 fall if you pull or tug on them.
- The more often you lift or move something, the more likely you will get hurt. If you need to move something often, use a cart.
- Get help with large loads.

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.

Back Conditioning

Keeping your back in good condition can help you prevent serious injury. Good back conditioning includes posture, exercise, stretching, and strengthening activities.

Keeping your back in good condition can prevent injury.

Posture

Practicing good posture helps to strengthen muscles, protect joints, and improve balance. Good posture includes standing or sitting straight and tall with your head level and your shoulders even. Hold your stomach in, and keep your knees pointed forward.

Your sleeping position can also prevent and relieve back pain. Sleep on a firm mattress, not one that sags or is too hard. Avoid sleeping on your stomach. Try putting a pillow between your knees if you sleep on your side, or under your knees if you sleep on your back.

Exercise

Good conditioning also includes aerobic exercise. Walking, swimming, and bicycling are excellent ways to condition the entire body and protect your back. Just 30 minutes of brisk walking 5 days a week gives many benefits. If you are just beginning an exercise routine, start with 5-10 minutes of walking, 2 times a day, and slowly build up.



Talk with your health care practitioner before starting any new exercise routine, especially if you are already experiencing back pain.

Stretching

Stretching improves flexibility, strength, and mobility, which helps to prevent injury while you are working.

Stretching 4-7 days a week is a good goal. If you are just beginning a stretching routine, start slowly and increase gradually. Many of the stretches listed here have easier seated variations you can find online.

You should warm up for about 10 minutes before stretching. You can warm up with a light walk. This will send blood flow to your muscles and make them ready to stretch.

You should feel tension but not pain while stretching. If something hurts, you may have an injury. Stop stretching that muscle and speak to your health care practitioner.

Stretching Exercises for Your Back

Hold each of these stretches for a total of 60 seconds. You can do two repetitions for 30 seconds each, or four repetitions of 15 seconds each, whatever is most comfortable for you.

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 a total of 60 seconds.



Double Knee-To-Chest Stretch

- Lie down on back.
- Pull both knees in toward chest until you feel a comfortable stretch in lower back.
- Keep the back relaxed.
- Hold for a total of 60 seconds.



Lower Trunk Rotation Stretch

- Lie on back.
- Keeping back flat and feet together, rotate knees to one side.
- Hold for a total of 60 seconds.



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

Strengthening Exercises

Strengthening your lower back and stomach muscles helps stabilize and protect your spine.

Doing strengthening exercises 2-3 times a week is a good goal. When you begin a new strengthening routine, start gently and increase the difficulty as you get stronger.

You should warm up and stretch before doing strengthening exercises. If you feel pain, stop the exercise. If the pain continues, contact your doctor.

Strengthening Exercise Routine for Your Back

Repeat each exercise 1 to 5 times (except for the curl-up exercise), once or twice a day. As you get stronger, gradually increase your workout to 10 repetitions twice a day. Use slow, smooth actions as you exercise.

Pelvic Tilt Exercise

- Lie on back with knees bent, feet flat on floor and arms at sides.
- Flatten small of back against floor (hips will tilt upward).
- 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.



Dressing for Safety

Caregivers spend a lot of time on their feet. Good work shoes are necessary for comfort and protection. Proper footwear provides support to your feet and ankles and helps prevent sprain and strain injuries. Good work shoes can also help protect you from slipping and falling.

Tennis shoes are a good choice of work shoes for many long-term care workers. In general, try to choose shoes which offer both comfort and protection:

- Closed toes
- Sturdy and supportive
- Low and wide heels to reduce stress on the feet and the chance of ankle injury
- Non-slip soles with good traction and sufficient cushion



Clothing

Wear clean, comfortable clothing that you can move in. Clothes that are too tight can restrict movement, and baggy clothes may get caught and cause accidents. You may work in a person's home or in a "home like" setting. Dress in clothing that is appropriate to the environment you are working in, or wear a uniform as outlined by your employer.

Jewelry

Follow your employer's policy on jewelry. Make sure any jewelry will not get in your way when you are working. Avoid jewelry that might tear a client's skin such as sharp rings. Avoid dangling earrings and long necklaces because these can get caught or pulled and cause injury.

What is your employer's dress code?

Driver Safety

You may drive to and from your workplace, or part of your job might be to drive with a client (check with your employer if you can transport a client in your personal car). 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 substances.
- 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.
- Follow at a safe distance. 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. Using a phone, putting on makeup, talking, or eating 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! Vehicle accidents are the #1 cause of workplace fatalities.

Ladder Safety

Long-term care workers are not allowed to get on ladders in some care settings. Make sure you know the policy where you work. If your job duties include using a ladder, follow these safety guidelines.

- 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 will not 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 debris that might be on the ladder rungs.
- Use ladders only on stable and level surfaces.
- To carry a ladder, place your arm through the ladder and balance it on your shoulder. Carry ladders horizontally with the top of the ladder facing forward.



- Wear flat, rigid, slip-resistant shoes. Soft-soled shoes can bend over the ladder's rungs and not provide enough stability.
- 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.
- Open the ladder completely, making sure all locks are engaged.
- Most stepladders are not designed to be used collapsed and leaned up against a wall, or without the spreader bars fully open and locked. Always follow manufacturer's instructions for use.
- Metal conducts electricity! Keep a metal ladder 10 feet away from power lines and energized electrical wires.
- Return the ladder to its proper storage place when you are done using it and make sure it is secured so that it does not fall and cause injury accidentally.



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



2

Minimizing and Responding to Falls

Patricia's Story: *Patricia lives in her own house. She gets support from caregivers through a home care agency mornings and evenings. Patricia has lost strength in her legs and often uses a walker to move around her house. She also wears glasses. One night, she woke up with an urgent need to urinate. She did not have time to put on her glasses, so she just grabbed her walker and quickly went towards the hallway to the bathroom. It was dark,*

and she did not see that the rug in the hallway was curled up at one edge. Her walker caught the edge of the rug, and she fell.



Patricia was not able to get up and had to lie on the floor until her caregiver arrived in the morning. If you are that caregiver, what should you do when you find Patricia? Later, what could you do to help prevent another fall?

Falls are not a natural part of aging, but they are the leading cause of fatal and nonfatal injuries among older adults. Falls can cause serious injuries including broken bones and joints, internal

bleeding, and traumatic brain injuries. Experiencing a fall can cause fear of falling again, which may limit mobility and increase social isolation. Part of your role in client safety is to help minimize falls and respond appropriately when falls happen.

Minimizing Falls

You can help to prevent many falls by understanding the causes of falls, supporting clients to reduce their risk of falls, and making their environments safer. Make fall prevention a priority in your job every day:

- Prioritize safety and prevention during care. Falls can be a serious concern, especially for older adults.
- Pay attention to clients as they move around and be ready to support them.

- Understand what causes falls and when they are most likely to happen.
- Get to know the clients you support and learn their unique needs.
- Identify fall hazards in the client's environment and take action to make them safer.
- Communicate with the client, your supervisor or employer, and the rest of the client's care team to fix problems before they cause a fall.

Pay attention to clients, evaluate their situation, and take action to keep them safe.

Understand the Causes of Falls

Falls happen because of a combination of “risk factors.” Risk factors include health-related conditions and environmental hazards. Some situations and activities are especially high-risk.

Health-Related Risk Factors

Anyone can fall if they slip on a wet bathroom floor or trip over a rug in the dark. However, people who receive long-term care services are more likely to experience a fall because of additional risk factors. Learn about the clients you support and know what risk factors they have.

A History of Falls: Research shows that people who have fallen before are much more likely to fall again.

Muscle Weakness - Especially in the Lower Body: Reduced strength, balance, endurance, and flexibility make it harder for a person to sit, stand, or catch themselves after a stumble.

Medication: The side-effects of medication can cause dizziness, fainting, confusion, increased sleepiness, or slower reflexes.

Sensory Loss: The loss of vision, hearing, and/or feeling can affect balance, reduce awareness, and cause missteps.

Cognitive Conditions: Dementia, delirium, and other cognitive conditions as well as alcohol and substance use can reduce awareness and impair judgment.

Other Health Conditions: Low blood pressure, seizures, Parkinson’s disease, heart disease, lung disease, joint disease, and temporary conditions such as recovery from surgery, infection, malnutrition, and dehydration can all increase a person’s risk of falling.

Environmental Risk Factors

Look for hazards in the client’s environment as part of your work, then take action to make the environment safer.

Clothing: Long or loose clothes can tangle and trip.

Footwear: Improper footwear can cause slips and stumbles. Avoid backless slippers, slip-on shoes or flip flops, shoes with poor grip or worn soles that can easily slip on wet surfaces, shoes that are not tied or fastened securely, and shoes with heels that are too high.

Indoor Environment: Most falls happen inside the home. Electrical cords, loose rugs, cluttered pathways, dim lighting, wet floors, pets, and steps are just some of the hazards that can cause falls indoors.

Outdoor Environment: Uneven surfaces such as damaged pavement, earth, and overgrown grass can make footing uncertain. Bright sunlight and dark shadows can decrease visibility. Clutter, objects, or garbage on the ground can be tripping hazards. Damaged or missing handrails near stairs are also a common risk factor.



Higher-Risk Situations and Activities

Always pay attention to clients whenever you provide care and support. Be especially alert and ready to help during higher-risk activities. Think about environmental changes that can make these situations safer.

Assisting with Mobility: When a client needs help to move, they have a greater risk of falling. Falls are also more likely during these care tasks.

High-Risk Areas Such as the Bathroom: Smooth wet floors and hard surfaces make falling more likely and more dangerous. Getting on and off the toilet or in and out of the bath or shower are frequent higher-risk activities.

Rushing to the Bathroom: The combination of health conditions and environmental hazards make rushing to the bathroom a leading cause of falls in the home.

The most common places for falling at home are bedrooms, bathrooms, and stairs. About half of all falls involve a rug or carpet.

Take Action to Prevent Falls

Think about how to help prevent falls in each situation as you provide care. Look for the risk factors. When you see a hazard, take action to resolve the problem. Communicate with the client, your supervisor or employer, and the client's care team when you need permission or support.



Document and report any safety concerns you have and any actions you take to the appropriate person in your work setting.

Respect Client Rights

Remember that a client's environment is their home. They have the right to keep their home as they want. Do not rearrange a client's belongings, furniture, or environment without their permission. This can be disturbing for clients, especially those with memory loss. Never throw away something in a client's home without their permission. Communicate with the client about your concerns and work together to find a solution.

Also remember you should always support a client's freedom and mobility. Restricting a person's movement does not protect them from falling. In fact, limiting a person's mobility increases their risk of falling.

Learn About the People You Support

- Know their fall history and if they have a fear of falling or feel unsteady on their feet.
- Be familiar with their medications and side-effects.
- Understand their health conditions and report any changes you see.
- Help them get to the bathroom before it becomes urgent.



Support Client Mobility

- Encourage activities that build strength, stability, balance, endurance, and flexibility.
- Remind and encourage clients to use their assistive devices such as walkers, canes, grab bars, and handrails.
- Support and protect them during transfers, repositioning, and movement.
- Encourage them to stand up slowly and stay with them while they walk.
- Always use wheelchair locks and remove/reposition footplates before they sit or stand.
- Walk slightly behind and to the side of a person using a walker. Never walk in front of them.

Maximize Vision and Hearing

- Remind and encourage clients to wear their glasses and/or hearing aids (hearing affects balance).
- Clients should get yearly vision and hearing checks.
- If glasses prescriptions are outdated or the client can no longer see clearly through their glasses, work with them (and your supervisor) to schedule a visit with an optometrist or ophthalmologist.
- Help keep their glasses clean and make sure hearing aids have batteries and are working correctly.
- Make sure there is enough lighting, including nightlights, especially in bedrooms, halls, and bathrooms.
- Use high-visibility tape to make steps and edges easier to see.



Encourage Safer Footwear and Clothes

- Encourage clients to wear supportive, low-heeled footwear with non-slip soles.
- Make sure the client’s footwear is secured (laces, Velcro, or straps), and on the correct feet.
- Encourage the client to avoid flip-flops or slippers without heel support.
- Encourage clients to avoid long or loose-fitting robes or gowns.

Reduce Hazards Indoors

- Keep floors dry. Clean up spills immediately.
- Keep pathways clear, especially to the bathrooms.
- Remove clutter from the floor.
- Move electrical cords away from walking areas or tape them down.
- Remove or secure throw rugs.
- Keep things used most often on lower shelves.
- If chairs and beds are too low or high, work with the client and your supervisor to adjust them.
- Make sure handrails and grab bars are installed properly in needed areas.

Reduce Hazards Outdoors

- Look for sidewalk and entryway hazards such as cracks, holes, slippery or uneven surfaces.
- Watch for rotting wood or wobbly handrails or stairs.
- Remove clutter and garbage where clients walk outside.
- If you see something wrong, work with the client, their care team, your employer, and building maintenance to fix the problem.
- 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.



Do Not Sacrifice a Client’s Mobility and Freedom for the Illusion of Safety

- Remember that the people you support rely on you to help maintain their mobility and freedom.
- Do not restrict a client to a wheelchair because this will reduce their physical activity.
- Do not use restraints. Restraints increase injury.

Who should you contact to report a fall hazard in your work setting?

Responding to Falls

As a caregiver, you may see a client fall or need to help a client who has fallen. Your responses in these situations are critical for the client's health and wellbeing.

When a Client Falls

If a client begins to fall while you are with them:

1. Try to support their head and gradually ease them to the floor.
2. Keep your feet apart and your back straight. Flex at the knees and hips.
3. Pull the person close to you and let them slide down your body to the floor.
4. Often you will move to the floor with the person.

Do not try to catch or stop client who is falling. You could injure yourself and the client.



If a person is falling, support their head and gently ease them to the floor.

After a Client Falls

Your employer will have policies about how to help a client who has fallen. Make sure you know and follow your employer's policies. The guidelines in this training are general best practices.

Stay Calm and Evaluate the Situation

Do not panic. Take a deep breath and approach the situation calmly.

Look at the person for signs of an emergency:

- If they are unconscious, call 911 and check their airway.
- If they have severe bleeding, call 911 and apply pressure.
- If they have difficulty communicating (for example, if they are unable to speak, understand, or follow directions), call 911.



Never move a client if they cannot get up or if they complain of severe pain.

Communicate with the Person

Talk to the person. Tell them who you are and reassure them that you will help them. Ask “How do you feel?” and “Did you hit your head?” and observe them carefully for signs of injury.

Most people are embarrassed after a fall, and they may want to get up or tell you everything is fine even if it is not. Observe the client carefully. The client’s body language may show you how they feel.

If the Person CAN Get Up

If the person feels unhurt and can get up by themselves, observe them carefully as they get up. If they need some help or support to get up, you must consider your employer’s policies and procedures. In some work settings you will help the person get back to their pre-fall position, but in other settings there may be different rules. Follow your employer’s policies and procedures about what you can and cannot do after a person falls.

Here is one procedure to help a person get themselves off the floor. Your employer may have different procedures you need to follow. If the person feels pain or cannot complete these steps, encourage them to stop and wait for help to arrive.

1. Get assistance from a coworker if possible.
2. You will also need two chairs.
3. Assist the person to roll onto their side and then into a kneeling position.
4. Place a chair in front of the person and encourage them to put their hands on the seat.
5. Assist the person to put their strongest foot on the floor and encourage them to use their arms and leg to push up into a standing position.
6. Place another chair behind the person and assist them to sit into that chair.

**You can help steady the client while they get up,
but do not try to lift them up.**

If the Person CANNOT Get Up

If the person is in pain or does not have the strength to get up, do not try to lift or move them. You might cause more injury.

- Make the person as comfortable as possible. Cover them with a blanket.
- Do not offer anything to eat or drink.
- Get help. Follow your employer’s policy for who to call.
- Stay with the person until help arrives.

**Always follow your employer’s policies and procedures about falls.
Know when to call 911 and how to document and report a fall.**



3

Stopping the Spread of Infection

Fatima's Story: *Fatima is a long-term care worker in an assisted living facility. She cares for many different residents every day. She knows that infections can spread from person-to-person. She also knows that common infections can be very dangerous or even deadly for the residents she supports. Fatima protects herself and everyone she works with by performing hand hygiene the right way, using disposable gloves correctly, and wearing a mask and other personal protective equipment according to her employer's policies. One morning, Fatima wakes up with a cough and a fever. She knows that she must not expose the residents to her germs. She calls her employer right away and tells them she cannot come to work. Fatima has done the right thing and protected the people she supports.*

Infections can be very dangerous for people who receive long-term care, and germs can spread quickly in residential care settings. Caregivers are also personally at risk of infection because of close physical contact with clients and exposure to body fluids.

Long-term care workers can save lives by using standard precautions at work with every client. Standard precautions are the basic level of infection control precautions used with all client care. Make standard precautions part of your routine.

- Perform hand hygiene the right way before and after contact with a client.
- Use disposable gloves correctly.
- Wear masks and respirators following your employer's policies and training.
- Cover your coughs and sneezes.
- Protect yourself from exposure to blood and other body fluids.
- Clean and disinfect equipment and the environment to kill germs before they can cause harm.
- Stay home when you are sick.
- Report when a client is sick.

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

Definitions

Bloodborne infectious disease - disease that spreads through contact with blood or body fluids that may contain blood such as urine, mucus, saliva, 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 – the minimum infection prevention practices to use with every client, even when they are well.

Contaminated – visibly dirty or having touched blood or bodily fluids.

Immune system – the body system that fights germs to prevent and cure infection.

How Infections Spread

There are a few general ways that germs spread in healthcare settings. Review the prevention strategies for each type of transmission. Germs can spread in more than one way, so you may need to use multiple prevention strategies.

Contact	Germs move from one person or surface to another by touch.	<ul style="list-style-type: none"> • Perform hand hygiene. • Wear disposable gloves. • Clean and disinfect equipment and the environment.
Sprays and Splashes (Droplet)	When an infected person coughs or sneezes, droplets carry germs a short distance (6 feet) which can land on another person's eyes, nose, or mouth.	<ul style="list-style-type: none"> • Cover your coughs and sneezes. • Wear a face mask. • Avoid touching your face.
Inhalation (Airborne)	Some kinds of germs (like Covid-19) can stay in the air for a long time and travel long distances.	<ul style="list-style-type: none"> • Wear NIOSH approved respirator, like an N95. • Quarantine or isolation for the infected person.
Sharps Injuries	Bloodborne infectious diseases enter a person through a skin puncture by a used needle or sharp instrument.	<ul style="list-style-type: none"> • Handle and dispose of needles and other sharps safely. • Clean and disinfect equipment that come in contact with blood, like glucometers.

Regardless of the type of transmission, the standard precautions described in this chapter can help prevent the spread of infection. Isolation or quarantine protocols and staying home when you might be infectious also help protect clients and your coworkers from any type of transmission.



Perform Hand Hygiene

Performing hand hygiene means washing your hands with soap or sanitizing them with an alcohol-based hand rub. Hand hygiene is the best way to stop the spread of infection. Your hands pick up germs from every person and surface you touch. If you do not perform routine hand hygiene, you may spread germs.

When to Perform Hand Hygiene

Germs are too small to see. Even if your hands look and smell clean, they can spread infection. You must make cleaning your hands a consistent part of your daily activity. Perform hand hygiene at the following times:



Use alcohol-based hand rub:

- When arriving at work
- When entering a client's room/apartment
- Before providing hands-on resident care
- Before putting on gloves
- After removing gloves
- Before leaving a resident's room/apartment
- After providing hands-on resident care
- After touching potentially contaminated items
- Before leaving work at the end of your shift.



Wash your hands with soap and water:

- Before preparing food
- Before and after eating

After using the restroom

- After blowing your nose, sneezing, coughing, or touching your face
- After smoking
- After petting/touching animals
- After caring for a client with diarrhea
- Whenever your hands are visibly soiled.

Washing your Hands the Right Way

Most people do not wash their hands completely. They wash for too short a time and do not thoroughly scrub their hands. For handwashing to be effective, you need to wash your hands the correct way.

1. Turn on the warm water.
2. Wet your hands and wrists thoroughly.
3. Put soap on your hands.
4. Lather all surfaces of your hands and wrists.
5. Apply friction to all surfaces of your fingers and hands, including above the wrists, for at least 20 seconds while keeping your fingers pointed down.
6. Thoroughly rinse all surfaces of your hands and wrists, keeping your fingers pointed down. Don't contaminate your hands again by touching the sink or faucet.
7. Use clean paper towels to dry your hands and wrists thoroughly. Only dry the parts you washed.
8. Use another paper towel to turn off the faucet without contaminating your hands.
9. Throw the paper towels in the garbage without contaminating your hands.



Using Alcohol-Based Hand Rub

Using alcohol-based hand rub (ABHR) kills most germs on your hands. Alcohol-based hand rub can also be easier on your skin than soap and water. However, if your hands are visibly dirty, soap and water are still the best choice.

Alcohol-based hand rub is not effective against germs that cause diarrhea such as Norovirus and Clostridium difficile. You should always wash your hands instead of using alcohol-based hand rub after using the bathroom and after assisting a client to use the bathroom. You should never use alcohol-based hand rub when preparing or serving food; handwashing is best.

Ask your employer or supervisor if alcohol-based hand rub is available and approved in your care setting. Be sure to follow your employer's policy on the use of alcohol-based hand rub.

To use ABHR effectively:

1. Use a product with 60-95% ethanol or isopropyl alcohol.
2. Apply a palm full of the product in a cupped hand, enough to cover all surfaces.
3. Rub hands together, covering all surfaces including palms, backs of each hand, and between fingers.
4. Rub until dry - this should take around 20 seconds.

Practicing hand hygiene is the best way to prevent illness.

Use Disposable Gloves

Gloves protect both you and the clients you support. Gloves protect your hands when you have 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 let germs enter your body. Proper use of disposable gloves also helps you avoid spreading germs.

When to Wear Gloves

You must wear gloves when you:

- Will likely have direct 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.
- Provide first-aid.
- Have contact with a client who has an open wound.
- Clean up body fluids.
- Assist a client with toileting or other personal care tasks.
- Have a cut, scrape, chapped hands, or dermatitis.



Never reuse gloves. Put on new gloves each time you provide care. Change your gloves if they become soiled during personal care.

Putting on Gloves (Called “Donning”)

- Perform hand hygiene before you touch the gloves.
- Check each glove for holes or tears before using them. Don't use damaged gloves.
- Pull the cuffs of the gloves to put them on.
- Make sure the gloves fit snugly over each finger.

Wear a Mask or Respirator

Wearing a face mask or respirator helps protect you and the people around you from respiratory diseases such as Covid-19 and influenza. Follow your employer’s rules and training about when to wear a face mask or respirator and what kind to use. For an N95 respirator, you will need to be fit-tested when you are hired and re-fitted every year.



Tips for Wearing a Mask

- Perform hand hygiene before you put on a mask.
- Wear the mask over your nose and mouth.
- Perform hand hygiene before and after touching your mask to adjust it.
- Replace your mask when it gets wet or dirty.
- Perform hand hygiene before taking off your mask.
- Remove your mask by touching only the straps or ties.
- Throw the mask away and immediately perform hand hygiene again.

What are your employer’s policies about wearing masks or respirators in your work setting?

Cover Your Coughs and Sneezes

When you cough or sneeze, thousands of tiny droplets of fluid fly out of your nose and mouth into the air. These droplets can spread your germs to other people. Protect the people around you by covering your coughs and sneezes.

- Cover your mouth and nose with a tissue when coughing or sneezing.
- Dispose of the tissue in the nearest waste container.
- If you do not have a tissue, cough or sneeze into your upper sleeve or elbow instead of your hands.
- Perform hand hygiene.



**If you are coughing or sneezing frequently,
consider wearing a face mask to protect others.**

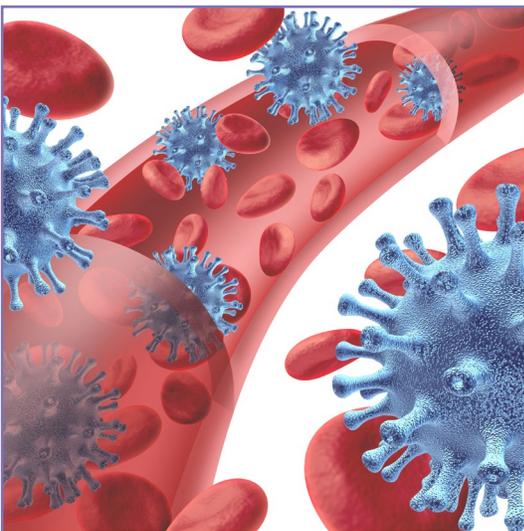
Protect Yourself from Exposure to Blood and Other Body Fluids

You may encounter a client's blood or other body fluids while providing support. This gives you a risk of exposure to bloodborne infectious diseases. Knowing how these diseases spread, wearing gloves, and taking a few other standard precautions can protect you from infection.

Understand Bloodborne Infectious Diseases

Diseases such as Hepatitis B (HBV), Hepatitis C (HCV), and Human Immunodeficiency Virus (HIV) spread through contact with blood. Other body fluids such as urine, feces, mucus, vomit, semen, and vaginal secretions can also contain blood. If you touch these fluids with your bare skin, germs can enter your body through sores, nicks, or cuts on your skin.

Using standard precautions correctly and consistently can prevent contact with these body fluids. Always use standard precautions in every situation that could involve possible contact with blood or other bodily fluids. Use standard precautions with every client.



Ways that Bloodborne Infectious Diseases CAN Spread

Standard precautions decrease your risk of exposure to bloodborne infectious diseases from:

- Handling needles or other sharps.
- Helping a client who is bleeding.
- Changing linens that are contaminated by blood or other body fluids.
- Helping to clean up blood, vomit, urine or feces.
- Changing a dressing or bandage with blood that has oozed from a wound.
- Contact with broken skin (chapped, weeping, or dermatitis).
- Contact with mucous membranes (mouth, nose, and eyes).

Ways that Bloodborne Infectious Diseases Can NOT Spread

Bloodborne diseases only spread through contact with blood or body fluids that contain blood. These common social activities do not expose you to bloodborne infectious diseases unless blood or other body fluids that can contain blood are present:

- Sharing clean eating utensils, plates, or glasses
- Sharing bathrooms
- Breathing the same air
- Hugging
- Shaking or holding hands

Standard precautions make your risk of getting a bloodborne infectious disease smaller.

Use Personal Protective Equipment (PPE)

Wear gloves to protect your hands when there is a possibility of 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 let viruses enter your body. Throw gloves away after use and perform hand hygiene.

In addition to gloves, other personal protective equipment offers you extra protection.

- Gowns protect your skin and clothing.
- Goggles protect your eyes.
- Face shields protect your face, mouth, eyes, and nose.

Follow your employer's guidance and training about wearing personal protective equipment.

Taking Off Personal Protective Equipment

When you take off your PPE, assume that the outside of all PPE is contaminated. Remove each piece of PPE without touching the outside surfaces. If your hands get contaminated while removing any piece of PPE, immediately perform hand hygiene before continuing. To remove PPE safely, follow these steps:

1. While still in the client's room, remove gloves as instructed above and discard.
2. Remove goggles or face shield by lifting the headband or earpieces.
3. Remove gown and discard.
4. Leave the client's room.
5. Remove and discard mask.
6. Perform hand hygiene.



Always follow your employer's rules about wearing PPE.

Cleaning and Disinfecting Blood or Body Fluids

Wear gloves and other personal protective equipment when you clean surfaces soiled with blood or other body fluids.

- Avoid tearing your gloves. If you tear your gloves, put on a new pair.
- 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.
- Put all contaminated towels and waste in a sealed color-coded or labeled leak-proof container. Double bag all contaminated materials that you are throwing away.
- Remove gloves and throw them away.
- Perform hand hygiene when tasks are completed.

Treat all blood or body fluids as potentially infectious.

Dispose of Contaminated Items Safely

If you throw away contaminated items unsafely, someone who handles the garbage could be injured or infected. Follow your employer's policies and procedures about disposing of contaminated items.

- Wear disposable gloves when picking up contaminated items.
- Put any contaminated waste in a heavy-duty garbage bag that doesn't leak and tie it.
- Put this bag inside another garbage bag, tie it, and label it "Biohazard" before throwing it away.

Safe disposal prevents injury and infection for everyone.

Sharps Safety

Syringes, razors, lancets, or other items with sharp edges can puncture your skin and expose you to bloodborne infectious diseases. You must know how to properly handle sharps to protect yourself and others.



Be Aware of Sharps

Think about where you might find needles or other sharps in your workplace. For example, if you support a client who takes insulin injections, check for needles before reaching into a pile of laundry or under pillows or cushions.

Handle Sharps Safely

Use all disposable and single-service supplies and equipment only one time as specified by the manufacturer.

If you find a discarded sharp, don't touch it with your hands. Use tongs or pliers to pick up the sharp and dispose of it in a sharps safety container.

No Sharps in Garbage Bags

Put all sharps in a special hard-plastic sharps container. The type and location of the container depends on where you work.

Never put sharps into a regular trash bag or directly into a garbage can because sharps can puncture someone's skin and pass on germs.



Learn and follow your employer's policies and procedures about sharps disposal.

Other Exposure Hazards

Household tasks can expose you to blood and other body fluids. Blood, even if you can't see it, can be almost anywhere you clean such as toilets, sinks, laundry, 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 soiled laundry bags by the top. Never place a hand underneath to support it.
- Remove gloves and perform hand hygiene before handling clean laundry.

What to Do If You are Exposed to Blood or Body Fluids

When you have direct contact with blood or other body fluids, there is a risk of exposure to bloodborne infectious disease. Follow these guidelines for each type of exposure.

Type of Exposure and What to Do	
Bare skin	Immediately wash with non-abrasive soap and water.
Mouth	Immediately flush with running water for five minutes in each eye at the sink or at an eyewash fountain.
Both eyes and mouth	Rinse your mouth with water. Get medical attention for further action.
A needle stick or puncture wound	Immediately rinse both as recommended above and get medical attention for further action.
Eyes	Wash thoroughly with soap and water. Get medical attention for further action.
A bite, scratch, or lesion that may have had blood or body fluid exposure	Wash the area thoroughly with soap and water. Get medical attention for further

Reporting exposure

If you have unprotected exposure to blood or other body fluids in your job, you must know and follow your employer's guidelines.

**Who should you report to if you have unprotected exposure to blood or other body fluids?
What are the specific procedures you need to follow?**

Hepatitis B Virus (HBV) vaccination

Vaccinations are effective at preventing many infections. There is a vaccine available for Hepatitis B virus. Depending on your job responsibilities, your employer must offer the HBV vaccination to you free of charge ([WAC 296-823-13005](#)).

The vaccination protects you against the HBV virus. There is a series of two, three, or four shots depending on vaccine or condition.

Does your employer offer HBV vaccination?

YOU can protect yourself from blood-borne diseases.

Clean and Disinfect the Environment

You can help stop the spread of infection by cleaning and disinfecting the client’s environment routinely and as needed while you are providing care. Your role in cleaning and disinfecting will depend on your work setting. If you support a client in their private home, work with them to create a cleaning schedule or routine. If you work in an adult family home, assisted living facility, or enhanced services facility, follow your employer’s rules and cleaning schedule.

Cleaning Makes Life Harder for Germs

Regular cleaning can help stop germs from growing.

- Keep surfaces clean and dry - germs need moisture to grow.
- Let in lots of fresh air and sunlight - germs like darkness.
- Clean spills immediately - germs need food to grow.

Always clean with soap and water before sanitizing or disinfecting.

Sanitizing and Disinfecting

Cleaning, sanitizing, and disinfecting are not the same.



Cleaning	Sanitizing	Disinfecting
<ul style="list-style-type: none"> • Removes most germs and dirt from objects and surfaces. • Use soap or detergents with water to scrub, wash, and rinse. • Clean high-touch surfaces such as light switches, doorknobs, and countertops. • Clean regularly and whenever surfaces are visibly dirty. 	<ul style="list-style-type: none"> • Reduces the number of germs on objects and surfaces to a safer level for food. • Use a sanitizing spray or weaker bleach solution (1 teaspoon of bleach with 1 gallon of cool water). • Sanitize food contact surfaces. • Sanitize surfaces that have touched or been contaminated by raw meat, poultry, or their juices, including inside a sink. 	<ul style="list-style-type: none"> • Kills most germs on surfaces and objects. • Use an EPA-registered disinfecting product or a stronger bleach solution (5 tablespoons or 1/3 cup bleach with one gallon of cool water). • Disinfect hand washing sinks, bathrooms, toilet bowls, toilet seats, soap dispensers, door and cabinet handles, etc. • Disinfect surfaces and objects when someone is sick or at higher risk of getting sick because of a weakened immune system.

Clean objects and surfaces before sanitizing or disinfecting.

Using Bleach

Bleach is not a cleaner. It is a sanitizer or disinfectant depending on the strength of the solution. Because bleach products vary in concentration, it is important to follow the directions on the bottle when mixing a solution for sanitizing or disinfecting. If your bottle does not have directions, you can make a bleach solution using the mixtures listed in the table on page 39.

For more information about disinfecting and sanitizing with bleach, visit: [cdc.gov/hygiene/about/cleaning-and-disinfecting-with-bleach.html](https://www.cdc.gov/hygiene/about/cleaning-and-disinfecting-with-bleach.html) and dshs.wa.gov/sites/default/files/publications/documents/22-1830.pdf



Household Cleaning Tips:

- Clean kitchen and bath surfaces with soap and water to wash away dirt and germs, then disinfect.
- Wear household gloves to protect your skin while cleaning. Check the label directions to see if you should also wear eye protection.
- Always follow the label directions on cleaning products.
- Use the right product for the right job. Some cleaning products work best on hard surfaces while other are specifically for porous or soft surfaces.
- Flush dirty water used for cleaning and body fluids down the toilet.

Washing Dishes

Rules for food handling and washing dishes depend on the care setting. Some settings must use sanitizer for dishes and utensils after washing. Check with your employer for their policies and procedures. The following is a basic procedure for washing dishes in a client's private home:

- Scrape solid food waste into the garbage can or garbage disposal.
- Use a dishwasher or wash by hand.
- To wash dirty dishes by hand, wash in soap and hot water. Rinse with hot running water, then air dry.
- Put dishes away when dry.

Check with the client for their preferences about washing dishes in their home.

Rules for washing and sanitizing dishes and utensils depend on the care setting.

Working with Household Chemicals

When you use household chemicals, always follow the instructions on the label. Do not mix chemicals or make a solution that is stronger than the recommendation.

Read Product Labels

Always look at a product's label before using it. The product label tells you how toxic or hazardous a product is. Look for the words **caution**, **warning**, and **danger**. Never remove a product label.

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.



Read and follow cleaning product labels. They also contain 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 makes a dangerous gas which can cause serious breathing problems and be fatal if inhaled in large 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.
- When working with all-purpose cleaners, always wear rubber gloves to protect your skin.
- Keep hazardous products in a cool, dry place, away from clients, children, 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.

Use household chemicals only in well-ventilated areas.

Disposing of Waste

Proper disposal of garbage and waste is part of infection control. Proper disposal depends on the type of waste and your employer’s policies and procedures.



Regular Garbage or Trash

Keep the environment clean by disposing of regular garbage and trash in the appropriate places where you work. To protect yourself, never place your foot or hand in a garbage can to compact the trash.

Contaminated Waste

Anything that might have contacted blood or body fluids is contaminated waste. Separate contaminated waste from regular garbage. Follow your employer’s policies about disposing of contaminated items. This may include double-bagging or using a special color garbage bag.

Sharps

Never put syringes, razors, lancets, or other items with sharp edges in a regular wastebasket or garbage can. Disposing of sharps requires a special rigid container. Rules for proper disposal of sharps containers vary by county and/or garbage disposal companies. Check with your supervisor, employer, or local health department for more information.



What is your employer’s procedure for disposing of contaminated waste and sharps?

Reporting Illness

Stay home if you are sick. Many clients have weakened immune systems. If you expose them to your germs, they can easily get sick and have serious complications.

Remember that clients depend on your support for their safety and wellbeing. If you cannot come to work, you must communicate with your supervisor or another designated person where you work as soon as possible. Give your employer enough time to find another person to support the client.

Leaving a client without support can cause great hardship and even be life-threatening.

**Who should you call if you are sick and cannot come to work?
What is their contact information?**

Reporting Client Illness

If a client has symptoms of illness, document and immediately report to the appropriate person in your care setting. This may be your supervisor or another member of the client’s care team.

Who should you report to if a client shows symptoms of illness?



4

Communication

Connie's Story: *Connie is a resident in an adult family home. She needs assistance with mobility and worries about emergencies. What if there was a fire or an earthquake? How would she get out of the home? Where would she go? These worries scare Connie and make her feel unsafe. Connie asks one of her caregivers what would happen in an emergency, but they just say, "don't worry, we will take care of you." This does not help Connie feel better. She wants to know the plan so she can feel confident and safe. She asks another caregiver, who is more helpful. They listen to Connie's concerns and understand her worries. They explain the home's evacuation plans and show her how they would help her get out of the home. Now Connie knows what the plan is, so she feels safer and happier.*

Safety is a team effort. The caregiver, client, care team members, property owners, building maintenance staff, and local services such as emergency medical staff, law enforcement, and fire departments all work together to create a safe environment.

Effective teamwork requires good communication. Develop good communication with the client, other members of their care team, and your supervisor or employer and work together to solve safety problems.

Communicate with the People You Support

The people you support are your partners in caregiving. You are a skilled professional caregiver, and they are the expert in their own body and home.

Listen

When you are helping a client with personal care, listen to how they want you to do things. They know what works for them and what makes them comfortable. When you respect the client's preferences, it is easier to work with them safely.

If a client asks you to do something that you think might be unsafe, talk about your concerns. Remember that we all have individual and cultural differences. Try to find a solution that promotes dignity and autonomy as well as safety. If the client agrees, talk together with other members of the client's care team to help find a solution.

Remember that your goal as a caregiver is to support the person in a way that works for them. The client is in charge of what happens to themselves.

Communicate Respectfully

Always treat the people you support with respect. Do not talk to them as if they were children. Use a normal tone of voice and speak at a volume they can hear. Communicate in a way that works best for them. Give them time to think and respond.

It is not always the best time or place to have a conversation. Make sure you have their attention, and that it is a good time for them to talk with you. Sit with them so that you are not looking down at them. Reduce distractions and give the conversation your full attention.

If you have a disagreement with the client, state your opinion calmly, and explain why you are concerned. Focus on your motivation to help keep everyone safe. Use "I" statements instead of "you" statements. For example, you can say, "I am worried about one of us tripping over these old magazines on the floor," rather than "You need to throw these old magazines away."

Recognize Behavior as Communication

Calm and respectful communication can be difficult or impossible when something is wrong. Behaviors that seem inappropriate, rude, aggressive, combative, or violent often communicate an underlying problem or unmet need.

Underlying Issues

- Mistreatment
- Neglect*
- Abuse*
- Physical, mental, or emotional trauma
- Pain
- Urinary tract or other infection
- Side effects of medication
- Disease
- Depression
- Fear
- Anxiety
- Acute or chronic stress
- Mental health crisis
- Hunger or thirst
- Discomfort
- Embarrassment
- Grief

When a person's behavior tells you something is wrong, communicate with them, try to understand the problem, and find out how you can support them.

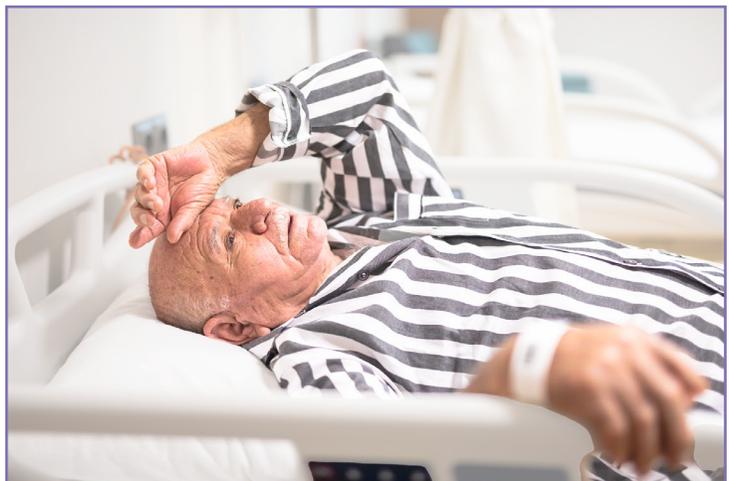
As a caregiver, you have the power to support the person in meeting their needs. The client's care plan and other members of their care team can help you understand what the client is communicating. However, remember that mistreatment or misunderstanding by other people might also be the cause of the problem.

*As a long-term care worker, you are a mandated reporter of abuse and neglect of a vulnerable adult. See page 56 for how to report.

Behavior is communication.

Avoid Labels

Your reports and documentation help other members of the care team understand changes in the client's needs. When you communicate about a client with other members of their care team, avoid labels. Labels like "aggressive" do not help understand an unmet need. Instead, focus on describing the situation and look for the cause of the behavior.



Communicate with Other Members of the Care Team

Each client chooses their own care team. A care team may include family, friends, neighbors, community members, other caregivers, clergy, nurses, doctors, and anyone else the client chooses. The care team works together to support the client's wellbeing. The client's care team may be noted in their service plan, or you can ask the client themselves. In an assisted living facility, the client's care team generally includes the client, their family and/or friends, the rest of the employees at the assisted living facility, and the client's practitioner and other healthcare-related supports. The client is always the captain of their own care team.

Family, friends, and other members of the care team may be able to support you to solve safety problems or access resources the client needs. You may also need to contact certain members of the care team in an emergency. Learn about the other members of the client's care team and their role in the client's life.

Remember that it can be stressful to have a loved one receiving long-term care services. Communicate with family and friends with compassion, respect, and professionalism.

Communicate with your Supervisor or Employer

If you see a problem, do not ignore it or keep it to yourself. Your employer will have expectations about who you should contact if you have safety concerns. Make sure you know your responsibilities about reporting safety concerns. Here are some common examples of when you need to report:

- You are concerned about a potential safety hazard.
- You feel that a client's decisions or actions put them or others in danger.
- A client has new or changing symptoms of illness or disease.
- You notice a pattern of change or decline in a client's functioning.
- A client chooses not to receive care or treatment.

Who should you contact if you have a safety concern?

Safety requires teamwork, and teamwork requires communication.



5

Home Safety Practices

(The following scenario is only appropriate for a caregiver working in a client's private home. Adult family homes, assisted living facilities, and enhanced services facilities MUST have working smoke detectors at all times, and smoking indoors is prohibited.)

Arnel's Story: *Arnel works for a home care agency. One of the clients he supports, Dercy, lives with multiple conditions and takes several medications. Some of her medications cause her to fall soundly asleep. Dercy also smokes and sometimes falls asleep while smoking. Dercy's clothes are covered in burn holes and so is her furniture and carpet.*

When he started working with Dercy, Arnel noticed that Dercy's house did not have working smoke detectors. Arnel was worried about a fire. He talked with Dercy and her care team to solve the problem. Dercy's landlord refused to install working smoke detectors. Arnel contacted the local fire department, and, with Dercy's permission, the fire department installed smoke detectors for her. One evening, Dercy fell asleep while smoking, and the house caught on fire. The new smoke detectors woke her up, and she was able to evacuate. Arnel's attention to safety, communication, and problem-solving skills probably saved Dercy's life.

Attention to home safety can prevent accidents and emergencies. Keep safety in mind as you work and look for safety hazards. If you support a client in their own home, work with the client, other members of their care team, and your employer to solve the problem.

Adult family homes, assisted living facilities, and enhanced services facilities must keep a hazard-free environment for all clients. Learn your employer's policies and procedures about reporting safety hazards. When you have a concern, report it to the appropriate person in your work setting. Follow-up on your concerns if the problem does not get fixed.

Know when you should document and/or report safety hazards and to whom.

Getting More Information

There are many home safety resources available if you need more information or support. 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.



Housekeeping

Good housekeeping helps to keep everyone safe. Many accidents are the direct result of cluttered living spaces.

- 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 desk and dresser drawers, and keep kitchen cabinets closed when not in use.
- Store items on shelves so they don't roll or fall out. Put heavier objects on lower to middle 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.
- If you see flammables or toxic chemicals that are not secure in a safe location, report your concerns to the appropriate person in your work setting.
- 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 safer place for the client, yourself, your coworkers, and everyone else.

What are your employer's policies and procedures about safe housekeeping practices?

Oxygen Safety

Many people use oxygen as a prescribed treatment. Oxygen use also includes some safety risks. You need to know the risks and follow safe practices for clients who use oxygen.

Keep Flame or Sparks Away from Oxygen

Oxygen use makes it easier for a fire to start and burn more quickly. Keep all sources of flame and sparks away from oxygen.

- Open flames such as candles and cooking flames should be no closer than 5 feet to oxygen sources or people using oxygen.
- People who smoke in their own homes should stay at least 25 feet away from oxygen and preferably in another room. People who smoke may not be conscious of their cigarette and approach an oxygen source with a lit cigarette.
- A client using oxygen should stay away from products that easily burn such as Vaseline or other petroleum products, nail polish remover, grease, oil, or aerosol sprays.
- Clients who use oxygen and smoke must turn the oxygen off and remove the nasal cannula or mask before lighting a cigarette.

Keep all sources of flame or sparks away from oxygen.

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. In assisted living facility or enhanced services facility, oxygen rooms must be well-ventilated and meet other requirements as directed by the fire marshal. In adult family homes or the client's private home, keep the door open and the room ventilated.

Too much oxygen in a confined space is also a health hazard. Our body functions best with 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 frequently and keep it out of the way to prevent tripping or fall hazards.

What are your employer's policies and procedures about working with oxygen?

Fire Safety

As a long-term care worker, you can promote fire safety in the client's environment.

- Adult family homes, assisted living facilities, and enhanced services facilities must have working smoke detectors and fire extinguishers. Make sure you know where they are located.
- If you work in the client's own home, you should check for smoke detectors and a fire extinguisher. If there are none, suggest the client get some. Test smoke alarms 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.
- If a client is not safe to smoke alone, work with the client and your supervisor to determine a safer alternative.
- Make sure the kitchen stove is off when not in use and do not leave cooking food unattended.
- If a client uses a fireplace or woodstove, make sure the damper is open before fires are lit. Fireplace screens are essential and always need to be 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. Space heaters may not be allowed in your facility. Check with your employer.

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

Electricity can cause fires and fatal electric shock. Practice electrical safety to protect yourself and the people you support.

- Routinely check electrical appliances for signs of wear. If the cord is frayed or cracked, do not use the appliance until it is 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 warning 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.

Water Safety

Plumbing problems and water intrusion can cause expensive property damage and unsafe conditions for a client. Overflowing sinks or baths can flood a room in just a few minutes. Learn where the water shutoff valves are for faucets and toilets in the home. Also learn where the main water shutoff valve is, if possible.

- Never leave a sink or bath running unattended.
- Never flush wipes or undergarments down the toilet.
- If a toilet becomes clogged and starts to overflow, turn off the water by closing the water shutoff valve behind and below the toilet.
- If faucet starts to leak, the hot and cold-water shutoff valves are usually under the sink.

If you notice water leaking into the home, alert the client, other members of their care team, maintenance staff, your supervisor, and/or employer.



Preventing and Responding to Violence

As a long-term care worker, you might see or experience violence in your workplace. Violence can affect caregivers, people receiving care, visitors, staff, family, or other people in the environment. Minimizing and responding to violence helps keep everyone safe.

Causes of Violence

Violence means using force or threatening to use force that can cause injury. Violence can cause physical injury or mental harm. Violence can also prevent healthy development and deprive people of basic needs.

Violence can happen when people feel fear, anger, or panic. Physical, mental, or emotional distress can make negative feelings worse and violence more likely. A person who is the victim of violence might use violence themselves in response. Someone who feels powerless might use violence as a last choice to protect themselves or others.

Preventing Violence

You can help prevent violence by staying calm and working together to solve problems.

Understanding, respect, and communication are essential for minimizing violence in the caregiving relationship.

Self-Care for Caregivers

Violence prevention starts from within. A caregiver who is exhausted, overloaded, and/or has too much stress may find it difficult to be calm and gentle. Good self-care can help caregivers keep their patience, empathy, and kindness.

Self-care can be difficult for busy people. Sleep, exercise, and a healthy diet take time and are often not easy to build into a caregiving schedule.

There are many simple and quick self-care strategies. Breathing exercises, short breaks, and talking with supportive people can also manage stress.

Review your orientation training for more self-care strategies.



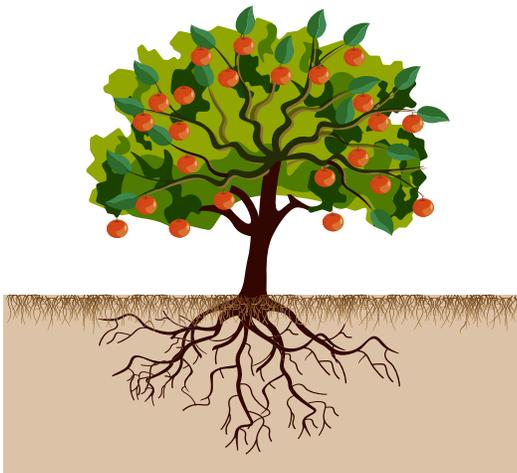
Understanding Behavior

If a person you support is acting in an aggressive or violent way, they may be communicating that something is wrong. Instead of reacting to the person's behavior, look for underlying causes or unmet needs.

- **Acute health problems:** The person may have an acute health problem that needs medical attention. Acute health problems include urinary tract infection, pain, or side effects of medication. Work together with the person and other members of their care team to make sure the person gets the care they need.
- **Disease or condition:** Diseases or conditions can also cause behavior. The person might not intend to do harm or not have complete control of their actions. They may be reacting to a delusion that is frightening or threatening. Learn about the person so you know what to expect and what strategies will best support the person.
- **Provocation:** Another person may have done something to provoke the client's anger or fear. For example, if a caregiver mistreats a client, that client may react negatively to other caregivers as well. Violent behavior might even be a cry for help and protection from abuse or neglect. Always remember to look past surface behavior to understand and support the person.

Trauma-Informed Care

Behavior is what we see on the surface. Understanding the "roots" of a person's behavior can help you empathize with and support them in a way that works for them.



Above the Surface: Yelling, profanity, spitting, biting, hitting, pinching, pushing, slapping, throwing, accusing others, anger, suspicion, fear, mistrust, defensiveness.

Below the Surface: Abuse, neglect, isolation, loneliness, lack of friends or family, fear, powerlessness, disease, pain, emergency medical condition, mental health crisis, chronic stress, desperation, side effects of medication, withdrawal, loss, discrimination, injustice, marginalization, catastrophic life events, trauma, disappointment, grief, discomfort.

Defuse Escalation

"Escalation" is when a person's negative emotions are intensifying. "Defuse" means to help someone calm down by making them feel safe, valued, and heard.

1. **Stay calm yourself.** Staying calm helps show the other person that you are not threatening. Take a deep breath and give yourself encouragement such as "I can handle this."
2. **Show the person that you want to help.** When someone is upset, they may react to your nonverbal communication more than what you say. Use a soothing tone of voice and gentle body language.
3. **Avoid arguing.** A person who has lost control of their emotions may not respond to logic and reasons. Arguing and blaming can also escalate the situation. Focus on helping everyone calm down and then work together to understand the problem.

4. **Listen and validate feelings.** Listening lets the person express themselves and work through the intense emotions. Using supportive phrases like “Can you tell me how you are feeling?” and “That sounds very frustrating” can help the person feel valued and understood.
5. **Be patient and give time.** Allowing for moments of silence gives both of you a chance to think and reflect. Feelings of urgency increase stress. Giving time can show the person you respect them and their feelings.
6. **Discuss choices and consequences.** You cannot fix every problem or grant every wish. Be honest about what you can do and offer simple, realistic, and positive choices. Discuss the consequences of each choice but avoid ultimatums and never threaten someone with violence or neglect.

Different people and situations need different strategies. If your strategy is not working, try something else. Finally, keep in mind these general tips:

- Maintain a comfortable environment (temperature, brightness, noise).
- Is there an audience? The person may feel fear or shame if others are watching.
- Redirecting the person to a pleasant activity can move them past the negative feelings.
- Communicate in a way that works for the person.
- Do not touch someone who is angry.
- Look for triggers/causes to avoid them in the future.
- Document and report what you learn about how to best support the client.

Responding to Violence

When a person loses control of their behavior and becomes violent, your first goal should be to stay safe and prevent injury. If possible, try to help the person calm down. If the situation becomes dangerous, find a way to leave and call for help.

If You do NOT Feel in Danger

Continue to stay calm and try to help the other person de-escalate. Remember to keep physical distance and be aware of your surroundings.

If You Feel in Danger

Trust your instincts. If you feel in danger, listen to yourself.

- 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.

Follow Your Employer's Policies and Procedures

Your employer will have policies and procedures for when a client becomes violent. It is your responsibility to know and follow these policies and procedures.

What are your employer's policies and procedures about when a client becomes violent?

Reporting or Suspecting Violence Towards a Client

Remember that you are a mandated reporter. If you witness or suspect abuse, neglect, or exploitation towards any vulnerable adult by anyone, the law requires you to make a report.

How to Report

To report suspected abuse of a vulnerable adult living in an adult family home, assisted living facility, or an enhanced services facility, call the Complaint Resolution Unit at 1-800-562-6078.

To report suspected abuse of a vulnerable adult living in their own home, call the Department of Social and Health Services at 1-866-ENDHARM (1-866-363-4276) or Adult Protective Services at 1-877-734-6277.

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.

Document and Report to Your Employer

Document and report any incidents of violence to the appropriate person where you work. Follow your employer's policies and procedures for documenting and reporting incidents of violence.

What are your employer's policies and procedures about documenting and reporting incidents of violence?

Weapons/Firearms Safety

In adult family homes and enhanced services facilities, all firearms must be locked and accessible only to people authorized to have access to them.

If you work for a home care agency, you might find that a client keeps firearms or other weapons in their home. If you feel unsafe because the client carries a gun or there are guns in the home, discuss your concerns with the client. Ask the client if they can store the gun or weapon away while you are present.

If you cannot work out a plan that makes you feel safe with the client, talk to your supervisor or appropriate person where you work about your concerns.



1 client to get trigger safety locks for these locks prevent a gun from firing. 2 enforcement may provide free safety classes and have gun safety classes.

3 appropriate person where you work concerned that a client has access to a gun when they should not.

Report any firearms to your supervisor and get help in managing the situation.

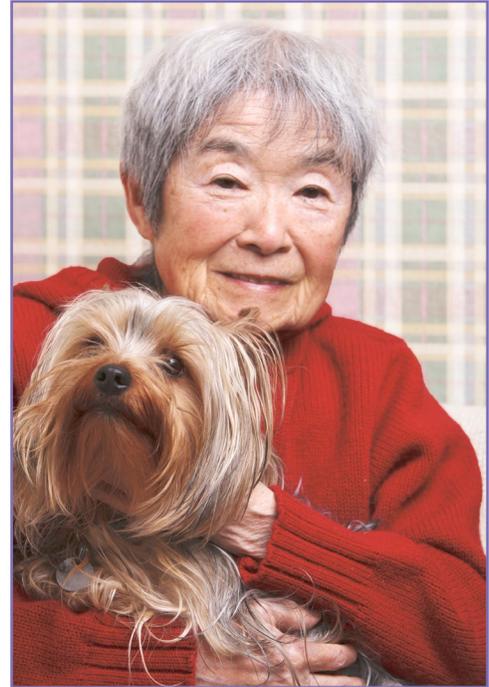
Animal Safety

Long-term care workers should know how to safely interact with pets, service animals, farm animals, and other animals that live in the neighborhood. Animals can create safety problems if people do not treat them with respect and caution.

Animals living in or visiting an adult family home, enhanced services facility, or assisted living facility must meet strict requirements. These include, but are not limited to, being up to date on vaccinations, being free from diseases transmissible to humans, and staying away from food preparation areas.

Respecting Client Rights

Service animals provide necessary support to people. Clients have the right to keep service animals and control what happens to them. Do not assume control over the client's animals. For example, ask the client for permission before commanding their dog, letting it out of its crate, or removing it from a room.



Bites

Some animals are unpredictable, and even the friendliest animal can bite in certain situations. Think about the situation and the signs the animal is giving you before you approach or touch it.

Preventing Bites

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 crate or 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.
- Its 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.

If You are Bitten

Prevent infection after a bite or scratch by thoroughly washing the injury with soap and water.

Watch for signs of infection after a bite. Bites can cause joint or systematic infection – especially from cats. Report the bite to your supervisor or employer. Always contact your health care practitioner if you have any questions or concerns regarding an animal bite.

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

Tripping

Cats and dogs can become tripping hazards. Always be aware of where animals are in the home. If you are concerned that an animal may cause a tripping hazard for you or the client, ask the client for permission to remove the animal from the room.

Other Animals

Farm Animals

Farm animals such as cows, pigs, horses, chickens, or exotic pets should be secured, fenced, or stabled prior to you coming to work. If you have any issues about farm animals in your workplace, contact your supervisor or employer.

Neighborhood Animals

If there are aggressive or threatening animals in the neighborhood such as stray dogs or cats, it is best to contact animal control.

Pests and Rodents

Pest infestations such as bedbugs or fleas, and rodents such as mice and rats are unhealthy and dangerous. If you notice pests in a client's home or if you are concerned about a client's or your own health or safety, contact your supervisor or the appropriate person where you work.



Animal Care and Sanitation

Your job may or may not include pet care depending on your employer. In either case, if there are pets in the client's home, you may have contact with them. Always practice hand hygiene after handling pets, their food, or their waste.

Pet Hygiene

Good hygiene and proper sanitation reduce the chances that a pet will infect people or other animals with infections or parasitic infestations. There should be no pet waste on floors, overflowing in litter boxes, or left in the yard. Encourage the client to follow these guidelines of pet hygiene:

- Collect and dispose of pet waste routinely and properly. Small quantities of waste should go with regular trash. Pet waste and litter should not go down the toilet.
- Keep animals away from food preparation surfaces.
- Treat any pest infestation for both the comfort and safety of the animal and people.

Contact your supervisor or case manager if you have concerns about animal waste or odors.

Animal Wellbeing

In rare situations, a client may not be able to provide the minimal standards of care that 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 also be dangerous to others.

Report concerns to your supervisor or the appropriate person where you work. Local animal control and law enforcement accept reports of animal abuse.





6

Emergency Preparation and Response

Historic Snowstorm: *Eastern Washington experienced a historic snowstorm in 2008. Over two feet of snow fell in just 24 hours. Roads, cars, and public transportation shut down. The power went out in many areas. Everyone was affected by the storm, including clients and caregivers. Caregivers were trapped in their own homes and could not travel to clients. Some clients could not access basic items like extra blankets, food that did not need to be heated, water, or medications. Are you and the people you support prepared for this kind of situation?*

Emergencies can happen any time. Preparation and planning are the best ways to stay safe when a disaster happens. In many cases, as a caregiver, you may be the first or only person who can respond to an emergency to help a client and keep them safe. Part of your responsibility as a long-term care worker is to prepare for and respond to emergencies.



Your employer has plans, policies, and procedures for emergency and disaster situations. Clients may also have specific requirements for their care during and after an emergency documented in their service plan. Use these sources to learn what you need to know.

- Learn how to respond to different types of emergencies.
- Know who to contact during an emergency and after it is under control.
- Take appropriate action to keep everyone, including yourself, safe.
- Understand the specific needs of individual clients.

Know what to do in an emergency before it happens.

Where can you find your employer's emergency plans?

Handling Emergency Situations

Staying Calm During an Emergency

Staying calm will help keep you and clients safe during an emergency. It can be difficult to stay calm when an emergency happens. 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 breaths and steady yourself.
- Assess the situation. Have an idea of the entire situation before you act.
- Stay present 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.

Safety is Your Priority

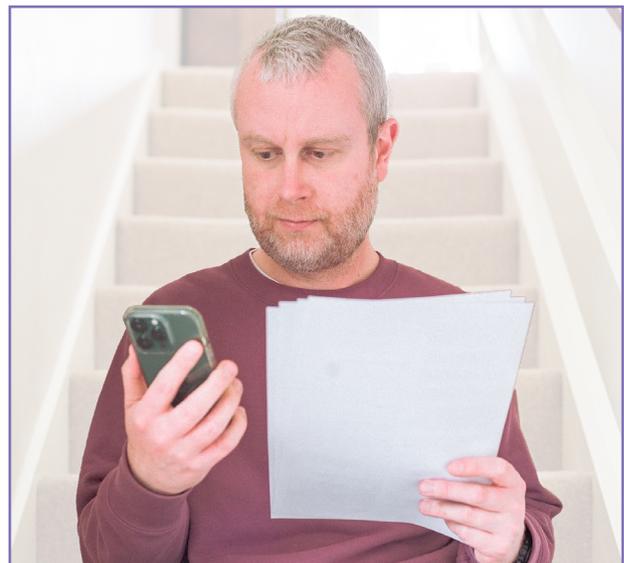
Remember that safety comes first. If you think that either you or the client are in immediate danger, call 911. If you are alone and in doubt, call 911. Emergency workers are trained to help you decide if there is an emergency – it's part of their job. Explain the situation and follow the emergency staff's directions.

Calling 911

When you need to call 911:

- Stay calm.
- Briefly describe the emergency.
- Give the address and the nearest major street or intersection.
- Stay on the phone and follow the directions of the 911 operator.

It is a good idea to keep emergency information next to the telephone or in another visible location. This information may include the address and cross street of the client's home or care facility.



Medical Emergencies

Medical emergencies are injury or illness that are dangerous to a person's life or long-term health. Your role as a long-term care worker is to recognize the signs of a medical emergency and respond appropriately.

Signs of Medical Emergency

Any serious and sudden change in health is a medical emergency. The symptoms listed below may be signs of stroke, heart attack, injury, illness, infection, allergic reaction, poisoning, or medication interactions.

Breathing Problems

- Difficulty breathing
- Choking
- Shortness of breath

Sudden Changes in Brain Function

- Fainting or loss of consciousness
- Sudden dizziness, weakness or change in vision
- Severe headache with no known cause
- Trouble speaking or understanding
- Change in mental status (such as unusual behavior, confusion, difficulty arousing)
- Mental health crisis, such as if someone is a danger to themselves or someone else
- Suicide-related behaviors (call 988 for the Suicide & Crisis Lifeline, or visit [988lifeline.org](https://www.988lifeline.org))

Injury

- Injury from falls
- Injury from motor vehicle accident
- Burns or smoke inhalation
- Deep or large wound
- Bleeding that will not stop
- Head or spine injury

Pain

- Chest pain
- Abdominal pain or pressure
- Sudden, severe pain anywhere in the body

Other Signs of Medical Emergency

- Coughing up or vomiting blood
- Severe or persistent vomiting
- Extreme fatigue
- Numbness or weakness on one side of the body
- Swelling of face, tongue, or eyes
- Change of skin color around the nails, lips, and eyes (grayish/whitish for people with darker skin and bluish for people with lighter skin)
- Swallowing a poisonous substance



Advance Directives

Advance directives are legal documents that explain what physical and mental health care the client wants if they can no longer make these decisions. Advance directives help make sure the care team knows and follows the client's wishes.

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

Document and Report Medical Emergencies

After the medical emergency is under control, you will need to document what happened, what you did, and what was the result, and report this to the appropriate person in your care setting. Follow your employer's policies and procedures for documenting and reporting.



How should you document and report medical emergencies to your employer?

Fire Emergencies

According to the U.S. Fire Administration, the most common causes of residential fires in 2021 were cooking fires, heating fires, unintentional or carelessness fires, and electrical malfunction fires. Older adults had the highest risk of dying in a fire. If a fire happens, clients will need your help to keep them safe.

Preparing for a Fire Emergency

If you work in an adult family home, assisted living facility, or enhanced services facility, your employer will have regular fire drills to practice what to do in case of a fire. Take these drills seriously – they save lives.

If you support a client in their own home, you should know the evacuation plan for the client, the best evacuation route out of their home, and their address and cross street. This information is available in a client’s service plan.

What is your employer’s fire drill schedule?

Learn How to Use a Fire Extinguisher

A fire extinguisher is required in all adult family homes, assisted living facilities, and enhanced services facilities. If you work in a client’s home, encourage them to get a fire extinguisher if there is not one in the home. A fire extinguisher that says “ABC” on the front will put out all types of fires involving 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, spraying the contents of the extinguisher at the base of the fire.

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.

Being prepared saves lives.

Responding to a Fire

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:** Close all doors and windows you can safely reach.
- E = EXTINGUISH:** Use a fire extinguisher if it is safe to do so.
- OR EVACUATE:** Leave the area if the fire is too large for a fire extinguisher.



Warnings

- Never put water on a grease or liquid fire. Water will cause the fire to spread. Cover grease fires with a pot lid, a wet towel, baking soda, salt, or use a fire extinguisher.
- Never put water on an electrical fire. It can give you a serious shock.
- Never re-enter a burning building to save pets or valuables.
- Never try to move a burning object out of the room.
- Never use an elevator as a fire escape route.

If Fire Prevents You from Evacuating

- Stay with the 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 poisonous and kills more people in home fires than flames.

After a Fire

Adult family homes, assisted living facilities, and enhanced services facilities must document and report any fires to the complaint resolution unit. Follow the documenting and reporting policies for your employer.

Power Outages

Adult family homes, assisted living facilities, and enhanced services facilities 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 (not allowed in assisted living facilities).
- When using kerosene heaters, gas lanterns, or stoves inside the house, maintain ventilation to avoid build-up of toxic fumes (not allowed in assisted living facilities).
- Never use charcoal or gas barbecues inside. They produce carbon monoxide, which can kill you.
- If you work in a facility that has a generator, learn how to turn it on and off, and which areas of the building the generator covers.
- Some clients might have medical devices that use electricity like oxygen concentrators, CPAP machines, electric beds and/or mattresses, etc. Your employer/supervisor should have a plan in place to address how to manage these items when power outages occur.

When working in a client’s home:

- Register any life-sustaining equipment a client needs (if any) with their utility company.
- Encourage a client to consider buying a generator or know where to rent one if they need 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.

**Never use charcoal or gas burning stoves or heaters indoors.
They produce carbon monoxide, which can kill you.**

Evacuations

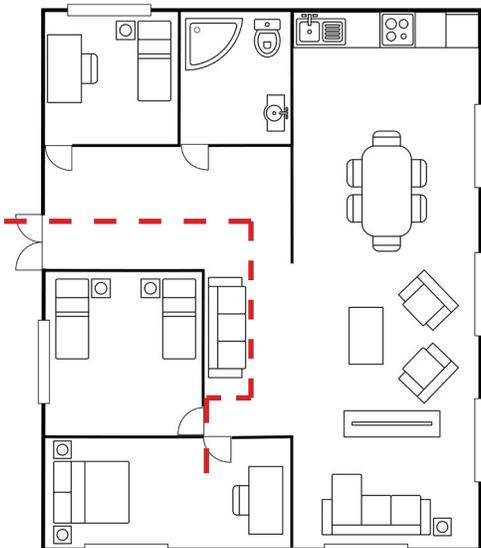
There may be times when clients need to evacuate the building because of extreme weather, natural disasters, or other emergencies. Getting clients out safely and quickly requires planning ahead.

If you work for an assisted living facility, adult family home, or enhanced services facility, your employer will have evacuation plans. The plans will list what to do if clients need to move to another part of the building, outside the building to a safe area, or move to a separate location altogether. Your responsibility is to know the plan for the people you support and to do your part when the time comes.

Clients who live in their own home may have an evacuation plan in their service agreement. If a client does not have an evacuation plan for their home, speak with the client and/or other members of the care team about planning and how you can help the client safely evacuate if necessary.

Make sure you know the plans for emergency evacuations where you work.

Where can you find the client evacuation plans in your work setting?



Preparing for Natural Disasters

Natural disasters can happen without warning and be a major threat to you and a client. The best way to be safe during a natural disaster is to have a plan and emergency supplies ready.

Emergency Supplies

Emergency supplies allow people to live without assistance in case of emergencies. Emergency supplies must be available if you work in an adult family home, assisted living facility, or enhanced services facility. Learn where the emergency supplies are in your work setting.

If you support a client in their own home, encourage the 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 they are in immediate danger of further injury.
- If you are outside: stand away from 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 emergencies may or may not give you warning. Weather conditions that can cause an emergency include high winds, excessive rain, extreme heat, lightning, and flooding. Stay informed for weather alerts in your area and follow any warnings or guidance from local authorities.

EMERGENCY PREPAREDNESS

- MAKE A PLAN**
- BUILD A KIT**
- BE INFORMED**

Extreme Heat

Temperatures are rising in Washington, and severe heat events (above 90°F / 32°C) are becoming more common. Severe heat can cause illness and death. It is especially dangerous for people who are older, have health problems, or take certain medications.

Help the people you support stay cool and hydrated. Use air conditioners if available and stay out of the sun. Your county website may have a list of cooling stations or air-conditioned buildings, such as libraries, where a client can go if temperatures get too hot indoors.

Watch clients for signs of heat-related illness. In extreme heat, watch for these symptoms of medical emergency:

- High body temperature (over 103°F)
- Hot, red, dry, or damp skin
- Not sweating even if it is hot
- Fast strong pulse
- Sudden onset of confusion or worsening confusion



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

Other Natural Disasters

Volcanic events, wildfires, and tsunamis may force clients to evacuate. Learn what events are likely in your area and stay informed for emergency alerts.

Check [weather.gov/alerts](https://www.weather.gov/alerts) for weather alerts.

Check [ready.gov/disability](https://www.ready.gov/disability) for more information about preparing for disasters.

In Conclusion

C

Your goal as a long-term care worker is to promote the independence and well-being of the people you support, and real independence and well-being are only possible in a safe environment. Keep safety in your mind throughout the day. For each task or situation, ask yourself how to minimize the risks and do it more safely. Ask for help if you need it. Watch for safety hazards and work with others to fix them. Often it only takes a few extra minutes each day to stay safe and healthy in your job.

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

As a long-term care worker, you truly 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.

Safety is up to you!



Appendix A: Emergency Action Plan for Home Care

(Client and caregiver 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 the person you support 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: _____

Appendix B: Safety Hazard Checklist

This training covered many topics. You can check yourself and your workplace for safety by completing this checklist. If you find an item that you cannot check off, review this training, or speak with your supervisor if you have questions or concerns.

Job Safety

I think about safety for every task, environment, and situation.

I can safely assist the client with mobility without manual lifting or hurting myself or the client.

I know how to safely move objects without hurting myself.

I wear non-slip shoes and clothes that are not too tight or baggy.

I drive safely with my seatbelt on and without distractions.

I know how to safely use a ladder.

Client Falls

I know the client's history with falls.

I know the side-effects of the client's medication.

I know what health-related risk factors the client has for falling.

The client wears their glasses and hearing aids.

The client wears non-slip supportive footwear, and their clothing is not too long or loose.

Bathroom floors are kept dry.

Bathrooms have grab bars and a bath chair.

There are non-slip mats in the bath or shower.

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.

Materials are stored safely and at proper height.

I know how to safely help a client to the floor if they are falling.

I know my employer's policy about what I must do when a client falls.

Infection Control

I perform hand hygiene for at least 20 seconds before and after a task or assisting a client.

Adequate Personal Protective Equipment (PPE) is available to me for required tasks.

I use disposable gloves whenever I might touch blood or other body fluids.

I know and follow my employer's policy about wearing masks.

Sharps containers or closed durable, hard, plastic containers are available if needed.

I avoid touching sharps and know how to dispose of them safely.

I know how to clean up blood and other body fluids safely and disinfect the area.

I know and follow my employer's procedures for disposing of contaminated waste.

I call my employer or supervisor and tell them if I am staying home when I am sick.

I always call my employer or supervisor as soon as I know that I cannot come to work.

I know how to report a client's illness and who to report it to.

Communication

I know who to talk to about my safety concerns.

If I correct a safety hazard, or see a safety hazard I cannot correct, I report it.

I can communicate effectively with the client. I listen carefully to them and make sure I understand.

I can answer the client's questions or find out the answers.

I know the other members of the client's care team and I can communicate effectively with them.

I know and follow my employer's policies and procedures about documentation and reporting.

Home Safety

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.

If the client smokes, they can smoke safely by themselves.

If the client smokes but cannot smoke safely by themselves, there is a plan to ensure they remain safe.

Firearms or other weapons are stored safely.

I know how to respond to violent or aggressive behavior.

I have the support I need to help me respond to violent or aggressive behavior.

I feel safe in my workplace.

Medical equipment is in good working order and is stored properly.

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.

I know how to turn off the water in case a toilet overflows.

Fire extinguishers are readily available and serviced.

Smoke alarms are in working condition and a schedule is established and maintained for changing batteries.

Emergencies

I know where to find my employer's emergency and disaster plans and I have reviewed them.

I know what my job is during a disaster, evacuation, or emergency.

I know the signs of a medical emergency.

I know my employer's policies and procedures about what I should do in a medical emergency.

I know where the client's POLST form and advance directives are in case of emergency.

I know the address and nearest intersection of my workplace, or this information is easy to find in an emergency.

If the client(s) I support have an emergency action plan, I have reviewed and understand it.

I know how to use a fire extinguisher.

I know how to put out a grease fire.

I know how the client will get light and heat in a power outage.

I never use gas or coal burning stoves or heaters indoors.

I know the signs of heat-related illness.

I know how to keep a client cool during an extreme heat event.

I know the signs of hypothermia and frostbite.

Acknowledgments

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- Page 16 - added a seatbelt to the driver.
- Page 18 - added extra mesh to the assistive device.
- Page 30 - added gloves to the caregiver's hands.

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Contact Us

For questions, concerns or suggestions about this textbook, please contact us at TCDUTrngDev4@dshs.wa.gov.

Long-Term Care Workforce Navigators can provide you with information and guidance through the process of becoming a paid and certified Home Care Aide. For assistance, send a message to your local Navigator through the website: caregivercareerswa.com or email caregivercareerswa@dshs.wa.gov.

