HOME SWEET HOME!

Client safety is one of the primary responsibilities of every healthcare worker. This is especially true of nursing assistants because you spend so much one-on-one time with your clients. If you work in clients’ homes, you know that keeping your clients safe can sometimes be a real challenge!

When client care is provided in a facility, such as a hospital or nursing home, the environment is fairly controlled. The rooms are all similar. Housekeeping staff keeps everything clean. And, supplies and equipment are just a few steps away.

Home care is different. Your work environment can vary tremendously from client to client. For example, here are the clients assigned to Mary, a home health aide:

- Mr. Jones, who lives downtown with his wife on the 8th floor of a large, new apartment building.
- Mrs. Walker, who lives by herself in a 50-year-old one-story house that could use some repairs.
- Mr. Sampson, who stays with his daughter in a small, two-story duplex that has just been updated.
- Mrs. Canfield, who rents a room in a 100-year-old boarding house at the edge of town.
- Mrs. Thomas, who lives with her elderly brother outside of town on the family farm.

In just one day, Mary is going to go from the city to the country; from well-maintained homes to homes in need of repair; and from clients who live with family to clients who live alone. There is no housekeeping staff to clean up spills and no stock room filled with handy supplies. As she goes through her day, Mary will have to rely on her knowledge, skills and creativity to keep each client safe.

Keep reading to learn more about home safety. You’ll also pick up some tips for keeping your home care clients (and yourself) safe in both day-to-day and emergency situations.
HOME SWEET HOME!

Every year in homes across the U.S., there are an average of:

- **33,300 fatal accidents.** In fact, someone dies accidentally at home every 16 minutes!

- **8,000,000 disabling injuries**—which adds up to one serious injury every 4 seconds!

The most common causes of home accidents are:

- Poisoning
- Falls—especially among people over age 65
- Fire
- Choking

Accidents can lead to a variety of injuries, including cuts, fractures, head injuries and burns.

ARE YOUR CLIENTS AT RISK?

Whose safety is most at risk while at home? It's the people who are least able to protect themselves, including children and the elderly. Young children are at risk for injuries because they are curious and have not yet learned about all the dangers in their environment. But adults know better, so why are older people at risk?

As people age, there are a number of physical changes that put them at risk for accidents in the home, such as:

- Muscle strength decreases gradually with age. Joints, tendons and ligaments lose their flexibility and limit motion.

- Reflexes begin to slow, making it hard for older people to react quickly.

- As people age, their vision diminishes—including their depth perception. This makes it hard for them to judge distance and can lead to a fall or other injury.

- Elderly women are at risk for osteoporosis, a condition that causes bones to become weak and brittle. Even a slight fall can cause a severe fracture!

- Some older people develop urinary urgency. It's easy for them to trip or stumble on something as they hurry to get to the bathroom.

- The side effects of some medicines can put people at risk for falls, especially older people as they tend to take multiple medications. If your clients take four or more medications per day, they have an increased risk of injury.

- Diseases that are common among the elderly, such as Alzheimer’s disease and arthritis, can add to a person’s risk for accidents.

In addition, clients of any age need extra safety precautions if they are weakened, unsteady on their feet and/or suffer from an altered mental status. Chances are, most of your clients have one or more factors that add to their risk of injury. By doing everything you can to maintain their safety, you’ll promote a higher quality of life for all your clients.
The National Patient Safety Goals program was developed by the Joint Commission. The purpose of the National Patient Safety Goals is to improve patient safety. The Goals focus on problems in healthcare safety and how to solve them. This program is a critically important component of The Joint Commission’s overall efforts to improve health care.

The Joint Commission develops specific goals for each area of healthcare, such as home health, and updates these goals periodically. The latest patient safety goals for home care include:

1. **Identify patients correctly.**
   One way to meet this goal would be to use two methods for identifying patients—such as name and birth date. The idea is to avoid situations like this: A home health aide was sent to give care to a patient named Johnnie Parker. The aide got to the patient’s home, met the husband and wife and proceeded to help the husband with his bath. So what was the problem? The wife’s name was Johnnie and SHE was the patient, not the husband! (This is a true story!)

2. **Improve staff communication.**
   Your agency might meet this goal by developing a list of approved abbreviations (and a list of abbreviations that can’t be used), improving how they take physician’s orders or finding a better way for team members to share information about patients.

3. **Check patient medicines.**

4. **Use medicines safely.**
   The main responsibility for meeting these goals falls on the nurses. However, your observations about your patient’s medications, how they are taking them and/or the presence of any noticeable side effects are very important!

5. **Prevent infection.**
   Having all staff members follow the handwashing policy is one way to meet this goal. Providing staff with waterless hand sanitizer is another.

6. **Prevent patients from falling.**
   Part of meeting this goal might be to assess each patient’s risk of falling and to teach the patient and family how to reduce the risk.

7. **Help patients to be involved in their own care.**
   For example, the home care staff might teach each patient (and their family) how to report their complaints about safety.

8. **Identify specific patient safety risks.**
   For example, patients who are on oxygen therapy have an identified safety risk. An agency might meet this goal by checking the patient’s home. Does anyone in the household smoke? Are there any other open flames, such as in a fireplace or on a gas stove? Does the house have smoke detectors? Every patient on oxygen therapy should receive the same assessment and be taught about oxygen safety.

Even if your organization is not certified by the Joint Commission, these patient safety goals can serve as excellent basic guidelines.

You may have heard about the Joint Commission’s patient safety goals at your workplace. Keep these goals in mind as you go about your daily work with your clients.
Every year more than two million Americans fall down, often causing serious injury and substantial medical bills.

Falls have become one of the elderly’s most serious health issues. In fact, falling down is the leading cause of accidental death among older adults. And, sixty percent of fatal falls occur in people’s homes!

About one-third of seniors who live in their own homes have a problem with falling—and injuries, such as a broken hip, are common.

Elderly people who fall once are likely to fall again. A fear of falling is often the reason elderly people are admitted to nursing homes or assisted living facilities instead of remaining at home.

Every year, nearly two million senior citizens are treated in emergency departments for injuries due to a fall. One out of every four of them is hospitalized for those injuries.

**TIPS FOR PREVENTING FALLS**

✔️ When you begin caring for a new client, ask your supervisor if the client has a high risk and/or a history of falling. The more you know about your clients, the better prepared you’ll be to keep them safe.

✔️ Encourage your clients to stay as active as possible. Help them get some kind of daily exercise. If your client is being treated by a physical therapist, ask the therapist what you can do to help your client stay active.

✔️ Report a client’s dizziness, confusion or disorientation to your supervisor. Sometimes, these symptoms are a side effect of multiple medications—and will go away if the doctor adjusts the medications.

✔️ Help educate clients and their families about the risk factors for falls. By learning more, they may feel more in control and more confident about avoiding falls.

✔️ Be sure to report any changes that you observe in each client’s physical, mental or emotional status. Even small changes could trigger the need for a reevaluation of the client’s risk of falling.

✔️ Make sure that all rugs are tacked down tightly. Loose rugs are easy to trip over.

✔️ Keep everyday items within your clients’ reach—so they don’t have to stretch to get what they need.

✔️ Make sure that all loose cords, such as telephone wires, are tucked under furniture or placed where they will not be tripped over.

✔️ Keep the client’s living environment free from clutter, especially on the floor and the stairs.