

First Aid Treatment

| Highlights | Policy Statement |
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| Employee Orientation in BLS and First Aid | <p>Residents and employees who experience minor injuries shall be treated at the facility. If the injuries cannot be treated with basic Red Cross first aid intervention, the emergency medical system (EMS) will be activated.</p> |
| Goal of Staff Training | <p style="text-align: center;">Policy Interpretation and Implementation</p> |
| First Aid Intervention | <ol style="list-style-type: none">1. As part of the initial orientation and training, all direct care staff will complete first aid training.<ol style="list-style-type: none">a. Instructor-led, “hands-on” training will occur initially upon hire and periodically thereafter. Skills for basic first aid shall be reviewed as needed.b. Training shall be up to date with current first aid techniques and knowledge.c. Training and reference materials shall be replaced as necessary.2. The goal of staff training is to enable employees to provide basic life support and/or first aid intervention to injured residents or employees. In the case of life-threatening injuries or situations, the goal is patient stabilization until the EMS arrives.3. Basic first aid intervention includes (but is not limited to) interventions for the following situations:<ol style="list-style-type: none">a. Choking, breathing emergenciesb. Burns (chemical, heat, electrical)c. Cuts, lacerationsd. Bleeding (mild and moderate)e. Shockf. Joint, bone and musculoskeletal injuriesg. Allergic reactions and anaphylaxish. Bites and stings |
| First Aid Manual | <ol style="list-style-type: none">4. Procedures for basic first aid intervention are located in the facility Policy and Procedure. A copy of this manual is kept at each nurse’s station. |
| Contents of First Aid Kit | <ol style="list-style-type: none">5. A first aid kit shall be maintained on crash/treatment cart for use in treating minor injuries. Each kit contains, as a minimum, the following supplies:<ol style="list-style-type: none">a. Assorted Bandages (50-75)b. Fingertip Fabric Bandages (10) Bandagesc. 2” x 2” Gauze Pads (5) – Packs of 2d. 3” x 3” Gauze Pads (5) – Packs of 2e. 2” Gauze Roll Bandage (1) – 2” Rollf. 3” Gauze Roll Bandage (1) – 3” Rollg. Elastic Wrap Bandage (1) – 2” x 5 yd. Bandageh. Triangular Sling/Bandage (1) Bandagei. 5” x 9” Trauma Pad (1)j. Butterfly Wound Closure Bandages (10)k. Alcohol Cleansing Pads (20)l. Antiseptic Cleansing Wipes (10)m. First Aid/Burn Cream Packs (10)n. First Aid Antibiotic Ointment Packs (10)o. Burn Relief Gel 3.5 gm. Packs (6)p. Eye Wash 1 oz. Bottle (1) |

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| | <ul style="list-style-type: none"> q. Castile Soap Towelettes (10) r. CPR Face Shield and Vinyl Gloves (1) Shield, (1) Pair Gloves s. Vinyl Gloves (2) Pairs t. First Aid Tape (1) – 1/2” x 10 yd. Roll u. Cloth First Aid Tape (1) – 1” x 5 yd. Roll v. Bandage Protectant/Finger Cot (50) Cots w. Nickel Plated Scissors (1) 4-1/2” Scissor x. Stainless Steel Tweezer, Slanted (1) 3” |
| Inspection of First Aid Kit | 6. The Director of Nursing Services, or his/her designee, shall be responsible for ensuring that first aid kits are inspected quarterly and that adequate supplies are on-hand at all times. |
| Removal of First Aid Kit | 7. First aid kits may not be removed from their assigned locations except for treatment of the injured, drill exercises, and/or the replenishment of supplies. |
| Emergency First Aid Treatment | 8. Emergency first aid treatment will be provided to injured residents and employees. However, residents and employees have the right to refuse such medical treatment. Such information must be recorded in the resident’s medical record or the employee’s personnel file. For residents who refuse the treatment, the Charge Nurse and Attending Physician shall be notified of the refusal. |
| Reporting and Documentation | 9. Regardless of the nature or severity, any resident’s injury/situation shall be reported to the resident’s Attending Physician and family, and documented in the resident’s medical record. If the resident’s Attending Physician is not available, follow the facility policy for Emergency Physician Care. |
| Seeking Medical Treatment Off-Premises | 10. Injured employees may seek medical attention from their Personal Physician, the facility’s Medical Director, or from a Medical Treatment Center. |
| Reporting/Investigating On-The-Job Injuries | 11. Regardless of the nature or severity of an employee’s injury, all on-the-job injuries must be reported to the employee’s department director or supervisor. |
| Corporate Compliance | 12. All incidents regarding employee injuries must be reported to Corporate office. |

| References | |
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| OBRA Regulatory Reference Numbers | 483.10(b)(11); 483.40(d); 483.75(b); see also OSHA Standard 29 CFR 1910.1030(a) |
| Survey Tag Numbers | F157; F389; F492 |
| Related Documents | Accidents and Incidents – Investigating and Reporting (<i>Resident Safety</i>); Accidents/Incidents (Employee) (<i>Personnel and Staffing</i>); Cardiopulmonary Resuscitation (CPR) and Basic Life Support (BLS); Emergency Physician Care; Heimlich Maneuver; Making an Emergency Transfer or Discharge (<i>Admissions, Transfer and Discharges</i>); Seizure Management |
| Policy Revised | Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____ Date: _____ By: _____ |