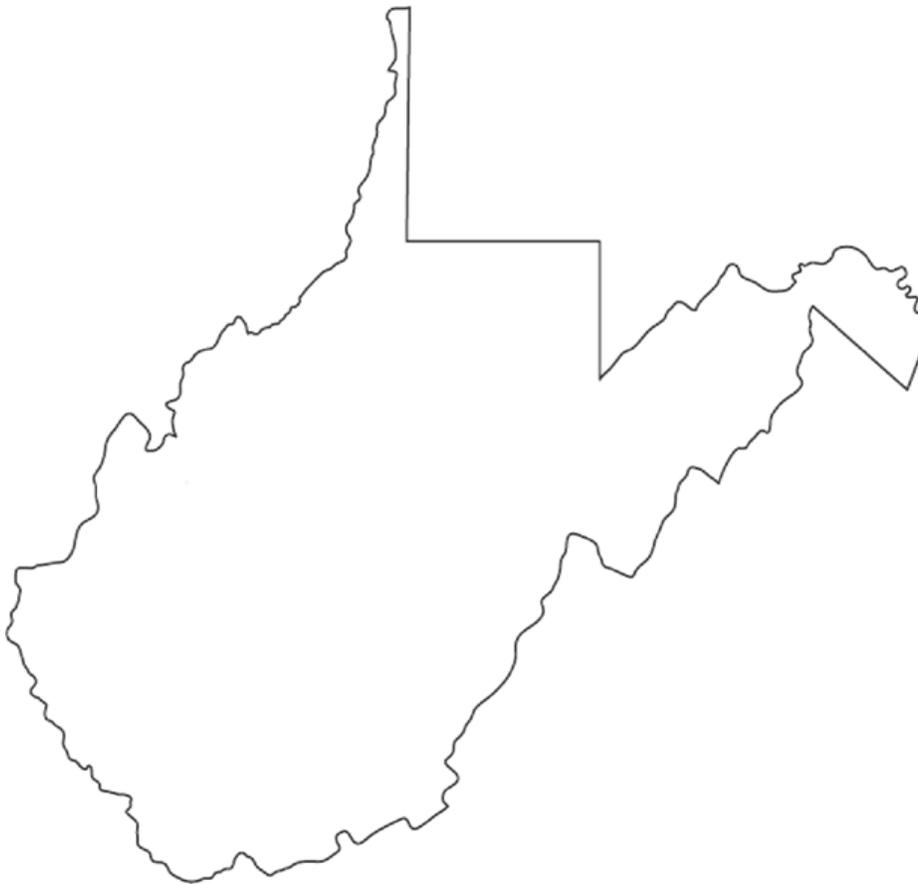




# PERSONAL OPTIONS TRAUMATIC BRAIN INJURY WAIVER PROGRAM ANNUAL TRAINING MATERIAL



## Training Outline

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### A. INFECTIOUS DISEASE CONTROL

#### Occupational Safety and Health Act of 1970 (OSHA)

The purpose of the OSHA regulations are “To assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting the States in their efforts to assure safe and healthful working conditions; by providing research, information, education and training in the field of occupational safety and health; and for other purposes.”

As an employee in Personal Options, you are protected under this Act which states that employers shall furnish a place of employment which is free of recognized hazards that are likely to cause physical harm or death to employees.

The two primary standards that pertain to your work are:

- Blood borne pathogens (BBP)
- Hazard Communication (HAZCOM)
- Blood borne Diseases include:
  - Several strains of Hepatitis including Hepatitis B and C
  - Syphilis
  - Malaria
  - Human Immunodeficiency Virus (HIV)
  - MRSA - Methicillin-Resistant *Staphylococcus aureus*

As an employee you may be exposed to Hepatitis B (HBV), Hepatitis C (HCV), and HIV by coming into contact with body fluids or waste products including:

- Blood
- Urine
- Feces
- Sputum (spit) / Nasal discharge
- Vaginal fluids or sperm

#### Pathogens can be transmitted through:

- Accidental injury by a sharp object including broken glass, exposed dental wires, needles or any sharp object that can puncture or cut the skin.
- Open cuts or skin abrasions.
- Indirect contact from the contaminated item with the mucous membranes of the mouth, eyes, nose or open skin.



Since those infected may not exhibit any symptoms the best way to avoid exposure to pathogens is through the use of Standard or Universal Precautions. **Treat all blood and body fluids as if they are known to be infectious.**

You may reduce risk of exposure by:

- Following Standard Precautions – always have a barrier between any infectious substance and your skin, eyes, gum or the inside of your nose.
- Use of Personal Protective Equipment (PPE) such as gloves, gown, mask or eye shields when providing care.
- Good hand washing techniques.
- Not drinking, eating, smoking, applying cosmetics or lip balms or handling contact lenses when in a situation where exposure may occur.
- Do not store foods and drinks near possibly contaminated items.

- Good housekeeping techniques such as frequenting wiping down possibly contaminated items such as beds, toilet or shower seats, wheelchairs, walkers, and eating areas.
- Use of tongs and a broom and dust pan to clean up broken glass, contaminated food or waste products.
- Handling soiled laundry with gloves and laundering as soon as possible.

Hazard Communication (HAZCOM) involves proper use and storage of hazardous chemicals which you may encounter as an employee. You will want to read how to use the cleaning supplies for your protection. Some of the cleaning supplies you may be exposed to in your work will be bleach, detergent, cleansers or aerosol sprays.

### Employee Rights related to OSHA Standards:

- You have the right to notify your employer or OSHA about workplace hazards.
- You have the right to request an OSHA inspection if you believe that there are unsafe and unhealthful conditions in your workplace.
- You can file a complaint with OSHA within 30 days of retaliation or discrimination by your employer for making a safety or health complaint.
- Your employer must correct the workplace hazards by the date indicated on a citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records and records of your exposure to toxic and harmful substances or conditions.
- You must comply with all safety and health standards that apply to your work for the participant.
- You may see all OSHA information on the PPL website at [www.PublicPartnerships.com](http://www.PublicPartnerships.com).

Your employer:

- Must maintain an environment that is free from hazards and
- Must comply with all OSHA standards.

If you have any additional questions, please contact your Resource Consultant or PPL at 1-304-381-3100.

### How to use basic First Aid skills to provide immediate assistance to an injured victim to aid in recovery, prevent injury and possible death. During an emergency situation you should:

- **Survey the scene:** Observe your surroundings for possible hazards such as traffic, live electrical wires, broken glass or slippery surfaces
- **Check the victim:**
  1. Verify consciousness or need for assistance.
  2. Ask conscious victim what happened and where they are injured.
  3. Listen carefully to what the victim tells you.
  4. Observe obvious signs of injury such as bleeding.
  5. Note the time when emergency occurred especially in cases of unconsciousness
- **Call for Help:** Call 911 or other assistance as required
- **Perform First Aid:**
  1. Keep victim as comfortable and warm as possible.
  2. Do not move victim to prevent further injury.
  3. Do not perform life-saving procedures such as CPR, unless necessary.
  4. Follow basic first aid procedures as needed.

- **Provide Emotional Support:**
  1. Stay calm.
  2. Listen to victim.
  3. Explain what you are doing to assist them.
- **Report incident to the Resource Consultant as required by Traumatic Brain Injury Waiver Policy.**



### Common Injuries and Accidents

- **Falls**
  1. Attempt to determine if the person fell due to a slippery or cluttered floor or if they may have passed out.
  2. Check for life-threatening problems such as unconsciousness, respiratory arrest, cardiac arrest, severe bleeding, and signs of broken bones, swelling, discoloration or deformity.
  3. Call for help.
- **Cuts and Scrapes**
  1. Determine cause of the cut, remove broken glass, if necessary.
  2. Use Standard precautions to prevent exposure to infection.
  3. Call for help if needed.
  4. Clean cut or scrape with soap and water.
  5. Apply pressure to stop bleeding from cut or to protect a scrape from further injury.
  6. Apply sterile bandage to continue pressure.
- **Broken or fractured bones:** different types of fractures include:
  1. Complete – the break goes completely through the bone.
  2. Incomplete – the break is only a partial break of the bone.
  3. Compound – occurs when a sharp piece of bone protrudes through the skin and can cause serious bleeding.
  4. Simple – break does not go through the skin.
  5. Stress – small crack caused by repeated use of a bone, often caused by osteoporosis.
  6. Symptoms of a fracture are: Bruising, swelling, obvious deformity or pain and tenderness
  7. Call for help if there is a concern that the participant may have a broken bone.
  8. Report the incident to the Resource Consultant.
- **Hemorrhage (Bleeding)** excessive bleeding from an external wound such as a cut or internally from a fall, trauma or ulcer. The person will probably experience pain, tenderness, and/or discoloration to affected area.
  1. Remember to use Standard Precautions.
  2. While waiting for help, have person lie down.
  3. Apply direct pressure with sterile gauze for 5 minutes, adding additional gauze as needed while continuing pressure.
  4. Elevate the wounded area above victim's heart level
  5. If bleeding has not lessened after 5 minutes, apply pressure to artery supplying blood to the wounded area with 3 fingers.
  6. Do not cut off circulation completely.
  7. Provide emotional support while awaiting assistance.
- **Burns** – Before giving first aid, determine if person is in danger of more burns, if so assist victim to stop, drop, and roll. Burns kill the skin layer by layer and are categorized as:
  1. First Degree burns involve only the first layer of skin is dry, painful, and tender to touch; may be caused by mild sunburn, heating pad or hot water bottle. Treat by placing area under cool running water or wrapping with cold wet cloth to decrease pain.

2. Second Degree burns affect several layers of skin, with blistering, swelling, and red skin and cause a great deal of pain to victim. Common causes are scalding hot water or cooking accidents. Treat by immersing area in cold water, blot dry, and keep injured area elevated if possible.
3. Third Degree burns are less painful than second degree burns due to destruction of nerves, but involve all layers of skin to underlying tissues and organs. Keep area elevated if possible, do not remove clothing near injury, and do not apply cold water or medications. Call for help immediately.

### When assisting a burn victim DO NOT:

- **Do not** apply ice to a burn
- **Do not** touch the burn with anything other than a dressing
- **Do not** break or pop any blister
- **Do not** apply butter, oil or lard to burn
- **Do not** remove pieces of clothing that stick to area
- **Do not** give burn victim anything to eat or drink



### When assisting a burn victim DO:

- Remove jewelry or shoes from affected area before swelling makes them difficult to remove.
  - Remember that cold water lowers temperature of burned area and lessens severity of minor burns.
  - Make sure source of the burn is no longer a threat.
  - Have the victim lie down to prevent shock.
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- **Heat exhaustion** is caused by the inability of the body to cool itself by sweating. Victims may complain of weakness, fatigue, headache, dizziness, nausea, profuse sweating or cool, clammy, flushed skin. It is important to remove the victim from heat, remove loose fitting clothing, provide water or Gatorade, sponge victim with cool water, and encourage rest.
  - **Heat Stroke** is a potentially fatal condition which occurs when the body temperature rises above 105 degrees and requires emergency medical treatment. Symptoms include confusion, staggering, unconsciousness, fever, rapid pulse and breathing, and hot, dry, flushed skin. You should call 911 immediately, get person out of heat, and pour cool water over victim or wrap them in cool clothing. If victim is conscious you may give them no more than ½ cup of water
  - **Choking:** In treating a choking victim, you should not intervene as long as they are coughing and may dislodge the obstruction. A choking person will be unable to speak but may nod or use the universal symbol (hand to the throat). In assisting a choking victim:
    1. Stand behind victim with your arms at their waist.
    2. Place one fist with the knuckle of the thumb against victim's midsection, just above the navel but below the breastbone.
    3. Hold fist firmly with other hand and sharply pull both hands up and inward. This is called the Heimlich maneuver. This should be done until object is forced out or victim becomes unconscious.
  - **Hypothermia** occurs when the body temperature lowers to below 96.8 degrees. The frail, elderly, and inactive are most at risk for hypothermia. The first symptom is uncontrollable shivering, followed by dizziness,

lightheadedness, muscle stiffness, and difficulty with movement. If treatment is not provided the victim may have slurred speech, slowed pulse and breathing, confusion, double or impaired vision, and can result in unconsciousness and death. In treating victim you should:

1. Take victim to shelter.
  2. Replace wet clothing with warm, dry clothes as soon as possible.
  3. Place victim near heat source if possible, remembering to raise temperature slowly.
  4. Give warm non-caffeinated beverages if victim is conscious.
  5. Make sure medical attention is provided as soon as possible.
- **Poisoning** symptoms include stomach cramps, pain, nausea or vomiting, convulsions, and loss of consciousness. People may be poisoned by eating spoiled foods, over medicating, inhaling toxic fumes or gases, accidental contact with poisonous plants or insects or ingesting poisonous chemicals.
    1. Call for help; try to determine possible source of poison.
    2. If gas poisoning is suspected open windows and move victim to area with fresh air.
    3. If chemical poison is suspected, do not induce vomiting. Call the **West Virginia Poison Control Center at 1-800-222-1222**.
    4. If you suspect the victim has come into contact with a poisonous chemical or plant wash, clean affected area with soap and cool water, being sure not to touch unaffected areas with possibly contaminated soap and water.

### **Prevention is the best first aid.**

Common accidents can be prevented by:

- Unplugging small appliances, such as hair dryers, irons, electric razors, when not in use
- Make sure bath mats or strips are in place in tubs and shower
- Keep stairs and walkways well lit and free of clutter
- Replace frayed electrical cords and keep cords out of walkways; Remove or fasten down area rugs
- Encourage use of non-skid rubber soled shoes
- Keep fully charged batteries in smoke and carbon monoxide detectors
- Keep medications and poisonous chemicals out of reach of confused clients and small children
- Do not allow smoking in bed, provide supervision as required for a smoking client
- Do not use heating pads in bed or tuck in corners of electric blankets
- Provide a flashlight or battery operated night light at bedside for clients who get up during the night
- Keep bedside commodes easily accessible
- Do not attempt transfers of clients without adequate assistance
- Keeping an emergency backup plan in place

### B. ADULT AND CHILD ABUSE, NEGLECT, AND EXPLOITATION

All Personal Options employees **must report** allegations of Abuse, Neglect, and Exploitation.

The TBI Policy manual requires:

Anyone providing services to a person utilizing the TBIW who suspects an incidence of abuse or neglect, must report the incident to the local DHHR office in the county where the person who is allegedly abused lives.

Reports of adult or child abuse and/or neglect may be made anonymously to the county DHHR office or by calling 1-800-352-6513, 7 days a week, 24 hours a day. This initial report must then be followed by a written report, submitted to the local Department of Health and Human Resources, within forty-eight (48) hours following the verbal report.

**As an attendant, you are considered a MANDATED REPORTER.** In any case where a mandated reporter believes an adult or *child suffered serious physical abuse*, the reporter shall *immediately make a report* to Adult or Child Protective services and the West Virginia State Police and any law enforcement agency having jurisdiction to investigate the report.

Under WV Code the person reporting the allegation is making the report in good faith and is immune from civil or criminal liability.

**An Adult Protective Services (APS) or Child Protective Services (CPS) Worker may be assigned to investigate the suspected or alleged abuse. The attendant is to also report the allegation to the Case Manager (CM) and Resource Consultant (RC). A report written up by the CM or RC is required to be submitted it to APS and the Bureau of Senior Services within 48 hours.**

#### ABUSE

**Abuse is** *“the infliction or threat to inflict physical pain or injury on or the imprisonment of any incapacitated adult or facility resident”*. Abuse may be physical, sexual, mental, verbal or emotional.

#### Who are abusers?

Anyone with whom the person has contact with can be an abuser.

- Caregivers
- Landlords
- Neighbors
- Family or Friends



Most typically, abusers are family members of an elderly, ill or disabled person; such as sons, daughters, grandchildren or spouses. It is very difficult to tell who has a tendency to be abusive. People often act differently when in public compared to their behavior behind closed doors. Most abusers have problems dealing with stress, which is often a trigger for abusive behavior. Some abusers have problems with drugs or alcohol.

#### Types of Abuse

**Physical Abuse** - Intentional use of force against another person; pushing, slapping, pinching, kicking, biting, pulling hair, burning, cutting, forced sexual activity or physical restraints. **Physical abuse is against the law and is a form of assault.**

Signs of physical abuse may be noticeable:

1. Bruising
2. Swelling
3. Skin tears
4. Cuts or scratches
5. Burns
6. Repetitive or numerous injuries
7. Tears or damage to skin around genitalia

**Emotional and Psychological Abuse** – This can take many forms such as threats, ridicule, continual criticism, humiliation, forced social isolation, and destruction of personal belongings and property.

Signs and symptoms of mental abuse can mimic the natural occurrence of aging:

1. Loss of appetite
2. Refusal to eat
3. Lack of movement and activity
4. Social withdrawal and fearfulness
5. Weight loss
6. Dehydration
7. Bowel changes or frequent urinary infections

**Sexual Abuse** – Forcing another person to engage in unwanted sexual activity.

**Financial Abuse** – Often takes the form of being overly controlling of a person's finances, deceiving or misleading a person about their finances, stealing money or possessions or selling property without the person's knowledge or consent.

**The elders or persons with disabilities may be reluctant to discuss possible abuse for many reasons such as:**

1. They are embarrassed.
2. They do want to believe what is happening to them.
3. They are hopeful the abuse will stop especially if the abuser promises never to do it again.
4. They have shame about how family member behaves.
5. They fear being thrown out of home or put into a nursing home.
6. They are afraid if they speak up they will not be believed and things will get worse.
7. They have memory, language or cognition problems.
8. They may mistakenly feel they are to blame in some way for their treatment.

Noticing the signs of abuse is the first step in preventing the re-occurrence of this type of abuse.

### **Facts about Abuse**

- 1.5 million people are abused annually.
- Most abuse is never reported due to fear of being placed in an institution or nursing home.
- Over 60% of those abused are female.

- Over 60% of abusers are family members.
- More than half of home care clients report they have been victims of abuse by personal care aides with theft, verbal abuse and neglect as the most common forms of abuse.
- Abuse occurs when there are no witnesses.
- Violence escalates, once you have hit someone the first time it gets easier to hit the same person again.

### **Warning signs of Child Abuse**

These are some possible warning signs for children who may have been abused. However, just because you see a warning sign, doesn't automatically mean a child is being abused. It is important to look for a pattern of abusive behaviors and warning signs before reporting.

### **Warning signs of emotional abuse in children**

- Excessively withdrawn, fearful, or anxious about doing something wrong.
- Shows extremes in behavior (extremely compliant or extremely demanding; extremely passive or extremely aggressive).
- Doesn't seem to be attached to the parent or caregiver.
- Acts either inappropriately adult (taking care of other children) or inappropriately infantile (rocking, thumb-sucking, throwing tantrums).

### **Warning signs of physical abuse in children**

- Frequent injuries or unexplained bruises, welts, or cuts.
- Is always watchful and "on alert," as if waiting for something bad to happen.
- Injuries appear to have a pattern such as marks from a hand or belt.
- Shies away from touch, flinches at sudden movements, or seems afraid to go home.
- Wears inappropriate clothing to cover up injuries, such as long-sleeved shirts on hot days.

### **Warning signs of neglect in children**

- Clothes are ill-fitting, filthy, or inappropriate for the weather.
- Hygiene is consistently bad (unbathed, matted and unwashed hair, noticeable body odor).
- Untreated illnesses and physical injuries.
- Is frequently unsupervised or left alone or allowed to play in unsafe situations and environments.
- Is frequently late or missing from school.

### **Warning signs of sexual abuse in children**

- Trouble walking or sitting.
- Displays knowledge or interest in sexual acts inappropriate to his or her age, or even seductive behavior.
- Makes strong efforts to avoid a specific person, without an obvious reason.
- Doesn't want to change clothes in front of others or participate in physical activities.
- An STD or pregnancy, especially under the age of 14.
- Runs away from home.

### NEGLECT

**Neglect** is “the failure to provide the necessities of life to an incapacitated adult” or “the unlawful expenditure or willful dissipation of the funds or other assets owned or paid to or for the benefit of an incapacitated adult”.

Neglect may be nutritional, medical, self-inflicted or environmental.

Neglect includes:

- The lack of or inadequate medical care by the service provider and inadequate supervision resulting in injury or harm to the incapacitated member.
- A pattern of failure to establish or carry out a participant’s Participant Directed Service Plan that results in a negative outcome or places the member in serious jeopardy;
- A pattern of failure to provide adequate nutrition, clothing, or health care;
- A failure to provide a safe environment resulting in a negative outcome; and/or
- A failure to maintain sufficient, appropriately trained staff resulting in a negative outcome or serious jeopardy.
- Medication errors and dietary errors resulting in a need for treatment for the member is also considered neglect

**Physical or Emotional Neglect** - includes withholding food, medical care, financial help and support or social isolation.

### EXPLOITATION

**Exploitation** is the mistreatment or misuse of a participant or a participant’s property. Exploitation can be financial, theft or destruction of property.

*Financial exploitation* is illegal or improper use of a person’s or incapacitated adult’s resources. Examples of financial exploitation include cashing a person’s checks without authorization; forging a person’s signature; or misusing or stealing a person’s money or possessions. Another example is deceiving a person into signing any timesheet, attendant log, contract, will, or other legal document.

**As an employee in Personal Options providing direct care services, YOU are a mandated reporter of suspected abuse and neglect.**

Reports by mandated reporters must be made immediately to Department of Health and Human Resources (DHHR). Reports can be made during business hours to local offices and after hours or weekends to the Adult Protective Services Hotline.

Adult Protective Services (APS) is the agency which investigates reports of suspected abuse and neglect. The 24 hour toll free hotline number is: **1-800-352-6513. After reporting APS, be sure to contact the Case Manager and the Resource Consultant.**

### C. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

#### What is HIPAA?

HIPAA is a public law created to increase access to and efficiency of the healthcare system in the US. HIPAA created a national standard to protect individuals’ medical records and other personal health information and gives persons more control over their health information.

HIPAA mandates standards for the protection of health information in how the information is used or shared.

The privacy rule indicated that a person may not use or disclose an individual's health information without permission except for treatment, payment or healthcare operation purposes.

The privacy rule requires everyone to control access to any **protected health information (PHI)**. The privacy rule requires permission from the person to disclose any PHI.

Protected Health Information is not just information of medical conditions.

***As an employee, you should not share any of this information with anyone without written permission.***



### **Protected Health Information is:**

Name, birthday, date of death, admission/discharge information, address, telephone number, email address, Social Security Number, medical records, health plan number, vehicle identification, and photographs.

The participant is **not required** to provide permission for:

Public Health purposes, treatment or healthcare operations, disclosures to designated family members or participant's legal representatives for emergency or disaster, intelligence or national security, etc.

As an attendant you will be required to sign a confidentiality form with your employer that states you will not share any protected information unless given permission by your employer. (Sample of the form)

*"I will not discuss the member's name, or otherwise reveal or disclose information pertaining to the member, except when in direct contact with representatives of APS Healthcare, the West Virginia Bureau of Senior Services, West Virginia Medical Institute, Public Partnerships, LLC, or \_\_\_\_\_ (insert who employee can talk with) \_\_\_\_\_, and then only for the purpose of assisting the member.*

*I hereby acknowledge my obligation to respect the member's privacy and confidentiality of the information pertaining to the member, and to exercise good faith and integrity in all dealings with the member and their personal information in performance of my duties."* **Personal Options, Confidentiality Agreement**

**There are huge penalties** if you do not comply with HIPAA. When working for others, be sure you do not disclose any PHI information about your employer with other employees or family members.

Before sharing any of your employer's information ask...

- If this were my personal information, would I want other people discussing it?
- Is this a violation of the HIPAA Privacy Rule?
- The answer to these questions will let you know the right thing to do.
- If you have additional questions, please contact your Resource Consultant.

***We wish you the best as you provide vital supports to participants in the TBI Waiver.  
If you have any questions, concerns or ideas to improve the program don't hesitate to discuss these with your  
Resource Consultant from PPL.***