



Address: 1802 Carson Avenue Chattanooga, TN 37404

Phone: 423-654-3744 • **Fax:** 423-654-4545 | **Email:** caringstepssolution@gmail.com

Website: www.caringstepssolution.com

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Organizational Structure And Lines Of Authorities

Policy:

Caring Steps Solution Inc authority is delegated in the following manner:

Owner Audrik Hill:

The owner is responsible for the agency's entire operations and reports directly to the administrator and Supervisors of directors. It is the owner's responsibility to implement decisions and initiatives, as well as to maintain the smooth operation of the agency with senior management's assistance. The owner is responsible for the overall success of the agency and for making top-level managerial decisions.

Administrator:

Has the right to perform or command. Administrator act in certain designated ways and to directly influence the actions of others through leadership and policies and procedures. Administrator has authority over each immediate employee/ staff.

Alternate Administrator:

Has the right to perform or command in the absence of the Administrator. Alternate Administrator act in certain designated ways and to directly influence the actions of others through leadership and policies and procedures in the absence of the Administrator.

Supervisor:

As the supervisor of the agency, the supervisor is directly responsible for the agency's day-to-day operations and profitability while maintaining strong communication with the administrator and or owner of the agency. Formulating the company's business strategy, representing management to employees' clients and to the general public and maintaining the agency's integrity.

Alternate Supervisor:

The alternate supervisor parallel those of the primary supervisor, as the alternate must be able to

replace the primary supervisor if the latter must withdraw for any reason. Both supervisors are expected to accept responsibility for assisting and supervising the agency employees in his/her progress and job task.

Employee:

Perform various day to day client activities of daily living task. An employee care for the day to day needs of an aging adult. Employees report to agency supervisor or agency administrator with any problems or concerns, incidents or accidents.

Procedure:

In the absence of the Administrator the Alternate Administrator will serve as the Administrator.

In the absence of the Supervisor, the Alternate Supervisor will serve as the Supervisor.

Caring Steps Solution Description of Services Provided

Companion/Sitter Services

- Maintaining client comfort level
- Assisting with meals and feeding
- Providing companionship and conversation
- Seeking assistance when client is in need
- Monitoring client activity (*ensuring client stays in bed if bed bound.*)
- Supervising Client through the night, ensuring family members that their loved one is safe when they are unable to be there
- Entertaining (*games, crafts, reading, etc.*)
- Client will not be left unattended and will be accompanied by Companion/Sitter at all times
- Assisting with mobility
- Preparing meals and feeding
- Performing light housekeeping
- Running errands (*prescription pick-up, dry cleaning, etc.*)
- Organizing and reading mail
- Grocery shopping
- Escorting to appointments and social events
- Assisting with pet care

Reminding (*medication, dates, routines, etc.*)

Caregivers will not administer medications. However, medication assistance may be provided as needed, but only after written authorization and list of medications has been obtained from the client or authorized representative for the client, and only after the caregiver has received and documented training in medication assistance. Client or authorized representative for client must notify agency of any medication changes. **“Medication Assistance”** means providing medication reminders and opening medication packaging.

Medication cannot be administered.

Medication assistance includes, but is not limited to any of the following:

- (a) Loosening the cap on a pill bottle for oral medication
- (b) Opening a pill reminder box if the box is filled by the service recipient or authorized representative or licensed medical personnel practicing within the scope of their license.
- (c) Placing medication within reach of the service recipient
- (d) Holding a service recipient’s hand steady to help them with drinking liquid medication.
- (e) Guiding the service recipients’ hand when the individual is applying eye, ear, or nose drops and wiping the excess liquid.

Personal Care (PCA)

- Basic personal hygiene- providing or assisting an individual with such needs as
- bathing (*tub, bed bath, shower*), washing hair
- Grooming, shaving, nail care, foot care, dressing, skin care, mouth care, and oral hygiene
- TOILETING, BOWEL, AND BLADDER CARE- assisting to and from bathroom, on and off
- Toilet, commode, bedpan, urinal, or other assistive device used for toileting, changing incontinence supplies,
- Following a toileting schedule, cleansing the individual or adjusting clothing
- related to toileting, emptying catheter drainage bag or assistive device, ostomy care, or bowel care
- Mobility, transfers, repositioning- assisting the individual with ambulation or transfers with or without assistive devices, turning the individual or adjusting padding for physical comfort or pressure relief
- Encouraging or assisting with range-of-motion exercises
- Nutrition- preparing meals and special diets, assisting with adequate fluid
- Intake or adequate nutrition, assisting with food intake
- Feeding, monitoring to prevent choking or aspiration, assisting with special
- Utensils, cutting food, and placing food, dishes, and utensils within reach for eating
- First aid and handling of emergencies, including responding to medical incidents
- Related to conditions such as seizures, spasms, or uncontrollable movements where assistance is needed by another person, or responding to an individual's
- Call for help during an emergency situation or for unscheduled needs requiring immediate

response

- Observing the individual's health status and reporting any significant changes to physicians, health care professionals, or other appropriate persons
- Arranging for necessary medical appointments including help scheduling
- Appointments and arranging medical transportation
- Services assistance with mobility, and transfers or cognition in getting to and
- From appointments or to an office within a medical clinic or center.
- Housekeeping tasks necessary to maintain the eligible individual in a healthy and safe environment, including cleaning surfaces and floors, making the individual's bed, cleaning dishes, taking out the garbage, dusting, and gathering and washing soiled clothing and linens. Only the housekeeping activities related
- To the eligible individual's needs may be considered in housekeeping.
- Cognitive assistance or emotional support provided to an individual by another
- Person due to confusion, dementia, behavioral symptoms, or mental or
- Emotional disorders. This support includes helping the individual cope with
- Change and assisting the individual with decision-making, reassurance,
- Orientation, memory, or other cognitive symptoms.

Services That Are Not Allowed Under PSSA/Personal Supports PSSA Policy# 101522

Caring Steps Solutions are supporting Personal Assistance and/or supports that are non-medical. Staff are not required and cannot for no reason administer medications or do any medical function while working in the home under a *TDMHSAS PSSA LICENSE*.

Policy:

At no time should staff administer any medication rather it is prescribed or over the counter. Staff should not use any creams, ointments, oils, lotions, or anything that contains medication of any kind. Staff also cannot use any medical equipment or anything that requires an order from a licensed professional by a licensed professional. **SEE THE LIST OF ITEMS BELOW LIST OF ITEMS THAT CAN NOT BE USED WHEN WORKING IN A HOME UNDER A PSSA LICENSE:**

- Putting drops in ears or eyes
- Turning an IV up or down
- Adjusting the oxygen setting
- Pushing the start or stop button on an infusion pump
- Changing dressing for a wound
- Giving enemas or irrigating catheters
- Emptying and containing the urine from a catheter
- Emptying or collecting urine from a urostomy bag
- Emptying Ileostomy or colostomy bags of a 2-part collection system
- Physical therapy or any therapy
- Positioning a bed-bound client for the prevention of contractures

- Peg tubes/NG tube
- Ventilator management
- Applying ointments of any kind
- Blood pressure monitoring
- Application of wet/dry compresses to open pressure wounds
- Use of Hoyer lift or gait belt as part of a therapy regime
- Accu checks to test blood sugar
- Administering insulin injections, oral medications, prescriptions, topical creams, pain patches
- Cleaning or removing Foley catheters or assisting with feeding tubes
- Measuring recording fluid input or output
- Taking/recording vitals, blood pressure, pulse, temperature, respiration, and filling medication planners

Client Fee Schedule

Caring Steps Solution Inc of Chattanooga charges an hourly rate of \$20 dollar per hour for in home care with a minimum of 4 hours commitment for service. Caring Steps Solution Inc of Chattanooga charges a rate of \$20 per hour and \$0.56 cent pre mile for running errands and transporting the client to doctor appointments, store etc. Nights, weekends, will be billed at \$20 per hour. Holidays will be billed at 1.5 times the normal rate.

Caring Steps agency will accept assignment of fees for clients referred by TennCare or other funding sources. A written fee agreement will be negotiated and signed by agency personal and client or client legal representative prior to the delivery of services.

Caring Steps Solution Inc Enrollment Criteria

Clients who can apply/enroll for services is based on the reasonable expectation that the needs can be met adequately in the client's place of residence. The agency will start providing Personal Care Services within 5 working days after acceptance of the client.

Caring Steps Solution Inc serve clients that need close supervision and/or multiple verbal prompts and/or physical guidance to adequately complete personal care tasks, or who need assistance for safety reasons. Our agency serves the elderly, disabled or convalescing individuals who live at home or in an alternative to nursing home facility placement and or in an independent living environment. These clients also include those that are handicapped seniors who have physical or mental disability or disorders which restricts their ability to perform basic activities of daily living and/or instrumental activities of daily living, or which threatens their captivity to live independently clients that are medically frail and medically compromised. Caring Steps Solution Inc serve individuals age ranging from 18 to 100 years old.

During the initial assessment/visit, the agency staff shall ensure the following completed:

1. Upon admission all clients will be instructed on the Home Care agency's services,
2. Service Agreement, Client Rights, Environmental Safety Check, and the financial responsibilities for services rendered.
3. These instructions shall be given to the client verbally in a language that he or she can understand. Written copies shall be distributed to each client/caregiver.
4. Upon enrollment each client shall be informed of the agency's mechanism for receiving, reviewing and resolving client/caregiver complaints.
5. Appropriated client data including medical history, functional and activity restrictions.
6. Conduct a physical examination including total system review.
7. A home environment safety check sheet shall be completed. In addition, the client or responsible caregiver must be given the results of the environment check. The client has the right to refuse the environment check but must sign the form to this effect in the appropriate

area.

A client Service Agreement & Service Plan shall be developed in conjunction with the client/ caregiver and the appropriate health care personnel at the time of enrollment.

When our agency receives a call requesting for service or a referral for services we conduct a face to face in home initial assessment with the client and or client responsible party within three business days. If services are to be provided in a client's home Caring Steps Solution Inc will assess the home to determine if it is an appropriate and safe environment for service delivery.

If the client is hospitalized, institutionalized, or the home environment is not conducive for evaluation purposes. If a client is coming home from a nursing facility their initial assessment will be conducted in the nursing home prior to discharge this is done so that services can begin on the first day the client returns home. When the client return home from the facility a re-evaluation of the client's needs can be conducted when services have started after the client is settled in the community. There after services will begin within 48 hours, if possible, after the RN evaluates the client or at the next appropriate day as dictated by the frequency order unless extenuating circumstances delay the start of services.

Caring Steps Senior does not discriminate against any person or group of persons on the grounds of age, race, sex, color, religion, national origin, or handicap.

Caring Steps Solution Inc does not discriminate against client's that has not executed an Advance Directive.

Caring Steps Solution Inc Termination/Discharge Policy

POLICY:

When Termination Begins

Caring Steps Solution must begin developing the discharge plan during the initial assessment. Caring Steps Solution Inc is responsible for coordinating discharge planning in consultation with the client, the client's care coordinator, the client's physician, other provider staff, other involved service agencies, and other local resources available to assist in the development and implementation of the individual client's discharge plan. Caring Steps client care plans reflect discharge planning efforts.

Below is a list of things that will be considered in the coordination of the client discharge planning:

- Problem identification
- Anticipated progress
- Evaluation of progress to date
- Target date for discharge
- Identification of alternative resources for care after discharge

Upon discharge, Caring Steps / Administrator will furnish an appropriate discharge summary to all that is responsible for the client's post-discharge care.

The list below states the client discharge summary and what documents and information are include concerning:

- An evaluation of rehabilitation potential
- Information on current diagnoses
- Copy of the most recent Client Care Plan
- Description of course of prior treatment
- Other pertinent information needed by post-discharge caregiver

Reasons for Agency Terminating a Client

Reasons for terminating a client from services are as follows:

- The Client enters another home and community-based waiver program
- Client physician orders the client to be discharge from services
- Caring Steps Solution Inc has the right to terminate client services for not following company polices or client agreed responsibilities
- Client directly employ any staff provided by the agency
- Client moves out of the planning and service area to another area not served by the agency
- Client enters a nursing facility
- Client fails to pay invoice or cost share in accordance with the agency client agreement
- Client dies
- Client/Client's representative or care coordinator requests immediate termination of services
- Client/client's representative consistently refuses service or services
- Client has not received any wavier program service or any other reimbursable waived service
- for 60 consecutive calendar days.
- DMA's Utilization Review staff recommends in writing that a client be terminated from service
- If a client is hospitalized for a period of time and have no need for services any longer
- If a client is receiving rehabilitation services in a nursing facility
- A client receiving Medicare Home Health Services
- Wavier program care coordinator determines that the client is no longer appropriate or eligible for Services under the wavier program
- Provider can no longer provide services ordered on the comprehensive care plan
- Client displays and/or allows illegal behavior in the home or others living in the home have
- Inflicted or threatened bodily harm to another person within the past 30 calendar

days

Caring Steps Solution Inc agency in written form will notify the client /client's representative/ legal guardian and his/her care coordinator within 30 days prior to client termination date unless in an emergency or if a client UR or the care coordinator recommends termination. In the written discharge notice the client will have the effective date of termination and the reason for being terminated.

The agency will send the termination documents to the proper persons. Caring Steps will notify the client's physician. If any one of the following happens the agency does not have to give notice client enters a nursing facility, client enters another waiver program client displays and/or allows illegal behavior in the home, client/client's representative or care coordinator requests immediate termination of services client moves out of planning and service area or client dies.

Reasons For Termination Will Be Documented In The Client Record.

It is the responsibility of the client to give Caring Steps Solution Inc agency staff a written 30-day notice of termination unless an emergency. If any monies are due to be refunded to the client after termination has occurred Caring Steps will refund the necessary monies due to them within 30 days in the form of a mailed check.

Client Termination of Services

Client has the right to terminate any service(s) or service agreement(s) at any time for any reason or no reason at all. Client may contact our office by written statement, verbal request unless there is an emergency or the client dies.

Clients have the right to be fully informed before the initiation of services about their rights and responsibilities and about any limitation on these rights imposed by the rules of the agency. Caring Steps Solution Inc of Chattanooga TN shall ensure that the client is given oral and/or written rights information that includes at least the following:

1. A statement of the specific rights guaranteed the client by these rules and applicable state laws.
2. A description of the agency's grievance procedures.
3. A listing of available advocacy services

4. A copy of all agency rules and regulations pertinent to the client. The information shall be presented in a manner that promotes understanding by the client of his or her rights, and the individual shall be given an opportunity to ask questions about the information. If the client is unable to understand the information at the time of admission to service but later becomes able to do so, the information shall be presented to the client at that time. If a client is likely to continue indefinitely to be unable to understand the information, the agency shall promptly attempt to provide the required information to a guardian or other appropriate person or an agency responsible for protecting the client's rights.

In Addition, Clients Have The Following Rights:

- 1) To voice their grievance to the agency and to outside representatives of their choice with freedom from restraint, interference, coercion, discrimination, or reprisal
- 2) To be treated with consideration, respect, and full recognition of dignity and individuality.
- 3) To be protected by the agency from neglect, physical, verbal, and emotional abuse (*including corporal punishment*), and all forms of misappropriation and/or exploitation.
- 4) To receive services regardless of race, national origin, gender, age, religion, or disability
- 5) To be informed about the care to be provided. To be involved in care planning, and not to receive any service without informed consent and agreement.
- 6) To expect confidentiality of all agency records except in case of court order, emergencies, or as otherwise required or permitted by law.
- 7) Not to be required to make public statements acknowledging gratitude to the licensee for services provided.
- 8) Not to have identifiable photographs taken and/or used without written permission.
- 9) To be informed of any agency's grievance procedure.
- 10) To voice grievances to the agency and to outside representatives of their choice with freedom from restraint, interference, coercion, discrimination, or reprisal.
- 11) To be assisted by the agency in the exercise of their civil rights

Advocacy Resources:

1. Adult Protective Services: Tennessee Adult Protective Services (888) 277-8366

2. Local ombudsman: District Long – Term Care Ombudsman (423) 755-2877

3. TDMHSAS Office of Licensure: East Tennessee Main Phone: (865) 594-6551

Complaint Line: (866) 777-1250

4. Department of Children's Services: Children's Services Department (423) 296-1234

5. Disability Law & Advocacy Center: Family Caregiver Alliance (800) 342-1660

Office on Aging: Area Agency on Aging & Disability (423) 296-1234

Community Mental Health Centers: Johnson Mental Health Care (423) 634-8884

Free Health Clinics: Homeless Health Care Center (423) 209-5800 & Volunteers Medicine
(423) 855-8220

Mental Health Hospitals: Moccasin Bend Mental Health Ins (423) 265-2271

Mobile Crisis: Mobile Crisis Services 24-hour hot line (855)274-7471

Local Food Banks: Chattanooga Area Food Bank (423) 622-1800 & Soddy Daisy (423) 332-1148

Transportation: Chattanooga Area Regional Transportation Authority (423) 629-1473 &
Groome Transportation (423) 954-1400

Veteran's Administration: Tennessee Department of Veterans Services (423) 634-6488

Client Responsibilities

- To notify the agency of changes in condition.
- To follow the plan of care.
- To notify the agency if the visit schedule needs to be changed.
- To inform the agency of the existence of any changes made to advance directives.
- To advise the agency of any problems of dissatisfaction with the services provided.
- To provide a safe environment for care to be provided, (*e.g. leash vicious dogs, refrain from illegal activities, etc.*).
- To carry out mutually agreed upon responsibilities.
- To be present at the agreed upon visit time and call the home health care office if you are not going to be home for a scheduled visit.
- To remain under the care of a physician and inform the nurse or therapist of any changes in orders which you receive from your physician.
- To participate in decision making regarding your care and assist in the development and revision of your plan of care.
- To provide the agency staff with all known health insurance information.
- To inform and provide agency care providers with copies of any advance care documents (*e.g. Living Will, Health Care Power of Attorney*) you may have.
- To inform the agency supervisory staff of and to secure all valuables and money.
- To carry out mutually agreed upon responsibilities; and
- To behave in a manner that is reasonable, considering the nature of Client illness.
- To make payment in full and on time.

Client Grievances

Policy:

Caring Steps Solution Inc shall regard all client complaints as a serious issue and will have an effective procedure in place that will be utilized to investigate client complaints and provide a systematic means of monitoring and resolving complaints. Clients will be allowed to voice grievances regarding treatment or care that is or fails to be furnished, or regarding the lack the lack of respect for property by agency staff. Grievance issues should be reported to the direct supervisor, management, or the person on-call. Grievances/complaints can be reported over the phone. However, written documentation is required within 48 hours. A client does not have to wait for the agency to investigate before they can file a grievance with an outside representation. Grievances may be resolved by phone calls and/or visits to all involved parties, written statements and or counseling or staff.

Procedure:

Complaints against the agency may be directed to the administrator. All complaints will be investigated within ten (5) days of receipt; the entire process from receipt of complaint through resolution will not exceed thirty (30) days.

The Administrator, Supervisor or designee will investigate all complaints and all information related to the complaint will be recorded on the complaint form and logged within 24 hours of receipt. The supervisor will initiate investigation within the same time period.

If the complaint involves regulatory issues or rule, the supervisor will provide the complainant with a copy of the written rules and explain verbally in language that the client/family can understand.

When the complaint involves the delivery of care by a service provider, staff of contractor, the Administrator / Supervisor / designee will review the incident with the care provider and document the proceedings.

Interventions for serious client issues involving care delivery may result in disciplinary action, notification of regulatory boards and/or initiation of the peer review process. Full

documentation will be maintained by utilizing client and/or employee number vs. actual names.

Clients will be allowed to voice grievances without fear of reprisal. All clients will be provided with a written statement describing how to file a complaint/Grievance with Tennessee Department of Mental Health and Substance Abuse Licensing Information as well as the time frames for review and resolution.

Documentation of visits or phone conversations with the client is logged in the chart and in the computer. A history of all grievances will be maintained in the chart and in the computer.

The counseling of an employee is documented; they are entitled to receive a copy and the original is kept in the personnel file.

Abuse, neglect and/or abandonment, financial, verbal, physical and/or sexual are reported to the authorities. Those authorities include and are not limited to adult protection, child protection, and board of nursing, department of health and welfare and/or police.

Abuse / Neglect / Exploitation Investigations & Reporting

ANE = Abuse, Neglect, Exploitation

Policy:

Caring Steps Solution Inc will initiate an investigation of all known and alleged acts of ANE by agency employees, including contractors and volunteers, immediately upon witnessing the act or upon receipt of the allegation. Allegations of abuse and or neglect against the agency or caregiver, as well as other critical incidents such as theft of client's property medicine, client accidents and injuries that occur while in the care of the agency staff, will be documented on a reportable incident form and faxed to (844) 340-4482 or emailed to licensureeast.fax@tn.gov to the Department of Mental Health and Substance Abuse Services Office of Licensure.

The Department of Human Services Adult Protective Services shall be notified in cases of suspected or alleged abuse and or neglect. Phone (888) 277-8366 Website for on-line reporting: Depending on the type of incident, law enforcement will also be notified. If it is determined that the caregiver perpetrated an act of abuse, neglect, or misappropriation, the caregiver's employment will be terminated.

Procedure:

Critical incidents such as client falls, injuries that occur while caregiver is in the home, or death of a client when caregiver is in the home are to be reported to the agency administrator.

Allegations or suspicion of abuse, neglect, or misappropriation/ exploitation are to be reported to the agency administrator.

- Administrator or appropriate staff will take a statement from the client and/or responsible party upon being notified of a critical incident or allegation/suspicion of abuse, neglect, misappropriation/exploitation of a client.
- If allegation has been made against a caregiver, the caregiver will be removed from all homes until the allegation can be investigated and a determination made.
- If it is determined that the caregiver abused, neglected, or was found guilty of misappropriation/exploitation, the caregiver's employment will be terminated immediately.
- Local law enforcement will be notified, and a report filed in cases of misappropriation/

exploitation.

- A Reportable Incident form will be faxed or emailed to the TDMHSAS Office of Licensure within 24 hours of the incident or time agency learns of incident.
- A statement shall be taken from all caregivers involved.
- Agency and its employees will cooperate fully with any and all investigations.
- Notify the local authorities, if has not already been done, the agency will log the report made to the local authorities.
- The agency will log the ANE report.
- Assure that client is not in immediate danger of being exposed to further abuse.

General Reporting:

Professionals as defined in the law are required to report immediately first cause to believe that the elderly client has or maybe abused.

A report shall be made regardless of whether staff suspects that a report may have previously been made.

The ANE Report That Is Logged Will Include The Following Information:

- Incident Date
- Alleged Victim
- Perpetrator
- Any Witnesses
- The Allegation
- Injury
- Adverse Effects
- Assessments
- Treatment
- Investigation Summary

- Any action Taken

Information related to the suspected abuse and/or neglect is communicated to the members of the interdisciplinary team. All personnel are to report all incidents of suspected client abuse and/or neglect to the Administrator and or Clinical Director, and/or designee who will conduct an initial investigation.

Document the investigation and submit documentation to the appropriate authorities. Assure that client is not in immediate danger of being exposed to further abuse.

Report suspected abusers to the appropriate authorities, ie., licensing certified boards.

Attempt follow-up with the appropriate authorities to ensure that the situation is rectified.
Maintain confidentiality of the report.

Training:

The agency shall develop training for all staff on the policies and procedures in regard to reporting adult abuse. New staff shall receive this training as part of their initial training/ orientation. Training shall be documented.

As part of the training, staff shall be informed that the staff person who conducts the screening and has cause to suspect elderly abuse has occurred is legally responsible for reporting. A joint report may be made with the supervisor.

Policy:

It is the policy of Caring Steps Solution Inc to provide a plan that will ensure continuity of care for all clients during emergencies, severe weather, disaster conditions and staff shortages, or dissolution of services.

Medical Emergencies

In the event of an emergency involving the client's health such as not breathing or loss of consciousness, the caregiver will dial 911 immediately and follow the instructions of the dispatcher. Training by Caring Steps Solution Inc will be provided to caregivers to clarify these situations. After making the 911 call, the caregiver is to call the agency's office or on-call line. Caregiver is to remain by the client's side until help has arrived to take over client's care. Caregiver is to do whatever necessary to keep client safe and comfortable.

Once You Call 911, What Do You Do?

- Let the operator speak mostly and do not interrupt
- Follow all instructions
- Be ready to answer the following questions:
 - * What is your location?
 - * Is the person awake?
 - * Is the person breathing?
 - * Is there an injury?

- * Is the person in a dangerous spot or position where further injury could occur?
- * Has the person experienced a recent major medical event?
- * Does the person have a chronic medical condition?

Do not move the older adult unless the person is in danger.

To Save Critical Time After Calling 911:

- Put animals in another room
- Turn on lights
- Ensure that the house number can be seen easily
- Unlock and open the front door
- Clear a path to the older adult, both indoors and outdoors, and leave room for the ambulance in the driveway if possible.
- Remember: remain as calm as possible during the situation. Handling an emergency situation with care and quick, calm action is the best way to help.

Fires

In the event of a fire, the caregiver will escort the client out of the home using the nearest exit and to a safe distance from the home. Caregiver will use whatever means possible to call 911 and report the fire and then caregiver will call the agency's office or on-call line as soon as possible for further instructions from our staff.

Once everyone is out of home, stay out. Don't go back inside for anything. Also, remember to stay back 75 feet or more. Explosions are uncommon but could cause you to become injured if you're too close. Once the fire fighters arrive, they will handle the situation from here.

Natural Disasters

Clients are always instructed to keep equipment fully charged. Also, to keep an adequate supply of medications available always during severe weather seasons.

In the event of a natural disaster, the caregiver will make every possible effort to ensure that the client's safety and care needs are met. In addition, the caregiver will keep in contact with the administrative office for instructions and listen to the radio and television for updated news and instructions from the government agency in charge, if possible.

The clients are given the telephone number to the agency, local police, fire department, ambulance service, Red Cross or Civil Defense which may be available for evacuation and transport during an emergency disaster.

The Supervisor, Administrator or their designee will be responsible for initiating the Emergency Preparedness plan during severe weather, staff shortages or a disaster. He/she will assure that all clinical activities are coordinated and prioritized to maintain the safety of staff and clients.

Caring Steps Solution

Residential Services Safety Plan

Person Served: _____

Date: _____

During an emergency, staff on duty should refer to the agency emergency protocol for emergency numbers, and listings and refer to the procedures below specifically for the individual supported.

Philosophy:

This plan is to ensure the safety and well-being of the individual being supported. The function of the plan is to outline a specific plan for safety in case of an emergency or incident of any kind.

Staff should always be alert and aware of their surroundings at all times. Bathroom, kitchen, and laundry room doors if applicable should remain closed in case of a fire. If an unforeseeable disaster occurs such as a fire, tornado, or bomb threat, or requires an emergency room visit, the following steps should be followed.

Fire:

In case of a fire, staff should yell for help. If a fire occurs in the kitchen staff should wake up the individual outside of the home through the window, patio, or front door if possible. If the fire is small and it is safe enough to use a fire extinguisher, staff should get the fire extinguisher and aim directly at the fire at a safe distance sweeping from side to side until the fire is out or fire has been contained enough to evacuate safely as indicated in the evacuation manual. Once the staff is outside of the home, staff should go as far away from the building as possible and call 911. If a fire occurs in the living room or hallway near the front of the home, staff will first wake the individual and open the window and “yell loudly” for help. Staff should go to a designated area for safety. If the fire is not contained and smoke is filling the room staff and individuals should go out the window or door in another room or empty room and proceed out the window or door. If there is not enough space to go out the window staff will break out the window by kicking out the window and putting each individual through the window one at a time as safely as possible. If the individual is refusing, staff should grab the individual carefully covering her

in her blanket, and proceed through the window. If a fire occurs in the bedroom staff should get the fire extinguisher, remove the pin, aim at the fire, and spray by sweeping back and forth as indicated in the disaster/training manual. Always close the door behind you, if you have gotten in a safe location and place a towel or place something under the door to prevent smoke from coming into the room.

Tornado:

In case of stormy weather during tornado season, staff should keep the weather ban radio on at all times. If a tornado warning is given, staff should move the individual away from the window and take the individual into the bathroom, closet, or doorframe away from windows with the weather ban radio until the warning has been lifted.

Bomb Threat:

If there is a bomb threat, staff should remove the individual from the building as quickly as possible and proceed to remove the individual from the area by a vehicle as far away from the location as possible.

An Emergency Incident Requiring An Ambulance:

If there is a reportable incident that requires an ambulance, staff will call 911 “first” and then contact the supervisor on duty. Once the ambulance arrives, give paramedic instructions on what happened and provide the paramedic with emergency procedures when transported by ambulance instructions form. Please ensure that all reportable incidents, non-reportable incidents, and protocols are being followed as indicated by the agency. Please contact your supervisor for further instructions if needed.

During An Earthquake

Find Safe Spots In Your Home.

Identify and discuss the safest place in an earthquake in your home and tell them to go there immediately if they feel an earthquake. The safest place is an interior room of your house without any windows, such as a bathroom or closet. If possible, take cover under something sturdy, like a heavy table.

Practice Earthquake Drills.

Once you've created your earthquake evacuation plan and talked with your person supported about it, it's time to practice. Practicing earthquake drills will help person supported to understand what to do and how to stay safe during an earthquake.

Drop, Cover, and Hold On.

If you're inside, drop to the ground and take cover under something sturdy like a desk or table if you feel an earthquake. With one hand hold on to the object and with your other arm protect your head and neck. If you don't have anything sturdy to take cover under, crouch down next to an interior wall. Stay indoors until the shaking stops and you're sure it's safe to exit.

Find An Open Spot.

If you're outside, the safest place in an earthquake is a clear spot away from buildings, trees, streetlights, and power lines. Drop to the ground and stay there until the shaking stops.

If In A Vehicle, Stop.

Pull over to a clear location, stop and stay there with your seatbelt fastened until the shaking stops

Chemical Spills

If you work with chemicals, there is always the risk of a spill. This risk can be reduced and minimized, but it will never completely go away. Take a look at our guide for what to do in the event of a spillage.

Important: *If in any doubt following a spillage, contact the local authority and seek medical attention immediately. Never exceed your training or put yourself, or others, at risk.*

CHECK THAT NO ONE HAS COME INTO DIRECT CONTACT WITH THE CHEMICAL

The first step in the event of a chemical spill is to ensure that there is no immediate injury to personnel. Quickly assess the situation, remove everyone from the immediate vicinity of the chemical and check that they are not injured.

Do a quick roll call and make sure everyone is accounted for. In a public area, check to make sure no one else is at risk.

In The Event Of Direct Contact

Chemicals vary in properties and strength, so it is always important to understand precisely what you are working with. If any individual has come into direct contact with a chemical, check for burns. If there is a burn, use the chemical safety kit which you should have nearby whenever you use hazardous materials, and seek medical treatment as quickly as possible.

If there is no burn, flush the affected area with running water for at least 15 minutes. Remove any items of clothing which have been contaminated while standing under a stream of warm water, preferably in a shower area.

In the event of contact with eyes, flush the eye with tepid water for 15 minutes or longer, and ask the patient to revolve their eye to achieve maximum cleansing. Then seek medical attention. If in doubt about anything following a chemical spill, contact a doctor or hospital immediately.

Evacuate The Area

Secure the area as quickly as possible. Set up a cordon to ensure no one can accidentally wander in and put themselves at risk. This is especially important in a public place.

Remember never to put yourself at risk during this stage; simply ensure that the area is secure.

Contain The Spill Safely

Do your best to contain the spill safely, using berms, secondary containment platforms, or any other spill containment solution. Wear protective clothing while carrying this out, and never put yourself at risk.

If there are any fumes, or if the area is not ventilated, do not enter the affected area. Remember, you are simply trying to prevent the spill from spreading. If you cannot contain it safely, you must retreat to avoid damaging your health.

Contact Local Authorities

Unless you can clean up the spillage completely and are trained to assess the area and ensure its safety, you must contact the relevant local authorities. Numbers for local authorities in your area should be easily accessible within your organization.

All spillages should be reported in the company incident log, and any medium or large-scale spillages must be reported to higher authorities who can assess the damage and your response

Caring Steps Solution. Residential Program

Inclement Weather Procedures

During inclement weather or a natural disaster such as snow, ice, power outage, flood, fire, tornado, bomb, and/or any disaster of any sort, staff should refer to the emergency protocol procedures by calling the on-call supervisors as indicated on the emergency protocol list.

- All supervisors and Direct Care Staff will watch the news and/or weather channel to get the current weather forecast to prepare for inclement weather if needed, to ensure each resident's safety and have an adequate supply of food (at least 2 weeks' worth) or needed supplies available in case Direct Care Staffs or supervisor is unable to get out and make the purchases.
- If there are residential homes of the agency nearby and there is a food shortage, Direct Care Staff should first use the emergency food supply and/or if needed borrow supplies from other locations of emergency food purchased by the agency to share supplies until the disaster are over. All borrowed items should be made a record of so all parties can be reimbursed. If all possible contact the supervisor, guardian, or conservator first.
- If Direct Care Staffs are on a shift during inclement weather and it is too bad for staff to leave the shift or relief from a family member from the shift, staff must first try to contact their immediate supervisor.
- If there is a power outage, Direct Care Staff should use the weather band radio or battery-operated radio in the home to keep current on the news and latest updates. Staff should use the home's emergency supplies until electricity is restored or until another location is identified by a supervisor.
- During inclement weather If a supervisor cannot be reached, Direct Care Staff must call the nearest medical facility if there is a medical concern or shortage of medications or dial 911. Direct Care Staff should explain the situation without breaching confidentiality, such as giving the individual's full name, until the location is reached, and the proper documentation is completed.
- All staff including supervisors should have at least a half or a full tank of gas in the vehicle that individuals are being transported in at all times. Staff should always carry a blanket in the vehicle in case a vehicle gets stalled, stranded, or malfunctions. There should always be a first aid kit, fire extinguisher, insurance card, PCP, and health information.

- Staff should keep a copy of the emergency protocols in vehicles at all times in the event of an emergency or natural disaster in the community.

Caring Steps Solutions Protocols For Emergencies

- When reporting an emergency of any kind, staff must speak to a live voice. Staff should follow the emergency numbers posted in each location or each home binder of the individuals and/or persons supported. Staff should call their immediate supervisor first and continue calling the numbers in order on the emergency protocol list.
- In emergencies involving law enforcement and/or police, staff should identify themselves and explain the situation to the police officer. Staff should inform the police the individual is with Caring Steps Solution, a provider agency for the state and/or another contracted agency. Staff should not give out too much information to ensure there is no breach of confidentiality or violate any OSHA violations. Staff must then contact their immediate supervisor to inform him/her of what is going on so they can be instructed on what to say to the police.
- If possible, the supervisor will speak directly to the police. Staff should wear their name badge as applicable or have identification at all times in the community or in the individual home where the staff is working. If an individual has broken the law, it is at the police's discretion what should be done. If an individual is taken downtown the supervisor must be contacted immediately to instruct staff to refer to the incarceration procedure.

If an emergency requires staff to call 911, this is considered a reportable incident. Staff should call the on-call supervisor. If the on-call supervisor does not return the call within (15) minutes, follow the emergency protocol to reach one of the on-call backups for assistance.

If an individual is taken by ambulance the ambulance driver must always be given the supervisor's on-call cell number or the staff member caring for that individual in case the ambulance change route.

If an emergency happens that is a natural disaster, staff should refer to the inclement weather policy posted in the home binder in their assigned work location.

Staff should document all incidents as required. Please refer to and follow protocols. Document properly all phone calls and the nature of the emergency throughout the incident.

SEE Contact numbers during an emergency of any kind including reportable incidents and injuries:

Care Steps Solutions Disaster Plan Policy Policy# 101422

CARING STEPS SOLUTIONS SAFETY POLICY DURING A DISASTER EMERGENCY.
STAFF WILL HAVE A PROTOCOL ON WHAT TO DO IN AN EMERGENCY.

During an emergency, staff on duty should refer to the agency emergency protocol for emergency numbers, and listings and refer to the procedures below specifically for the individuals supported.

Scope

This plan is to ensure the safety and well-being of the individual being supported. The function of the plan is to outline a specific plan for safety in case of an emergency or incident of any kind. Staff should always be alert and aware of their surroundings at all times. Bathroom, kitchen, and laundry room doors if applicable should remain closed in case of a fire. If an unforeseeable disaster occurs such as a fire, tornado, or bomb threat, or requires an emergency room visit, the following steps should be followed.

Fire

In case of a fire, staff should yell for help. If a fire occurs in the kitchen staff should wake up the individual outside of the home through the window, patio, or front door if possible. If the fire is small and it is safe enough to use a fire extinguisher, staff should get the fire extinguisher and aim directly at the fire at a safe distance sweeping from side to side until the fire is out or fire has been contained enough to evacuate safely as indicated in the evacuation manual. Once the staff is outside of the home, staff should go as far away from the building as possible and call 911. If a fire occurs in the living room or hallway near the front of the home, staff will first wake the individual and open the window and “yell loudly” for help. Staff should go to a designated area for safety. If the fire is not contained and smoke is filling the room staff and individuals should go out the window or door in another room or empty room and proceed out the window or door. If there is not enough space to go out the window staff will break out the window by kicking out the window and putting each individual through the window one at a time as safely as possible. If the individual is refusing, staff should grab the individual carefully covering her

in her blanket, and proceed through the window. If a fire occurs in the bedroom staff should get the fire extinguisher, remove the pin, aim at the fire, and spray by sweeping back and forth as indicated in the disaster/training manual. Always close the door behind you, if you have gotten in a safe location and place a towel or place something under the door to prevent smoke from coming into the room.

Tornado:

In case of stormy weather during tornado season, staff should keep the weather ban radio on at all times. If a tornado warning is given, staff should move the individual away from the window and take the individual into the bathroom, closet, or doorframe away from windows with the weather ban radio until the warning has been lifted.

Bomb Threat:

If there is a bomb threat, staff should remove the individual from the building as quickly as possible and proceed to remove the individual from the area by a vehicle as far away from the location as possible.

An Emergency Incident Requiring An Ambulance:

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Find Safe Spots In Your Home.

Staff should identify and discuss with the person supported the safest place in an earthquake in the home and tell the person supported to go there immediately if they feel an earthquake. The safest place is an interior room of the home without any windows, such as a bathroom or closet. If possible, take cover under something sturdy, like a heavy table.

Practice Earthquake Drills.

Once staff have and been trained on the earthquake evacuation plan and talked with the person supported about it, it's time to practice. Practicing earthquake drills will help person supported to understand what to do and how to stay safe during an earthquake.

Drop, Cover, and Hold On.

If inside, drop to the ground and take cover under something sturdy like a desk or table if staff feel an earthquake. With one hand hold on to the object and with your other arm protect both head and neck. If staff doesn't have anything sturdy to take cover under, crouch down next to an interior wall. Stay indoors until the shaking stops and you're sure it's safe to exit.

Find An Open Spot.

If staff and the person supported are outside, the safest place in an earthquake is a clear spot away from buildings, trees, streetlights, and power lines. Staff and persons supported should drop to the ground and stay there until the shaking stops.

If In A Vehicle, Stop.

Pull over to a clear location, stop and stay there with seatbelts fastened until the shaking stops

Chemical Spills

If staff work near chemicals, there is always the risk of a spill. This risk can be reduced and minimized, but it will never completely go away. Take a look at the protocol and/or policy for what to do in the event of a spillage.

Important: If in any doubt following a spillage, contact the local authority and seek medical attention immediately. Never exceed your training or put yourself, or others, at risk. The emergency numbers must remain in the binder for reference for staff to follow.

CHECK THAT NO ONE HAS COME INTO DIRECT CONTACT WITH THE CHEMICAL

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All spillages should be reported in the company incident log, and any medium or large-scale spillages must be reported to higher authorities who can assess the damage and everyone's response

DISASTER CHECKLIST

FOR PARENTS AND FAMILIES



Save the Children®

Get Ready. Get Safe.

Do you have a plan in place to help ensure your children are safe and secure if a disaster strikes? If the worst happens, your children will look to you to know how to react and respond. Use this checklist to help prepare and keep your children safe in a disaster.

MAKE A FAMILY PLAN

Before a disaster strikes, make sure you and your family all know these details to help stay safe.

YOU AND YOUR FAMILY SHOULD DETERMINE:

- Which facilities will be used as shelters in your community in case of emergency
- A designated meet-up location if your family is separated
- A family contact outside of your area who would not be affected by a local disaster

TEACH YOUR KIDS

Your children may need to act in an emergency.

MAKE SURE THEY KNOW THE FOLLOWING:

- Basic personal information to identify themselves if separated from you
- Home phone number
- How to dial 911
- Family's meet-up locations
- How to reach the family's out-of-town contact

HAVE A COMMUNICATION STRATEGY

Communication systems are often unreliable during emergencies. Be sure to have a back-up plan.

- All family cell phones should have "ICE" (In Case of Emergency) programmed into their phone's contact list with all family phone numbers plus out-of-area contacts.
- Remind family members that text messages often get through in an emergency, even when a phone can't.

CREATE A GO KIT

Prepare a backpack or portable bag for each family member with essential hygiene items and contact information in case you need to leave home.

BE SURE TO INCLUDE:

- Each child's contact and medical information
- Recent photos of each child
- Comfort food and treats
- Activity items like books, puzzles and games
- Comfort items like a stuffed animal or blanket

STOCK UP AT HOME

In addition to basic survival items like water, flashlights, a battery-powered radio and extra batteries, have these kid-friendly supplies on hand.

NON-PERISHABLE FOOD

- Nursing supplies
- Formula
- Pre-packaged baby food
- Ready-to-eat canned foods and opener
- Juice pouches
- Non-perishable pasteurized milk
- Dry cereals, protein bars, fruit snacks
- Nuts and nut butters
- Vitamins

MEDICAL SUPPLIES

- Fever reducer
- Antibacterial ointment
- Rash ointment
- Each child's medications

PERSONAL HYGIENE ITEMS

- Baby wipes
- Diapers
- Nursing pads
- Feminine products

CHECK WITH YOUR CHILD CARE FACILITY

Since your children may be at a child care facility when disaster hits, make sure all caregivers have each child's most recent contact info.

Remember to ask the staff about their emergency plans. If they do not have a plan, you may want to ask them to create one.

For more information and support, visit:
www.savethechildren.org/getready