Health Trends

July 2024



Medical Emergency Preparedness



d Developmental Service

An **Emergency** situation can happen at any time to anyone anywhere. Being prepared is the best way to handle an emergency. Regular people living and working in the community are usually the first ones on the scene of an emergency which makes them the true first responders (2).

The Centers for Disease and Control Prevention (CDC) recommends every person have some knowledge of how to handle a medical emergency to include first aid education, Cardio-Pulmonary Resuscitation (CPR) training, and the use of an Automated External Defibrillator (AED)(2).



Acquiring these skills is especially important for employees whose work is focused on community caregiving. Emergency situations usually don't happen every day, but when they do occur, it's important for all caregivers to be ready to act fast to save lives.

Common Medical Emergencies

What adds up to an actual medical emergency? The answer is any acute illness or injury that poses a threat to the life or well-being of any individual, so there is no complete list or limits to what a medical emergency could be.

Below is a shortened list of medical emergency warning signs from the American College of Emergency Physicians (1) for the general public:

- Bleeding which cannot be controlled.
- Shortness-of-breath, or respiratory distress.
- Change in mental status or alertness.
- Chest pain.
- Choking.
- Loss of consciousness or dizziness.
- Head or spine injury.
- Severe vomiting.
- Sudden, acute/severe pain.
- Acute injury (motor vehicle accident, burns, near drowning, etc.).
- Accidental ingestion of poison.
- Suicidal or homicidal plan (1).

Medical Emergency Practice Drills

Practice drills give caregivers the opportunity to review necessary life-saving skills which will make them less likely to panic when an emergency occurs (4).

Medical Emergency Preparedness involves planning, training, practicing/drilling, and follow-up sessions.

Practice drills might include a group discussion or verbal review of a case scenario, in addition to the actual physical drill to act out the emergency situation in real-time (3).

A group discussion or verbal review might include:

- · An informal discussion or presentation.
- A review of each person's duties, actions, and responsibilities.
- Review of the step-by-step plan, policy, or procedure by an experienced leader.
- A focus on one medical emergency topic at a time (3)(4).

A practice drill ought to include:

- A replication of the actual medical emergency as closely as possible.
- A "supervisor" at each practice site.
- · Documentation of response times and skills or lack thereof.
- Needed equipment, printed plans, policies, or procedures (3)(4).

A follow-up discussion session might include:

- Review of overall skills performance using constructive criticism and praise.
- · Identification of specific needs or knowledge gaps.
- An action plan to address identified issues or concerns moving forward (3)(4).

Please direct any questions or concerns regarding the Office of Integrated Health Supports Network "Health Trends" newsletter to <u>communitynursing@dbhds.virginia.gov</u>

App of the Month



Accidents happen. That's why it's important to have lifesaving information at your fingertips so you can respond with confidence. The free First Aid mobile app by the American Red Cross puts expert advice for common emergencies in the palm of your hand—from the latest First Aid and CPR techniques to the nearest hospital location. Stay up to date on your lifesaving skills. Receive reminders to re-certify, as well as access to helpful videos, interactive quizzes and other lifesaving information. (App of the Month is not endorsed by DBHDS Office of Integrated Health-Health Supports Network. User accepts full responsibility for utilization of app).

References:

- 2. Centers for Disease Control and Prevention (CDC). (2020a, December). Prepare for everywhere Neighborhood preparedness. Office of Readiness and Response, 1-5.
- 3. Ruttenberg, R., Raynor, P.C., Tobey, S. & Rice, C. (August, 2020). Perception of impact of frequent short training as an enhancement of annual refresher training. New Solutions, 30(2): 102–110. doi:10.1177/1048291120920553.
- 4. Skryabina, E., Reedy, G., Amlôt, R., Jaye, P., & Riley, P. (2017, January). What is the value of health emergency preparedness exercises? A scoping review study. International Journal of Disaster Risk Reduction, 21, 274-283.

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^{1.} Borke, J. and Dugdale, D.C. (2023, January). Recognizing medical emergencies. Medline Plus, National Library of Medicine (NIH), 1-4.

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ABA Snippets ...

I Scream, You Scream - What would you do if the following happened?

A person goes to the kitchen, opens the freezer, closes it, opens it again, and again, screams, kicks it, opens it again, moves everything around, kicks it harder, goes through the cabinets, slams the cabinets, then storms out of the group home.

We do things for a reason. The things we do are behaviors (3). The reasons we do these things, or behaviors, are typically to get something or to get away from something (1). In the example above, one of the behaviors is opening the freezer. Sometimes, the reason for a behavior can be hard to identify. In this case the person wanted ice cream, which is usually in the freezer. When we do something, and we do not get to the reason we are doing it, we tend to do the following until we get what we want or give up (2).

- Do the same behavior again.
 - Open and close the freezer.
 - Maybe it will work this time.
- Try other things.
 - Whining, yelling, hitting, stealing, getting something else (cookies).
 - Maybe doing something different will work.
- Increase force.
 - Slamming cabinets, hitting harder, or yelling louder.
 - Maybe doing it harder, better, faster, or stronger will work.
- Try again later.
 - Maybe it will work if I wait and try again.

This person was seeking ice cream. You may or may not react the same way, but we all go through a similar process when we are denied something we need or want. Think about traffic jams, computer issues, being ignored, needing water, or running out of toilet paper.

All of these are variations of being denied something that is wanted. When someone is denied something, the chances of an emotional outburst or even aggression may increase. Assessing what a person needs or wants and understanding they will go through this process is an important step in knowing how to help them. So, how would you help the ice cream lover in the example? You may contact DBHDS about these efforts via the following: <u>brian.phelps@dbhds.virginia.gov</u>

References

- 1. Cooper, J.O., Heron, T.E., & Heward, W.L. (2020a). Extinction. In J.O. Cooper, T.E. Heron, & W.L. Heward (Eds.). Applied behavior analysis: third edition (pp. 586-589). Pearson Education, Inc. 2. Cooper, J.O., Heron, T.E., & Heward, W.L. (2020b). Functional Behavior Assessment. In J.O. Cooper, T.E. Heron, & W.L. Heward (Eds.). Applied behavior analysis: third edition (p. 628). Pearson
- Cooper, J.O., Heron, T.E., & Heward, W.L. (2020b). Functional Behavior Assessment. In J.O. Cooper, T.E. Heron, & W.L. Heward (Eds.). Applied behavior analysis: third edition (p. 628). Pearson Education, Inc 3. Daniels, A. C. (2007). Other people's habits. Performance Management Publications.

July is UV Awareness Month

July is a good time to raise awareness about Ultraviolet (UV) sun rays being the root cause of most skin cancers. It is important to take precautions while outside in the sunshine.

The American Academy of Dermatology (AAD) Association recommends the public #PracticeSafeSun the year-round by following three simple steps while outdoors:

- Seek shade when appropriate.
- Wear sun-protective clothing.
- Apply a broad-spectrum, water-resistant sunscreen with an SPF of 30 or higher.





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