Home Care Aide Training Guide

Emergency Procedures

1 Hour Training Course

Home Care Aide Orientation
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Introduction

In this section, Home Care Aides will learn the basics of some common medical emergencies. The section does not go into first aid procedures such as minor wounds and fractures. Instead, its focus is to emphasize those situations which can be life threatening. The section is not a substitute for formal First Aid and CPR courses. Instead, its purpose is to give Home Care Aides an overview of the basics of care for some of the most common medical emergencies. This will enable them to recognize emergency situations and initiate prompt action to ensure that victims receive the care they require. It will also serve as a guide in knowing when and what to do when contacting emergency services.

Objectives of Emergency Care

Emergency care is assistance given to people who have developed severe life threatening conditions, which require immediate attention. It provides temporary assistance or treatment until medical help is available.

The basics of first aid are to:

- Keep the injured/ill individual alive
- Prevent the injury or condition from worsening
- Promote recovery.

There are three main goals in giving first aid. They are to:

- Maintain Airway
- Maintain Breathing
- Maintain Circulation
General Rules of Emergency Care

While each case is individual and unique, there are some general rules which Home Care Aides can apply to any emergency situation. They are:

- Know the limits of your knowledge and abilities.
- Remain calm and focused.
- Don’t move the victim or change their body position until you can get a better understanding of what the problem is unless they are in immediate danger (fire or under water for example).
- If it appears the victim may aspirate (inhale blood, vomit or water being into the lungs) then position them on their side with their head turned to one side and placed lower than their feet. If the substance gets into the lungs, they may choke.
- If the victim has an injury, try not to let them see the injury.
- Do not touch open wounds or burns without sterile bandages unless it is necessary to stop severe bleeding.
- Keep them warm enough to maintain normal body temperature.
- Reassure them help is on the way.
- Ask for help if you have a hazard you can’t resolve with your client.

The ABCs of Assessing a Person’s Condition

When an emergency situation develops, the first thing that should be done is a quick assessment of the person’s condition. This involves checking the status of certain body functions in a specific order:

“A” is for airway. Determine if the individual can breathe or breathe effectively by:
- If conscious, ask if they can breathe and evaluate how well they respond
- If unconscious, tilt the head by pushing forehead backwards and lifting up the chin
If there is anything in the mouth, which may be obstructing breathing, remove it only if you can visibly see it and remove it safely

“B” is for breathing. Once the airway is opened, check for breathing by placing your ear close to the individual’s nose and mouth and listen for a few seconds.

Home Care Aides should be alert for signs of breathing distress and be able to determine if there is no breathing at all or if the breathing function is affected.

If breathing is present, but is not effective:

- Breaths may be slow and shallow or they may be fast and shallow;
- The individual is gasping for air;
- The skin has a bluish tinge;
• The individual becomes more tired;
• The individual is sweating;
• The individual may lose consciousness.

If breathing has stopped altogether then:

• The chest does not rise and fall
• The breath cannot be heard or felt

**Artificial Respiration** is the process of supplying air to the lungs of an individual who is not breathing effectively, or is not breathing at all. When they are not breathing, they need to be resuscitated.

**The methods of resuscitation are:**

• Mouth to Mouth
• Mouth to Nose

Encircling your mouth over the victim’s mouth (creating a tight seal) give 2 slow breaths until you see chest rise.

**“C” is for circulation. Ensure that there is effective circulation:**

• Check the entire body by feeling the head, neck, shoulder, arms, hands, chest, back abdomen, pelvis, legs and feet. Be alert for signs of pain or bleeding.

• If there is profound bleeding hold firm pressure to control it.

• If they are unresponsive, shout for help or call 911, then check for a pulse. You feel for a carotid pulse by placing 2 fingers in the groove of the neck between the wind pipe and the muscle at the side of the neck.
Cardiopulmonary Resuscitation (CPR)
Cardiopulmonary resuscitation is a combination of artificial respiration and artificial circulation.

- Artificial Respiration delivers oxygen to the lungs.
- Artificial Circulation pumps blood throughout the body.

The goal of emergency CPR is to keep oxygenated blood circulating to the brain and other parts of the body until the pulse returns or until medical help can take over.

Home Care Aides need to be familiar with CPR so that they know what to do and the order in which to do it, as often they will be alone with the client. When a client appears to be in distress the HCA should:

**Determine if the client is responsive by:**
- shout, asking them if they are okay
- tap or shake them on the shoulder or chest

**If there is no response, the HCA should:**
- Call 9-1-1 or other emergency service for medical help;
- Check for breathing and pulse.

If the pulse and breathing are absent, begin CRP if you have been trained to do so.

**Only perform CPR if the individual is unconscious and is not breathing and there is no pulse.**

**The importance for Home Care Aides to take a CPR course cannot be stressed enough.**

The information provided in this section is theoretical information only. Practical training is also required to obtain certification. The information provided here is intended as an introduction to CPR and not a formal training tool.
Emergency Care for Choking

Home Care Aides may have a client who chokes; therefore, it is important for them to know what to do as action has to be taken immediately. The following procedures explain how you might help their choking clients.

- Ask the individual if they are choking.
- Determine if they can talk or speak.
- Perform the Heimlich Maneuver, which is a procedure using thrusts to the abdomen to dislodge items from the airway.

The Steps to take when applying the Heimlich Maneuver are:

If the choking individual is standing or sitting:

- Stand behind the choking individual.
- Wrap your arms around the individual’s waist.
- Make a fist with one hand and place the thumb against the abdomen. Grasp the fist with the other hand.
- Press fist and other hand into the abdomen.
- Thrust upward with a swift and forceful thrust.
- Repeat the procedure until:
  - the item is expelled;
  - the choking individual becomes unconscious; or
  - medical help arrives.

If the choking individual is lying down, follow the same procedures listed above with some modifications to the Heimlich Maneuver:

- Position him/her on his/her back.
- Kneel next to his/her thigh with your head facing forward.
- Place the heel of one hand against the abdomen at a spot which is above the navel and below the breastbone.
- Place one hand on top of the other.
- Press your fist and hand into the abdomen and give a swift, upward thrust.

If the choking individual is unconscious:

- Call/send for medical assistance
- Position them on floor with back against the floor.
- Open the mouth and look for the object.
- If an object is spotted and you can safely remove it, hook your finger & remove it.
• Open the airway by tilting the head and lifting the chin. Blow twice into the individual’s mouth.
• If air does not go in:
  o Position heel of one hand on the lower half of the breastbone in the center of the chest
  o Place heel of other hand on top of the first hand
  o Press straight down to compress the chest 2 inches
  o Press at a rate of 30 compressions per minute
  o Keep repeating the process until:
    ▪ the object is expelled; or,
    ▪ medical help arrives.

**Note:** If the choking individual is obese or pregnant, the thrusting is done on the chest instead of on the abdomen.
When to Call 911 for Your Client

In a medical emergency, every second counts. Below are some examples of symptoms that constitute a medical emergency. Call 911 right away if your client or a family member experiences any of them. Doing so could save a life!

- **Chest pain** that radiates to the shoulders and/or arms accompanied by nausea, dizziness, fainting or sweating. These are classic signs of a heart attack.
- **Sudden numbness** on one side of the face or limbs, **confusion, slurring of speech**, vision loss, severe head ache or dizziness. **These are all signs of a possible stroke.**
- **Head**, neck or back **trauma**.
- Difficulty breathing or **shortness of breath**.
- Severe, uncontrollable **bleeding**.
- Abdominal injuries or sudden **severe abdominal pain**.
- **Severe allergic reactions** from insect bites, food, or beverages.
- **Overdose** of drugs or alcohol.
- **Poisoning**.
- **Attempted suicide** or suicidal threats or statements.
- Coughing or vomiting **blood**.
- **Fainting**, dizziness or hallucinations.
- If a client has fallen and has pain or the appearance of a **broken bone**.
- **Non-responsive**
- If a client falls and cannot get up on their own or with assistance.

If your client experiences any of these or other unusual symptoms, immediately do the following:

1. **Call 911**
2. **Call your supervisor/agency**
3. **Wait for further instructions**
How You Can Help in a Medical Emergency When Calling 911

What to say:

Calling for help is easy. Dial 9-1-1 and the information you give the emergency dispatch operator helps EMS help you. Remember to stay calm, speak clearly, and stay on the phone until the emergency operator tells you to hang up.

Tell the emergency dispatch operator where to find the person needing emergency care, who is hurt or sick, and what happened. They will also need to know the condition of the victim and if any help is being given.

Give the exact location of the emergency. Point out any landmarks – near by intersections, bridges, and buildings that will help the ambulance find you. Be sure to give them your name, address, and telephone number in case the emergency dispatch operator needs to get back in touch with you.

What to tell the Emergency Dispatch Operator:

When you call 911:

1. describe the emergency, speak slowly and clearly
2. give your name and phone number
3. give the exact location/address and nearby landmarks
4. give the name, age, and number of victims or persons needing help
5. follow the dispatcher’s instructions and answer all questions
6. don’t hang up until you are told to do so
7. don’t leave the scene until help arrives

What to Do Until Help Arrives

You’ve called for help and the ambulance is on the way. What do you do while you wait?

If the emergency operator gave you specific instructions, remember them and carry them out. Don't move someone who is injured unless they are in immediate danger. Try to keep them awake and warm/comfortable as possible. If someone else is with you, send them to meet the ambulance and wave them down.

Remember:

✓ In the event of an emergency, call 911!
✓ Stay clam, keep the victim calm.
✓ Keep the victim awake and warm.
✓ Do not move the patient and wait for help to arrive.
Summary

Emergency care involves providing assistance to an injured or suddenly ill individual using whatever materials are available until medical help can be obtained. Its purpose is to preserve life, to prevent the condition or injury from becoming worse and to promote recovery. This is accomplished by maintaining breathing, stopping bleeding, and preventing shock. Emergency care involves both knowledge and skills, which may be attained by taking a formal first aid course, such as the American Heart Association HeartSaver® First Aid, CPR and AED Training.