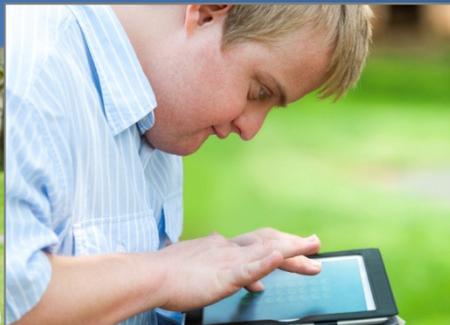


QIDP Professional TRAINING



Module 1: Introduction to the World of the QIDP

Module 2: Leadership and Communication

Module 3: Behavioral Supports

Module 4: Person Centered Planning

Module 5: Record Keeping

Module 6: Advocacy, Rights, and Resources

Module 7: Environmental and Safety Supports

Module 8: Medical Supports

Module 9: Rules and Regulations

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Module 7 Introduction

Why are environmental and safety issues important to you, as a QIDP?

IDHS and IDPH regulations include many items on the “physical plant” elements of the environment in which agencies provide services. QIDPs have the primary responsibility for maintaining the safety and security of many of those elements. Agencies that provide residential services are either homeowners and/or landlords, and as such have to keep dwellings safe and up to code.

Objectives

Participants will be able to:

- Describe the characteristics of a quality home or day program environment.
- Identify adaptive equipment and devices used to enhance independence.
- Explain the importance of regular household maintenance.
- Identify improvements for making the environment safer for individuals, staff, and visitors.
- Outline general weather safety information and tips.
- Identify adaptive equipment and devices used to enhance independence.
- Describe the process of repair and maintenance on organizational facilities.
- Recall the dangers associated with various household products.
- Suggest protective measures for general household safety.
- Describe guidelines for fire and other disaster drills.
- Identify common fire hazards.
- Recognize the importance of food safety as it affects foodborne illnesses and overall health.
- Collect individual information using the risk assessment tool utilized by the agency.

THE ENVIRONMENT

"I try to create homes, not houses."

- Louis Kahn

Safety should be a concern in every environment. While accident-proofing every aspect of your home or residential program is impossible, you can make simple improvements that will make the home safer for everyone. Mobility problems and hearing, learning, or seeing disabilities can add complications.

Although safety is imperative in our living environments, you must never forget that as a QIDP, you must assure that the individual's home environment is aesthetically pleasing and has a home-like atmosphere.

When attempting to improve household comfort and safety, it is important to consider the following:

- Quality of Home Environment
- Accommodations and Adaptations
 - Adaptive Equipment
 - Adaptive Devices
- Weather Safety
 - Heat Related Dangers
 - Tornados
 - Thunderstorms and Lightning
- Household Safety
 - General Maintenance
 - Slips, Trips, and Falls
 - Water
 - Household Products and Poison Prevention
- Fire Safety
 - Fire Hazards
 - Evacuation Drills
 - Electrical Hazards
 - Carbon Monoxide
- Food Safety

A Quality Home Environment

An important part of your role as a QIDP is to ensure that the people you help support live in an environment that ensures quality surroundings - a type of home that **you** would want to live in.

When thinking about the 'quality' of a home environment, one of the first things we think about is the aesthetics. Aesthetics include such things as light, color, temperature, humidity, scents, sounds, etc. Everyone is affected by their environment; dark, dingy rooms will affect even the most cheerful person. Quality also includes environmental cleanliness and safety for everyone.

Quality should be viewed in terms of what the individual experiences in their home/living arrangement. Of course, needs and preferences vary from person to person, so it's important to know the needs of the people you help support and involve them in planning process when designing the environment.



As a group, discuss the different characteristics that you feel make up a quality home. Use the space below to record your own thoughts and those of the group.

-
-
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Accommodations and Adaptations

A quality home must be environmentally safe and appropriate to the needs of the individual. Due to the varying abilities of the individuals we help support, various types of accommodations and adaptations may be necessary to enhance independence.

Adaptive Equipment

Adaptations are objects or devices that are made or changed specifically to help an individual accomplish a task or skill. All of us use adaptations in our lives. The spell-check on our computer is an adaptation, as is the timer we use while cooking. Adaptations allow us to bypass sensory, physical or cognitive challenges in order to participate in activities. Some ways to use adaptations are:

- Adapting Environments
- Adapting Devices
- Providing Physical Supports

Home Modifications

Home modifications can be an important tool to maximize safety as well as independence. Examples of home modifications can include:

- Entrances: Constructing ramps, building zero-step entries, or widening doors
- Bathrooms: Installing grab bars, showers with anti-scald devices, shower seats, or walk-in bathtubs
- Kitchens: Lowering counters, installing revolving shelves, or building sinks with lever handles as opposed to knobs
- Stairs: Installing an elevator or stair glide

Adaptive Devices

In some cases, meal intake and nutritional status can be improved through the use of adaptive eating equipment (cups, utensils, and plates) that have been modified to allow for greater independence. Occupational Therapists can decide who can benefit from adaptive eating equipment. Once an order is written for adaptive equipment, it is the responsibility of staff to ensure that the equipment is provided for use at each meal. Examples of types of adaptive eating equipment can include:

- Scoop plate
- Plate guard or lipped plate: Used in cases of weakness or poor hand coordination
- Rocker Knife (Cuts by rocking rather than sawing): Used by those with CVA (Cerebral Vascular Accident), those with use of only one hand, poor coordination, and tremors
- Weighted utensils: Used for Parkinson's and other conditions resulting in tremors
- Utensils with built-up handles: Used for those with weak grip, arthritic hands, and tremors
- Non-slip handles: Used for those with decreased fingertip sensation or poor grip
- Angled utensils: Used for those with poor range of motion, or who are unable to get utensil to mouth

SCENARIOS

Adapting the Environment

Scenario 1

Angela is a young woman that you help support who has significant vision problems. She has difficulty accomplishing visual tasks, even with prescribed corrective lenses, but is able to accomplish tasks with the use of compensatory visual strategies and environmental modifications. She has recently moved into a new home and has expressed a strong desire to learn how to cook.

As Angela's QIDP, what low cost strategies or adaptations might you consider making in order to help her become more independent in preparing meals?

Scenario 2

Consider this same scenario for someone who uses a wheelchair.
What types of low cost adaptations or modifications could be made?

Weather Safety

Heat Related Dangers

Heat-related illnesses and deaths are preventable. People suffer heat-related illness when their bodies are unable to cool down properly, especially in high temperatures and high humidity. While all are at risk, the threat is increased for people with cognitive impairments, those taking certain medications, with acute/chronic illness, as well as the elderly and very young.

Sun Safety

With one in five Americans developing skin cancer, education about sun safety is a vital step toward reducing risk and improving public health. Overexposure to the sun's ultraviolet (UV) rays seriously threatens human health. Besides the immediate effect of sunburn, over time excess UV radiation can cause skin cancer, eye damage, immune system suppression, and premature aging.

Taking Precautions

- Be aware of the heat, and modify or reschedule outdoor activities accordingly.
- Drink plenty of fluids, limit caffeine, and eat well-balanced, light, regular meals.
- Wear loose fitting, lightweight, and light-colored clothing.
- Do not leave individuals unattended in a vehicle, even with windows down, no matter how brief.
- Establish a routine to be sure all occupants leave the vehicle when unloading. Check each seat for sleeping/reclining individuals.
- Prolonged exposure to the sun should be avoided by individuals with known sensitivity. Protective clothes, hats, sunglasses and sunscreen should be used when outside.
- Some medications can cause sensitivity to sunlight called **photosensitivity**. When photosensitivity is suspected, discuss a possible medication change with the doctor. This condition can result in:
 - A rash-like condition
 - Severe burns and skin cell damage
 - Sunlight intolerance
 - Eye pain

Storage and Summer Use of Medications

Some medications can become less effective when exposed to direct sunlight, heat, cold or moisture. Be especially careful during summer months to store medications properly.

General Storage Guidelines:

- Store medications that do not need refrigeration at room temperature below 86 degrees Fahrenheit
- Avoid storing medication in moist, humid areas
- Keep medication away from direct sunlight
- Store medications in their original containers

- Discard expired medications according to your agency policy. **When in doubt, throw it out**
- Medication may lose its potency because of improper storage or transport
- Medication should not be given when any of the following are observed:
 - A change in appearance or odor
 - A change in consistency (i.e. tablets that crumble easily or capsules that are stuck together or crack)
 - Liquid medications that become cloudy, thick or change from their initial appearance or consistency

Types of Heat-Related Illnesses

- Heat Exhaustion – A milder form of heat-related illness. Signs and symptoms include:
 - Heavy sweating, paleness, skin may feel cool
 - Muscle cramps, fatigue, weakness
 - Dizziness, headache, fainting, nausea or vomiting
 - Pulse rate may be fast and weak, but breathing may be fast and shallow
- Heat Stroke – This is a medical emergency. When a person’s body temperature rises to a dangerous level, it can lead to vital organ damage and death. Signs and symptoms include:
 - An extremely high body temperature (above 103°F)
 - Red, hot, dry skin and absence of sweating
 - Rapid, strong pulse rate, throbbing headache, dizziness, nausea or vomiting

Immediate Steps to Take

- Contact Emergency Medical Services immediately if heat stroke is suspected or person is exhibiting extreme symptoms or heat exhaustion
- Get the person to a cool, shady area, and attempt to cool them down with cool water
- Monitor body temperature
- Give fluids if person is alert and able to swallow
- Seek medical follow-up for milder heat-related illness as soon as possible

Tornado

Tornados are one of nature’s most powerful destructive forces. They are capable of destroying structures, uprooting trees, and hurling objects through the air. Tornados are most common in the Plains States, so it is important to be prepared.

It may be helpful to know and understand the difference between a tornado warning and a tornado watch. A tornado watch means that tornados are possible and near the watch area. Be ready to act quickly if a warning is issued. A tornado warning is more severe. It means that a tornado has already been sighted or reported by weather radar. Take cover immediately following a tornado warning.

Tornado Safety Tips

- Discuss tornado safety with all members of the house
- Take shelter indoors – preferably in a basement, crawl space, or interior first-floor room or hallway
- Avoid windows and seek additional protection by getting underneath large, solid pieces of furniture
- To protect oneself from flying debris, cover the head with the hands or a blanket if possible
- Avoid automobiles or mobile homes
- Those caught outside should lie flat in a depression or other low ground and wait for the storm to pass
- Practice periodic tornado or disaster drills so everyone knows what to do if a disaster strikes



Insert agency specific information here.

Thunderstorms & Lightning

There are many hazardous conditions associated with thunderstorms. Rainfall can cause poor road conditions, hail can damage cars and windows, and lightning strikes can start house fires.

Thunderstorm Safety Tips

- Discuss thunderstorm and lightning safety with all members of the house
- Pick a safe place for members to gather during the storm
- Stay away from windows, skylights, and glass doors that could be broken by strong winds or hail
- Avoid taking a bath or shower
- Postpone all outdoor activities if thunderstorms are near or likely to occur

Household Safety

General Maintenance

Good preventative maintenance plays a major role in ensuring household systems continue to function effectively. Keeping up with regular home maintenance will keep you from future headaches and wasted money. General maintenance plans include regular testing and maintenance of the home's mechanical and safety systems that can pose a risk if not properly maintained.

Some examples of these systems include:

- Heating, Ventilation, and Air-Conditioning Systems
- Water Heater
- Water Softeners
- Fire Alarms
- Carbon Monoxide Detectors
- Fire Extinguishers

Every organization has its own process for repair and maintenance of their facilities. Spend some time reviewing your organization's policies and procedures concerning this issue.



Insert agency specific information here.

Slips, Trips, and Falls

Falls are the leading cause of injury and accidental death in older adults. In some persons with developmental disabilities, the degenerative changes seen in aging can occur as early as age 35. Falls can result in hip fractures, broken bones, and head injuries. Even falls without a major injury can cause an individual to become fearful or depressed, making it difficult for them to stay active.

Preventing Slips, Trips and Falls

The best way to prevent falls is to make changes in several areas, including taking a look at where the individual may be at risk. Sometimes making changes in the home, physical therapy/exercise, medications or daily activities can help mitigate the risk of falls.

Protection from Slips, Trips and Falls

Some considerations include:

- **Have good lighting.** Use bright light bulbs, and add lights that can be turned on by a switch near the doorway and close to the bed. Another option is to install voice or sound-activated lamps. Keep a flashlight at bedside. Use night lights.

- **Keep stairways safe.** Be sure that stairwells are well lit and have handrails on both sides. Fluorescent tape may be placed on the edges of the top and bottom steps.
- **Keep bathrooms safe.** Install grab bars beside tubs, showers and toilets. Use a rubber bath mat in the shower or tub. Consider using a shower chair in the shower.
- **Keep rugs in place.** Check that all carpets and rugs have skid-proof backing or are tacked to the floor, including carpeting on stairs. Place non-skid mats or carpet on all surfaces that may get wet.
- **Avoid clutter.** Keep rooms free of clutter, especially on floors. Keep cords and wires out of walkways. Arrange your furniture and other objects so they are not in walkways.

Emergency Response to a Fall Incident

Even with the best precautions, falls may still occur. The response to an individual's fall depends on the circumstances of the fall, the person's ongoing health status, and what injury the person appears to have sustained. If you observe someone who has experienced a fall, quickly assess the situation by listening, observing and asking questions. Follow necessary and appropriate protocols such as first aid or calling 911.

Water Safety

People can drown in lakes, oceans, swimming pools, whirlpools, bathtubs or showers. Wherever there is water, there is risk.

Near drowning can cause serious impairments and/or brain damage. Be alert to these contributing factors:

- Inadequate supervision
- Seizure disorder
- Medical emergencies while in the water (heart attack/stroke)
- Use of medication
- Water conditions, including temperature and clarity; hidden objects

Before A Swimming/Water Sport Activity

- Assess each person's swimming abilities and the level of supervision needed. Know each person's health care needs, behaviors and other conditions which may impact their safety in the water. Make specific staff/individual supervision assignments; one to one supervision should be provided to people with seizure disorders and people who are not ambulatory.
- Use U.S. Coast Guard -approved person floatation devices (PFD) for people who cannot swim, those who have seizure disorders and those who are not ambulatory. PFDs must be properly sized and maintained to be effective; however, they are not a substitute for supervision.
- Establish a system for ensuring that the whereabouts of all individuals is known. Visual contact must be maintained with all individuals in the water at all times. Alert lifeguards to the special needs of individuals; ask lifeguards if the swimming area poses any special risks.
- Before individuals enter the water, assess clarity and temperature of the water, weather

conditions, and potential for overcrowding of the area. Provide supervision appropriate to the conditions found.

In The Water

- Do not rely upon lifeguards to provide supervision. Staff, who are responsible for individuals, must be directly supervising the individuals and must be in the water with them.
- Call for help at the first sign of trouble.
- Maintain visual contact at all times with individuals for whom they are responsible. Supervision of individuals must not be interrupted by assigned staff to perform other duties, such as escorting individuals to the bathroom.
- All rules of the swimming area should be observed.

Bathing

- Assess each person's needs for bathing supervision and assistance.
- Be aware of each person's health care needs which could impact upon their need for supervision when bathing. If supervision is required, never leave the person alone.
- Staff should ensure that all bathing supplies are available in the bathroom before assisting an individual with bathing.
- Know how to correctly operate all special tubs and bathing equipment.
- Showering is generally safer than bathing for people with seizure disorder.
- Water temperature in the house is at a safe level and should not exceed 110 degrees.

Household Products and Poison Prevention

Many of the products we use for housework, gardening, home improvement, or car maintenance contain hazardous materials. Accidental poisoning can be reduced by storing all medicines, including nonprescription drugs and cleaning products in their original containers away from high-traffic areas and out of the reach of those that cannot use them safely.

There are four ways that poison can enter the body:

- Swallowing
- Breathing
- Touching
- Injecting

Hazardous Product Labels

The Federal Hazardous Substances Act of 1960 established labeling requirements for consumer products containing hazardous substances. If a product has a hazardous substance, the front label must include a warning and a description of the hazard. Levels of hazards are identified by the following:

- **Danger:** Substances which are extremely flammable, corrosive or highly toxic
- **Poison:** Substances which are highly toxic
- **Warning or Caution:** Moderately or slightly toxic substances

Household products are hazardous if they are:

- **Ignitable:** Capable of burning or causing a fire
- **Corrosive:** Capable of eating away materials and destroying living tissue when contact occurs
- **Explosive and/or Reactive:** Can cause an explosion or release poisonous fumes when exposed to air, water or other chemicals
- **Toxic:** poisonous, either immediately (acutely toxic) or over a long period of time (chronically toxic)

Other cautions include:

- Post the Poison Control Center telephone number next to the phone.
Poison Help Hotline: 1-800-222-1222
- Read and follow directions on product labels
- Never mix two products together unless you are certain it is safe to do so
- Never mix bleach and ammonia
- Handle the product carefully to avoid spills and splashing. Close the lid as soon as the product is used. This will control vapors and reduce chances of spills. Secure lids tightly.

Emergency Response to a Poisoning Incident

In the event of a poisoning, immediately call the Poison Control Center and:

- Remain calm
- Have someone stay with the person
- Report what type of poisoning (brand name and label, if possible)
- Report the amount ingested (tell them if you don't know)
- Report the age and weight of the person
- Report how much time has gone by since the incident occurred

Fire Safety

Identifying and removing fire hazards is the first step towards fire safety. Review the bulleted points below for general fire safety guidelines.

Fire Hazards

Below are some of the most common hazards which cause injuries or death related to fire:

- No means of appropriate exit
- Lack of escape plan
- Lack of escape plan knowledge
- No working smoke detectors
- Lack of fire extinguishers or knowledge of extinguisher use
- Flammable materials stored in unsafe locations
- Poor smoking habits

Fire Safety

- Regularly checking fire safety systems is an important part of this process. Smoke alarms and carbon monoxide detectors should be tested monthly; the batteries should be changed biannually.
- It is required that at least one carbon monoxide alarm is placed within 15 feet of every room used for sleeping.
- At least one fire extinguisher should be available in the residence; it should be inspected annually and replaced when necessary.
- It is beneficial to have a disaster preparedness plan in place; this plan should be reviewed with staff and individuals regularly.
- Make sure heaters and radiators are never too close to flammable objects such as draperies or bedding. Ensure that the people who live in the home and use space heaters or electric blankets are able to regulate temperatures and turn them off when they leave the room.
- Stay in the kitchen while cooking. If a grease fire starts, smother it with a lid or baking soda. Should a fire start in the oven, turn off the appliance and leave the door closed.



Discuss your Agency's fire and evacuation drill requirements for each program (e.g. ICFDD, CILAs, Day Programs, etc.)

Evacuation Issues

Most people are hurt or killed in a fire because they do not know what to do. People with developmental disabilities may not be able to take life-saving actions in a timely manner. They may wait for verbal instructions or simply wait to be rescued.

Be prepared for issues that may arise when planning and carrying out fire evacuation actions.

These issues may include:

- Resistance or refusal to evacuate
- Attempts to wander back into the house
- Age or frailty making evacuation more difficult
- Reactions or behaviors that may make evacuating difficult
- The need for bed shakers for some individuals in order for them to respond.
- Staff and individuals do not assemble at a safe outside area
- Weather can cause reluctance or discomfort while outside

Fire Drills

When an alarm sounds for a fire drill or a real fire, follow the instructions provided by your agency. After a fire drill or an evacuation drill, everyone's response to the fire drill is reviewed and evaluated so improvements can be made in future drills or in the case of an actual fire.

- Write a drill schedule for the entire year, including the dates each type of drill should be run and on what shift it should occur.
- Follow up on any problems that may have occurred during the drill. Then check the documentation next month to see if they reoccur.
- If your system is hard wired to an alarm company, check with them for any reception problems.
- During a drill, practice what is written in the evacuation procedures. If they don't result in a successful outcome, evaluate the reasons and amend the procedures.
- Record actual time of day the drill began, the length of time it took to clear the site, and the time it took for all individuals to reach the agreed upon meeting place.
- If multiple individuals at the site need physical assistance, how and/or in what order are staff to assist.
- Conduct unannounced drills.
- When planning drills do so across shifts and during various activities.
- If your agency changes a procedure in writing in order to correct a problem, you are responsible for implementing that change.
- You may want to incorporate Rule language when writing policies and procedures.
- Whenever possible, teach individuals to use safety devices (drop down ladders, fire extinguishers, etc.) in the case that staff are unable to assist them in an emergency.

Electrical Hazards

- Avoid using extension cords
- Do not use appliances with frayed electrical cords
- When unplugging an appliance, make sure to hold the plug and not the cord.
- Turn small appliances off when not in use.
- Never touch appliances or switches with wet hands.
- Never nail or staple cords to walls or baseboards.
- Use only the sizes and types of light bulbs listed for your lamps so they do not overheat.
- Keep a bulb in all light fixtures (even a burned-out bulb) to prevent electric shocks.

Carbon Monoxide

Carbon monoxide (CO) is:

- A colorless, odorless, and tasteless gas or liquid.
- It results from incomplete oxidation of carbon in combustion.
- It burns with a violet flame.
- It is slightly soluble in water.
- It is soluble in alcohol and benzene.

Food Safety

Food safety is and should be a major concern. Foodborne illness causes millions of people each year to fall ill as a result of eating unsafe food. The Center for Disease Control (CDC) estimates that each year roughly 1 in 6 Americans (or 48 million people) get sick, 128,000 are hospitalized, and 3,000 die of foodborne illnesses. Foodborne illness is a disease that is carried or transmitted to a person by the food they consume. Examples of organisms that can cause a foodborne illness include E. coli, Salmonella, and Campylobacter. Sources of foodborne illness or “food poisoning” may be the food handler, the environment (such as a contaminated work surface), or the food itself.

Symptoms of Foodborne Illness include:

- Nausea
- Vomiting
- Abdominal Cramps
- Diarrhea
- Fever
- Reactive arthritis

The five keys to safer food are:

1. Keep hands, preparation areas, and storage areas clean
2. Separate raw and cooked foods
3. Cook all foods thoroughly
4. Keep food at safe temperatures
5. Use safe water and raw materials

Temperature

Refrigerator temperatures should be kept at a minimum of 40°F or below. Freezers should be kept at 0°F. Typically, when surveyor’s complete site visits at CILAs and in Day Programs they check for the presence of a thermometer in any refrigerator or freezer that stores client food.

As a general rule, it’s best to keep cold foods cold and hot foods hot. Avoid the “Danger Zone,” a temperature range from 40 °F – 140°F, where bacteria are most likely to grow. Raw meat, poultry, dairy products, seafood, eggs, and produce are most susceptible to foodborne illnesses and should be handled with care and caution. Perishable foods should never be left out for longer than 2 hours. Always remember, “When in doubt, throw it out.”

Utilize a food thermometer to guarantee foods are cooked to the correct temperatures. When raw foods are cooked to the proper internal temperatures, the bacteria can no longer survive. This best practice will ensure that raw, possibly contaminated foods are safe to eat.

Hand Washing

Everyone preparing food should wash their hands before handling or preparing food and after handling raw meat, touching an animal, blowing nose or sneezing, and toileting. Ensure plenty of soap and clean paper towels are nearby. Hands should be washed for a minimum of 20 seconds, or while singing the “Happy Birthday” song twice.

Avoid Cross-Contamination

- Separate raw meat, poultry, seafood and eggs from other foods in your shopping cart and grocery bags.
- Use a clean knife for cutting different foods (for example, use different knives for cutting meat, produce and bread).
- During food preparation, do not taste the food with the same utensil used for stirring.
- In the refrigerator, store raw meat separately from ready-to-eat foods.
- When grilling, always use a clean plate for the cooked meat.
- Don't reuse marinades used on raw foods unless you bring them to a boil first.

Risk Assessment

The challenge for agencies/providers is to support each person so he/she can make their own decisions and choices while facing minimal exposure to risk of serious harm. The ability of the person to make informed choices must be balanced with a reasonably safe environment.

Risk assessment measures generally assess risk in the following areas:

- Community safety
- Health/Medical
- Sexuality/Relationships
- Abuse
- Financial exploitation
- Challenging behaviors
- Fire safety
- Personal care/ Daily living
- Police involvement
- Informed consent
- Home environment

It is the responsibility of all of us to assure that people with disabilities and their families are provided with access to adequate quality information in order to make appropriate decisions in areas affecting their personal lives.

As a QIDP you will likely be responsible for assessing risk and addressing limitations proactively and in a manner that maximizes safety, learning and independence.



Review your agency's practices regarding risk assessment.

Rights Restrictions

It's important to keep in mind that you may have rights restrictions to take into consideration with certain individuals in certain environments. For example, we can't just put alarms on doors just because an individual might have elopement issues. A door alarm (just like a bed or wheelchair alarm) is a rights restriction, and it's a restriction for every individual in the house, not just the individual we're concerned might elope. Similarly, some individuals with diagnoses like Pica or Prader-Willi Syndrome might eat non-food items that cause a life-threatening situation. However, we cannot just lock up all of the food in the house and put a lock on the refrigerator without getting approval to restrict the rights of all individuals in the home.

If you haven't already done so, make sure that you are familiar with your agency's missing person procedure, elopement procedure, and any rights restrictions that might already be in place in the environment in which you work that have to do with the house/facility itself.

Critical Incidents

The agency is required to have written policies and procedures for handling, investigating, reporting, tracking and analyzing critical events (sometimes called unusual incidents). You will need to know and understand your agency's policies regarding the following issues:

- Sexual Assault
- Abuse or Neglect
- Death
- Physical Injury
- Assault
- Missing Persons
- Theft
- Criminal Conduct



Review your agency's policy on critical incidents.

Universal Sign for Emergency

For individuals who are deaf and/or blind, receipt of an emergency message often involves diverse communication needs. Communication with individuals who are severely hearing and vision impaired can range from sign language near the person's face to sign language in the palm to words written on the palm with a finger.

The universal symbol for an emergency is a tactile symbol "X," "drawn" on the back of a person who is severely hearing and vision impaired by an individual who is alerting him or her.

This symbol is understood to mean that an emergency has occurred and that it is imperative for the individual receiving the message to follow directions and not ask questions.

Recommended Reading & Resources

Although we will try to cover a great deal of material with you today in class, the topic of environmental safety is a broad one that requires continued study and attention throughout your career. We recommend the following resources as good places to start with regard to furthering your knowledge and understanding of this important topic.

For more information on:

- Illinois State Law and Carbon Monoxide Detectors
<http://www.idph.state.il.us/public/hb/hbcarbon.htm>
- First Alert: Fire Safety Video
http://firstalert.co.uk/?page_id=90
- The Danger Zone
http://www.fsis.usda.gov/wps/portal/food-safety-education/get-answers/food-safety-fact-sheets/safe-food-handling/danger-zone-40-f-140-f/ct_index
- *Safe by Accident* by Judy Agnew and Aubrey Daniels

Safety Checklist

Fire Safety

- Is there a means to exit?
- Is the means of exit suitable for this individual?
- Is there an escape plan suitable for the individual?
- Does the individual know the escape plan?
- Is there an alternate escape route?
- Are there working smoke detectors? Are they in appropriate locations?
- Are there fire extinguishers? Does someone know how to use the fire extinguishers?
- Are flammables and combustibles stored in appropriate locations?
- Is the individual a smoker?

Physical Hazards

- Are there good housekeeping practices?
- Are stairs free of obstacles?
- Are the floors dry?
- Are carpeting and rugs secured?

Chemical Hazards

- Is the living area free from carbon monoxide?
- Is the area free from radon?
- Are cleaning compounds, pesticides and other chemicals properly stored?

Electrical Shock

- Is the living area free from potential electrical shocks (e.g. frayed cords, overloaded outlets, water near electrical equipment, etc.)?

Food Service Sanitation Hazards

- Are individuals and staff using proper personal hygiene?
- Are foods stored at safe temperatures?
- Are foods properly protected?

Pest Control Hazards

- Is the living area free from evidence of roaches, rodents, flies, fleas, etc.?

Water Supply & Sewage Disposal

- Is the water free from contamination?
- Does water drain freely from sinks, tubs, showers, stools, etc.?
- Is the septic system working?
- Is the living area free from the presence or smell of sewage?

Any items not checked should be addressed immediately per your agency's policy and procedures.