

24 HOUR CARE

PRIVATE DUTY HOME NURSING

> WHEN STAYING HOME MATTERS WEDICAL CARE







PATIENT INFORMATIONAL BOOKLET

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## WELCOME AND PHILOSOPHY

All Hours Private Duty Nursing and Care extends a warm welcome to you our patient, and to your family and friends. Your medical treatment, safety and happiness are most important to us. We will do our best to answer any questions you may have concerning your care and treatment.

At All Hours Private Duty Nursing and Care, we strive to achieve a coordinated, consistent, interdisciplinary approach to patient care that allows us a better understanding of our patients. This helps us to develop individualized care plans to assure the personal dignity and physical safety of our patients. Our team approach results in more effective and efficient ways to care for our patients and assists them to attain or maintain the highest level of self-care possible.

By treating you- our patient at home, skilled home care nurses can detect complications in the early stages and report them to the physician. All Hours Private Duty Nursing and Care can assist the physician in saving you our patient from an additional hospital stay and traumatic experience.

We recognize that every human being has personal rights which must be respected and should not be violated. This booklet is designed to help you understand the home care process and explain your rights as a patient.

We are committed to ensuring your rights and privileges as a healthcare patient. Many aspects of our services and procedures may be new to you, so we have prepared this booklet to assist you in becoming more quickly acquainted with us. If you have additional questions, please do not hesitate to ask us.

Sincerely,

The Management and Staff of All Hours Private Duty Nursing and Care

All Hours Private Duty Nursing and Care is owned by All Hours Private Duty Nursing and Care and in compliance with Title VI of the Civil Rights Act of 1964, with Section 504 of the Rehabilitation Act of 1973 and with the Age Discrimination Act of 1975, does not discriminate on the basis of race, color, sex, national origin, age or disability with regard to admission, access to treatment or employment. We will make every effort to comply with these and similar statutes.

## Agency Overview

## **POLICIES**

This book contains general information regarding your rights and responsibilities as a patient. As State and Federal regulations change there may be additions or changes to this book, as necessary. Our complete policy and procedure manual regarding your care and treatment is available upon request for your viewing at the agency offices at any time during normal business hours.

## ADMISSIONS CRITERIA

Admission to All Hours Private Duty Nursing and Care can only be made based upon the patient's identified care needs, and the type of services required that we could provide directly or through coordination with other organizations. The patient must live within the agency's service area which is Chatham County and Bryan County.

If we cannot meet your needs or your home environment will not support our services, we will not admit you or will not continue to provide services to you.

### SERVICES

All Hours Private Duty Nursing and Care can provide a service or a combination of services in your home. Services appropriate to the needs of the individual will be planned, coordinated, and made available under the direction and supervision of a registered nurse. Services offered through All Hours Private Duty Nursing and Care are Skilled Nursing, Personal Care and Companion and Sitter services.

Skilled Nursing: For some patients, recuperating at home is a more comfortable and desired wish when facing complex medical issues. All Hours Private Duty Nursing and Care assists individuals with skilled medical needs the ability to live with dignity and comfort at home. With a reputation for excellence, All Hours Private Duty Nursing and Care retains experienced, skillful, and dedicated nurses offering customized solutions that address all levels of in-home care.

All Hours Private Duty Nursing and Care Private Duty Nurse Services Include:

Catheter Care Diabetic Care G-Tubes Injections

Ostomy Care Medication Management Peg Tubes

Wound Care Vent and Tracheotomy Care

Personal Care: Our highly trained personal care aides assist our clients with activities of daily living. Services include assistance with bathing, toileting, grooming, shaving, dental care, dressing, and eating; and may include but is not limited to proper nutrition, home management, housekeeping tasks, ambulation and transfer, and medically related activities, including the taking of vital signs only in conjunction with the above tasks.

Companion/Sitter: Our companions and Sitters assist the elderly, handicapped, or convalescing individuals with transportation, escort services; meal preparation and serving; and household tasks essential for cleanliness and safety.

## HOURS OF OPERATION

OFFICE HOURS: Our office hours are 8 a.m. – 5 p.m. Monday to Fridays. We also provide 24 hour on-call service, 7 days per week to ensure a qualified person is available to answer your concerns or questions after regular business hours regarding any services provided by the agency. A qualified Nurse is on-call to accept patient calls, referrals for service and to arrange service for patient emergencies as needed. This is not an emergency line. In life threatening situations, go to the hospital emergency room, or call the Emergency Medical Services number (911).

SERVICE HOURS: Our service hours are up to 24hours per day Sunday to Saturday. We provide care based on client needs for all service levels. All staff levels and services can be scheduled on an hourly basis with a four-hour minimum, daily schedule or 24-hour basis.

## **ETHICS**

All Hours Private Duty Nursing and Care requires that its employees provide patient care within the ethical framework established by the profession, the health care organization, and the law. The agency affords patients, legally responsible parties, and attending physicians the right to participate in considerations of ethical issues regarding patient care concerns. Ethical issues may be brought to the attention of any employee, who will then inform the appropriate agency personnel to arrange for conferencing as appropriate.

#### SERVICE AGREEMENT AND RIGHTS

Before care and services are initiated the agency will establish a service agreement with you or with your representative. We will also provide and explain your rights as a patient of the agency. Below is the service agreement and rights. The service agreement and the rights form require your signature or your representative's signature of acknowledgement of receipt.

## Service Agreement Form

All Hours Private Duty Nursing and Care does not offer to client(s) any private home care services that it cannot reasonably deliver in accordance with the rules and regulations of Dept. of Community Health/Healthcare Facility Regulations.

Dept. of Community Health/Healthcare Facility Regulations require that a written plan of care be established in collaboration with the client, responsible party, and the client's physician.

Description of services Provider agrees to provide:

- 1). Nursing Services: skilled nursing services are furnished under the supervision of a registered nurse. The agency registered nurses shall make the initial evaluation visit, regularly reevaluate the patient's nursing needs, initiate the plan of treatment and necessary revisions, provide those services requiring substantial specialized nursing skill, initiate appropriate preventive and rehabilitative nursing procedures, prepare clinical and progress notes, coordinate services, inform the physician and other personnel of changes in the patient's condition and needs, counsel the patient and family in meeting nursing and related needs, participate in in-service programs, and supervise and teach other personnel.
- 2). Licensed Practical Nurse: The agency licensed practical nurse shall provide services in accordance with agency policies, prepare clinical and progress notes, assist the physician and/or registered nurse in performing specialized procedures, prepare equipment and materials for treatments observing aseptic technique as required and assist the patient in learning appropriate self-care techniques.
- 3). Personal Care: Means assistance with bathing, toileting, grooming, shaving, dental care, dressing, and eating; and may include but is not limited to proper nutrition, home management, housekeeping tasks, ambulation and transfer, and medically related activities, including the taking of vital signs only in conjunction with the above tasks.

Billing: We bill on a weekly basis. Any questions regarding your invoice should be directed to our office at phone number: 912-398-0678

Payment and Charges: Fees for services rendered are payable upon receipt of invoice. Payment may be made by check or money order. All payments by the consumer for services rendered shall be made directly to All Hours Private Duty Nursing and Care billing representative and no payments shall be made to or in the name of individual employees of the agency.

Client Rights and Responsibilities: Copy of your client's rights and responsibilities is provided below and requires a signature to attest that you received a copy.

## **Transportation:**

The All Hours Private Duty Nursing and Care caregiver will provide transportation to you. All Hours Private Duty Nursing and Care obtains documentation of current automobile insurance for the caregiver's vehicle that includes medical coverage for the client. Your signature below or your responsible party is required as a waiver for any claims for injury damages which could arise in the event the vehicle was involved in an accident.

All Hours Private Duty Nursing and Care does not permit any employee to obtain any authorization for use of client's funds or automobile or engage in any use of client's personal belongings. Clients have the right to deny or accept the service.

Cancellations: The client has every right to terminate or cancel service agreement at any time and all monies owed to the client will be refunded upon termination or cancellation of service agreement. Refunds are processed based on cancellations and termination of services. Refunds will be processed based on payments made for the billing cycle. Refunds will be issued within 30 days of the cancellation or termination date. All remaining balances due for services provided before the cancellation will be due within 30 days of the cancellation.

Contacting the Agency: Clients can contact All Hours Private Duty Nursing and Care at Phone Number 912-398-0678 for any information, questions, or complaint.

Complaints: You have the option of filing a complaint on-line against a facility or program licensed through the Division of Healthcare Facility Regulation if you believe you received poor quality care from the licensed facility or program. Complaint intake phone number: 1-800-878-6442 or 404-657-5728.

## RIGHTS & RESPONSIBILITIES

As a client of All Hours Private Duty Nursing and Care, the client has rights and responsibilities including, but not limited to, those outlined below:

- (a) Right to be informed about plan of service and to participate in the planning;
- (b) Right to be promptly and fully informed of any changes in the plan of service
- (c) Right to accept or refuse services
- (d) Right to be fully informed of the charges for services;
- (e) Right to be informed of the name, business telephone number and business address of the person supervising the services and how to contact that person
- (f) Right to be informed of the complaint procedures and the right to submit complaints without fear of discrimination or retaliation and to have them investigated by the provider within a reasonable period of time. The complaint procedure provided shall include the name, business address and telephone number of the person designated by the provider to handle complaints and questions.

To make a complaint with All Hours Private Duty Nursing and Care contact:

Administrator, Latarsha Lovett-Green

All Hours Private Duty Nursing and Care LLC

12 Conservation Dr, Savannah GA 31419-7548

Phone Number: 912-398-0678

Fax Number: 912-999-874

- (g) Right of confidentiality of client record
- (h) Right to have property and residence treated with respect;
- (i) Right to receive a written notice of the address and telephone number of the state licensing authority, i.e. the department, which further explains that the department is charged with the responsibility of licensing the provider and investigating client complaints which appear to violate licensing regulations.

Department of Community Health, Healthcare Facility Regulation Division Licensure and Certification Section

2 Peachtree Street NW, Suite 31.447

Atlanta, GA 30303-3142

404-657-5700

Complaints only: 404-657-5728 or 1-800-878- 6442

# RIGHTS & RESPONSIBILITIES (cont'd)

- (j) Right to obtain a copy of the provider's most recent completed report of licensure inspection from the provider upon written request. The provider is not required to release the report of licensure inspection until the provider has had an opportunity to file a written plan of correction for the violations, if any, identified. The facility may charge the client reasonable photocopying charges;
- (k) Right to be advised that the client and the responsible party, if applicable, must advise the provider of any changes in the client's condition or any events that affect the client's service needs.

## **Advance Directives**

It is your right to decide about the medical care you will receive. You have the right to be informed of treatment options available before giving consent for medical treatment. You also have the right to accept, refuse, or discontinue any treatment at any time.

All of us who provide you with health care services are responsible for following your wishes. However, there may be times when you may not be able to decide or make your wishes known. Many people want to decide ahead of time what kinds of treatment they want to keep them alive. Advance Directives lets you make your wishes for treatment known in advance.

Our agency complies with the Patient Self-Determination Act of 1990 which requires us to:

provide you with written information describing your rights to make decisions about your medical care;

document advance directives prominently in your medical record and inform all staff: comply with requirements of state law and court decisions with respect to provide care to you regardless of whether or not you have executed an advance directive.

An Advance Directive is a document written before a disabling illness. The Advance Directive states your choice about treatment and may name someone to make treatment choices if you cannot. There is a Health Care Proxy Document and a Living Will, Non-Hospital Order Not to Resuscitate.

Please inform us if you execute or change either of these documents during the course of your care.

We must document in your medical record whether or not you have executed a Health Care (also known as Proxy and or Living Will. We will abide by your advance directives.

Care will be provided to you regardless of whether or not you have executed the advance directive. It is our policy to honor advance directives to the extent permitted by law and to support a patient's right to actively participate in making health care decisions. An ethics committee is available to serve in an advisory capacity when ethical issues, such as the withdrawal or withholding of life-sustaining treatments arise during the care of patients with or without an advance directive. Discussion shall involve the patient and/or designated representatives, the home care staff involved in the patient's care and the patient's physician.

Unless the physician has written the specific order 'Non-Hospital Order Not to Resuscitate", it is our policy that every patient will receive cardiopulmonary resuscitation (CPR). If you do not wish to be resuscitated, you, your family, or person(s) holding your POA must request "Non-Hospital Order Not to Resuscitate" (DNR) orders from your physician. These orders are documented in your medical record and routinely reviewed; however you may revoke your consent to such an order at any time. A special, state approved Non-Hospital Order Not to Resuscitate form is required in Georgia if you do not wish Emergency Medical Service (EMS) to resuscitate you.

## SAFETY

Home accidents are a major cause of injury and death, especially for those over 60. As people grow older, they may be less agile and their bones tend to break more easily. A simple fall can result in a disabling injury. All patients need to take special precautions to ensure a safe living environment. Most accidents in the home can be prevented by the elimination of hazards. Use the attached checklists to determine the safety level of your home. Check each statement that applies to your home or to your habits in your home. Then review the unchecked boxes to determine what else you can do to make your home a safer place to live.

#### **GENERAL SAFETY**

Emergency Phone numbers are posted by each telephone

Outside doors are kept locked at all times and not opened to an unfamiliar face. Ask for identification and call someone to verify who they say they are.

Door-to-door salesmen are not let into your home. They are asked to come back when a friend or family member will be with you.

Valuables that may be easily stolen are kept out of sight.

Telephone and television solicitations are not accepted. "If it sounds too good to be true, it probably is."

Household maintenance (painting, roofing, etc.) is scheduled with a reputable company. Have a friend or family member assist you.

## **ELECTRICAL SAFETY**

Electrical appliances and cords are clean, in good condition and not exposed to liquids.

Electrical equipment bears the Underwriters Labs (UL) label.

An adequate number of outlets are located in each room where needed.

There are no "octopus" outlets with several plugs being used. Electrical outlets are grounded.

Lighting throughout the house is adequate.

Burned out lights are replaced.

## PREVENTING A FALL

Stairways and halls are well lit.

Night-lights are used in the bathroom, halls, and passageways.

A flashlight with good batteries or a lamp is within easy reach of your bed.

Throw rugs are removed or have a nonskid backing and are not placed in traffic areas.

All clutter is cleared from the house, especially from pathways.

Electrical and telephone cords are placed along walls - not under rugs -

and away from traffic areas and do not cross pathways.

There are no step stools without high handrails.

Handrails are used on stairs and securely fastened.

Grab bars are installed by the shower, tub, or toilet.

Shower stools or non-skid strips are attached to bottom of tub.

Elevated toilet seats and stools are used, if needed.

Spills are cleaned up immediately.

Outside walks are kept clear of snow and ice in the winter.

Outside steps and entrances are well lit.

You are aware of any medications being taken which may cause dizziness or unsteadiness.

Alcoholic beverages are limited to no more than two per day.

When in a seated or lying down position, stand up slowly.

A cane can be used for extra stability.

Steps and walkways are in good condition and are free of objects.

Steps have non-skid strips or carpeting is securely fastened and is free from holes and fraying.

Light switches are located at the top and bottom of stairways and at both ends of long halls.

Doors do not swing out over stair steps.

Clearance in the stairway provides adequate head room.

Porches, balconies, terraces and other elevations or depressions are protected by railings or otherwise protected.

## KITCHEN SAFETY

Curtains are kept away from the stove and other open flame areas.

An exhaust hood with filters is present which discharges directly to the outside. The fan is turned on when cooking.

Counter space is kept clean and uncluttered.

Pan handles are turned away from burners and the edge of the stove.

Hot pan holders are kept near the stove.

Heavy items are not stored above your easy reach.

Cooking on high heat with oils and fat is avoided.

Clothing with loose sleeves is not worn when cooking.

Refrigeration and proper storage are used to avoid food poisoning.

Kitchen appliances are turned off when they are not being used.

## **BATHROOM SAFETY**

Bathtub or shower has a non-skid mat or strips in the standing area.

Bathtub or shower doors are glazed with safety glass or plastic.

Grab bars are installed on the walls by the bathtub or toilet.

Towel bars and the soap dish in the shower are made of durable materials, are firmly installed, and are not used as grab bars.

Electrical appliances (radios, TVs, heaters) are kept away from the bathtub or shower. The water heater thermostat is set below 120°F to prevent accidental scalding. Night lights are used to brighten the way to the bathroom at night.

#### HAZARDOUS ITEMS AND POISONS

Care is used in storage of hazardous items. They are stored only in their original containers.

You know how to contact your poison control team.

Products that contain chlorine or bleach are not mixed with other chemicals.

The risk of insecticides is understood. They are only bought for immediate need and excess is stored or disposed of properly.

Hazardous items, cleaners and chemicals are kept out of reach of children and confused or impaired adults.

Household trash is disposed of in a covered waste receptacle outside the home.

#### MEDICATION SAFETY

Medications are never taken that are prescribed for someone else.

All of your medications (including prescription, over the counter, vitamins, herbals) are written down and the list shown to your doctor or pharmacist to keep from combining drugs inappropriately. If there are any changes, they are added to the list immediately.

You know the name of each of your medicines; why you are taking it; how to take it; what foods to avoid or other things to avoid while taking it; and its potential side effects.

Medication allergies and any medication side effects are reported to your healthcare provider.

Medications are taken exactly as instructed. If the medication looks different than you expected, ask your health care provider or pharmacist about it.

Alcohol is NOT used when you are taking medicine.

Medicines are not stopped or changed without your doctor's approval, even if you are feeling better.

A chart or container system (egg carton or med-planner) is used to help you remember what kind, how much, and when to take medicine.

Your medicine is taken with a light on so you can read the label.

Medicine labels (including warnings) are read carefully and medicines are kept in their original containers.

Medications are stored safely in a cool/dry place according to instructions on the label of the medication.

If you miss a dose, you do not double the next dose later.

Old medications are disposed of safely by flushing them down the toilet or disposed of as directed.

Medicines are kept away from children and confused adults.

## MEDICAL EQUIPMENT/OXYGEN

Manufacturer's instructions for specialized medical equipment should be kept with or near the equipment.

Routine and preventive maintenance is performed according to the manufacturer's instructions.

Phone numbers are available in the home to obtain service in case of equipment problems or equipment failure.

Backup equipment is available if indicated.

Manufacturer's instructions are followed for providing a proper environment for specialized medical equipment.

Adequate electrical power is provided for medical equipment such as ventilators, oxygen concentrators and other equipment.

Equipment batteries are checked regularly by a qualified service person.

# MEDICAL EQUIPMENT/OXYGEN (cont'd)

Bed side rails are professionally installed and used only when necessary. Do not use bed rails as a substitute for a physical protective restraint.

Mattress must fit the bed. Excess space between the mattress and bed side rails could cause the patient to become trapped.

Protective barriers are used with bed side rails to reduce gaps in which the patient could be accidentally trapped.

All oxygen equipment is kept away from open flame.

There is no smoking around oxygen.

Oxygen is not allowed to freeze or overheat.

If you have electrically powered equipment such as oxygen or ventilator, you are registered with your local utility company.

## FIRE SAFETY PRECAUTIONS

All family members and caregivers are familiar with emergency 911 procedures. Fire department is notified if a disabled person is in the home.

There is no smoking in bed or when oxygen equipment is being used.

The heating system is checked and cleaned regularly by someone qualified to do maintenance. Space heaters, if used, are maintained, and used according to the manufacturer's specifications.

There are exits from all areas of the house. You know your fire escape routes and have two planned exits. If your exit is through the ground floor window, it opens easily.

The garage is adequately ventilated.

If you live in an apartment building, you know the exit stairs location.

Hallways are kept clean.

Elevators are not used in a fire emergency.

A fire drill/safety plan is prepared.

An escape route is practiced from each room in your home.

The fire department number is always posted for easy viewing at all times.

Fire extinguishers are checked frequently for stability.

Smoke detectors are in place in hallways and near sleeping areas.

Smoke alarm batteries are checked and installed when you change your clocks for daylight savings time in the spring and fall.

If your fire escape is cut off, remain calm, close the door, and seal cracks to hold back smoke. Signal for help at the window.

A bed bound patient can be evacuated to a safe area by placing him/her on a sturdy blanket and pulling/dragging the patient out of home.

Remember, life safety is first, but if the fire is contained and small, you may be able to use your fire extinguisher until the fire department arrives.

## **EMERGENCY PREPAREDNESS**

In life threatening situations, go to the hospital emergency room, or call the Emergency Medical Services number (911).

ADVERSE CONDITIONS: During inclement weather, we will make every effort to continue home care visits. However, the safety of our staff must be considered. When roads are too dangerous to travel, our staff will, if possible, contact you by phone to let you know that they are unable to make your visit that day.

## **POWER OUTAGE**

In case of a power outage, if you require assistance and our agency phone lines are down, do the following:

If you are in a crisis or have an emergency situation, call 911 or go to the nearest hospital emergency room.

If it is not an emergency, call your closest relative or neighbor. Our agency will get in touch with you as soon as possible.

## EMERGENCY PREPAREDNESS INFORMATION

In the unlikely event of a disaster (hurricane, tornado, or flood) every possible effort will be made to assure that your medical needs are met.

#### WEATHER CONDITIONS:

In the event of inclement weather, we will follow these guidelines regarding travel during the hurricane season. Every effort will be made to make sure you receive the care you need. The safety of our staff however, as they try to make visits must be considered. When roads are too bad to travel, our staff will, if possible, contact you by phone to let you know that they are unable to make your visit that day. Natural disasters shall be defined and determined by the guidelines set forth by the National Weather Service and/or governing state. Most home care services are not life-supporting and can therefore be suspended for brief periods of time without placing the patient at great risk. The agency shall maintain a written plan which outlines, controls, and directs protective measures to be taken in the event of a natural disaster, emergency, or unforeseen interruption in agency services. All patients, upon admission will be oriented to the disaster plan. Patient will be knowledgeable of disaster needs, including the need to evacuate, survival needs and special needs. Patients will be given safety information to help them during disasters, emergency preparedness and unforeseen circumstances. This information is provided as a helpful reminder and in no way makes the agency responsible for patient safety during a disaster or emergency.

## **FLOODS**

Floods are the most con and widespread of all-natural hazards. Some floods can develop over a period of days, but flash floods can result in raging waters in just a few minutes. Be aware of flood hazards, especially if you live in a low-lying area, near water or downstream from a dam. Assemble a disaster supplies kit. Include a battery-operated radio, flashlights, and extra batteries, first aid supplies, sleeping supplies and clothing. Keep a stock of food and extra drinking water.

If local authorities issue a flood watch, prepare to evacuate:

Secure your home. Move essential items to the upper floors of your house. If instructed, turn off utilities at the main switches or valves. Do not touch electrical equipment if you are wet or standing in water.

Fill the bathtub with water in case water becomes contaminated or services are cut off Clean the bathtub first.

Six inches of moving water can knock you off your feet. If you must walk in a flooded area, do not walk through moving water.

Use a stick to check the firmness of the ground in front of you.

## **TORNADO**

Tornadoes are nature's most violent storms. When a tornado has been sighted, go to your shelter immediately. Stay away from windows, doors, and outside walls. In a house or small building: Go to the basement or storm cellar. If there is no basement, go to an interior room on the lower level (closets, interior hallways). Get under a sturdy table, hold on and protect your head. Stay there until the danger has passed. If the patient is bed-bound, move the patient's bed as far away from windows as possible. Cover the patient with heavy blankets or pillows being sure to protect the head and face. Then go to a safe area.

In a school, nursing home, hospital, factory, or shopping center go to pre-designated shelter areas. Interior hallways on the lowest floor are usually safest. Stay away from windows and open spaces. In a high-rise building: Go to a small, interior room or hallway on the lowest floor possible. In a vehicle, trailer, or mobile home: Get out immediately and go to a more substantial structure. If there is no shelter nearby, lie flat in the nearest ditch, ravine or culvert with your hands shielding your head. In a car, get out and take shelter in a nearby building. Do not attempt to out-drive a tornado. They are erratic and move swiftly.

## LIGHTNING

Inside a home, avoid bathtubs, water faucets and sinks because metal pipes can conduct electricity. Stay away from windows. Avoid using the telephone, except for emergencies. If outside, do not stand underneath a natural lightning rod such as a tall, isolated tree in an open area. Get away from anything metal, including tractors, farm equipment, bicycles, etc.

## WINTER STORMS

Heavy snowfall and extreme cold can mobilize an entire region. Even areas which normally experience mild winters can be hit with a major snowstorm or extreme cold. The results can range from isolation due to blocked roads and downed power lines to the havoc of cars and trucks sliding on icy highways.

## Gather emergency supplies:

A battery powered radio
Food that does not require cooking and a manual can opener
Your medications
Extra blankets
Extra water in clean soda bottles or milk containers
Rock salt to melt ice on walkways and sand to improve traction
Flashlights, battery-powered lamps, and extra batteries. Candles are a fire hazard.
Make sure you have enough heating fuel; regular fuel sources may be cut off

## Dress for the season:

Wear several layers of loose-fitting, lightweight, warm clothing rather than one layer of heavy clothing. The outer garments should be tightly woven and water repellent. Mittens are warmer than gloves.

Wear a hat: most body heat is lost through the top of the head.

### INFECTION CONTROL IN THE HOME

Cleanliness and good hygiene help prevent infection. "Contaminated materials" such as bandages, dressings or surgical gloves can spread infection, and harm the environment. If not disposed of properly, these items can injure trash handlers, family members and others who could come in contact with them. Certain illnesses and treatments (i.e., chemotherapy, dialysis, AIDS, diabetes, burns) can make people more susceptible to infection. Your Nurse will instruct you on the use of protective clothing (gowns/gloves) if they are necessary. Notify your physician and/or home care staff if you develop any of the following signs and symptoms of infection: pain / tenderness / redness or swelling of body part inflamed skin / rash / sores / ulcers / fever or chills painful urination / sore throat /cough confusion / increased tiredness / weakness nausea /vomiting /diarrhea / pus (green/yellow drainage)

You can help control infection by following these guidelines:

## WASH YOUR HANDS

Wash your hands before and after giving any care to the patient (even if wearing gloves), before handling or eating foods, and after using the toilet, changing a diaper, handling soiled linens, touching pets, coughing, sneezing or blowing nose. Hand washing needs to be done frequently and correctly: Remove jewelry; use warm water and soap (Liquid soap is best); hold your hands down so water flows away from your arms; scrub for at least 10/15 seconds (30 seconds recommended), making sure you clean under your nails and between your fingers; dry your hands with a clean paper towel; and use a new paper towel to turn off the faucet. Apply hand lotion after washing to help prevent and soothe dry skin.

Washing your hands is the single most important step in controlling the spread of infection.

#### DISPOSABLE ITEMS & EQUIPMENT

Items which are not sharp including paper cups, tissues, dressings, soiled bandages, plastic equipment, urinary/suction catheters, disposable diapers, Chi plastic tubing, medical gloves, etc. Store medical supplies in a clean/dry area. Dispose of used items in waterproof (plastic) bags. Fasten securely and dispose of bag in the trash.

## NON-DISPOSABLE ITEMS & EQUIPMENT

Items which are not thrown away including: dishes, thermometers, code, walkers, wheelchairs, bath seats, suction machines, oxygen equipment, mattresses, etc. Soiled laundry should be washed apart from other household laundry in hot soapy water. Handle these items as little as possible to avoid spreading germs. Household liquid bleach should be added if viral contamination is present (a 1-part bleach to 10 parts water solution is recommended).

Equipment utilized by the patient should be cleaned immediately after use. Small items (except thermometers) should be washed in hot soapy water, rinsed, and dried with clean towels. Household cleaners such as disinfectant, germicidal liquids or diluted bleach may be used to wipe off equipment. Follow equipment cleaning instructions and ask your nurse/therapist for clarification.

Thermometers should be wiped with alcohol before and after each use. Store in a clean, dry place.

Liquids may be discarded in the toilet and the container cleaned with hot, soapy water, rinsed with boiling water, and allowed to dry.

Routine supplies or equipment cannot be delivered after regular office hours. Any questions you may have concerning these guidelines can be answered by your nurse or by calling the office during regular office hours.

#### SHARP OBJECTS / BIOMEDICAL WASTE

\* Holding and disposal of all medical waste will be done in a safe manner using Universal Precautions.

Sharps containers must be made of leak proof puncture proof material and marked with the biohazard symbol or red in color. Never recap, bend, brake or remove a needle from a disposable syringe or otherwise manipulate the needle. Place needles, syringes, lancets, and other sharps into the sharp's container. If patients use needles and sharps between nursing visits, the nurse will teach the patient and caregiver to use puncture proof, leak proof containers with secure lids to hold their sharps. Patient/Caregiver will be taught to close and seal the top with tape when the container is ¾ full and place in the closed garbage container. Patients and caregivers will be taught the principles of the Universal Precautions and the specific procedures needed to dispose of their waste when the nurse is not present. All medical waste and sharps containers will be transported in a rigid leak proof container.

## SPILLS IN THE HOME

Cleaning up blood and other body fluids- STEP BY STEP

- 1). Follow all Universal Precautions concerning Personal Protective Equipment (PPE). Put on two (2) pair of gloves, one over the other.
- 2). Isolate the contaminated area.
- 3). Flood the contaminated area with a disinfecting agent or a mixture of household bleach mixed 1:10 with water. (One-part bleach to ten parts water. Bleach may ruin fabric or fibers. Check with patient and supervisor if uncertain).
- 4). Wipe or soak up spills with paper towels or other absorbing material.
- 5). Dispose of each paper towel or absorbent material into a plastic bag.
- 6). Flood the area a second time and allow setting at least 10 minutes and repeating the absorbing process.
- 7). Remove outer gloves and place in plastic bag and close bag. Place this bag in a second plastic bag.
- 8). Remove protective clothing and equipment and place in second plastic bag along with inner gloves.
- 9). Close and tie second bag.
- 10). Wash hands and wrist with soap and water.
- 11). Return contaminated items in double plastic bags to the agency supply clerk to place in special locked biohazard container until pick-up from waste disposal company.