HOLY FAMILY HOME CARE

3235DELNA DRIVE

SPARKS, NEVADA 89431

RESIDENT SAFETY PLAN

Goals and Objectives:

1) Systematic and objective monitoring and evaluation of reports of injuries, accidents, and Resident's safety issues.
2) Collaboration of owner/administrator, caregivers, State Agencies and other healthcare providers for comprehensive high quality of care.

Fall Safety Plan

a) Provide orientation and get resident familiarized in a new environment upon admission.
b) Obtain Resident's history of fall and assess for risk of fall.
c) Identify devices used by the resident for mobility and implement the use of it.
d) Provide environment that is free from any obstacles for resident's safety.
e) In case of fall, have resident evaluated by medical professional for any injury and report to MD, family, and any agencies involve in resident's care.
f) Continuous staff training and education about fall management.
g) Fill out Serious Occurrence Report and Sentinel Event form and submit to Corresponding agencies.

Elopement Safety Plan

a) Assess Resident's history of elopement, identify risk of elopement.
b) Provide arm band with Resident's name, facility, the facility telephone number and any relevant health issue.
c) Make staff aware of Residents that are risk for elopement.
d) Have Residents picture taken and keep in their file.
e) Report any incident of elopement to the police department.
f) Report incident to MD, family and other health care agencies.
g) Fill out Serious Occurrence Report and Sentinel Event form and submit to the corresponding agencies.

Bed Sore Safety Plan.

a) Assess Resident's skin integrity upon admission.
b) Assess history of skin breakdown.
c) Report to MD any potential skin breakdown for prevention.
d) Provide mattress that promotes circulation per MD.
e) Provide good Nutrition.
f) Educate Resident how to reposition self on bed frequently.
g) For bed fast Resident, reposition every 2-3 hours.
h) Educate staff on bed sore prevention.
i) Report to MD, family and other health care agencies for skin breakdown.
j) Fill out SOR and Sentinel Event form and submit to corresponding agencies.
k) Provide Home Health Care per MD