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HEALTHY OUTCOMES

April is Distracted Driving Awareness Month.

Most people recognize that texting and driving is dangerous. It is also illegal in PA to read, write, or send a text-based message while driving.

What you might not realize is that the simple act of talking on the phone while driving is also a distraction. When you are talking on the phone while driving, even hands-free, your mind is on the conversation and not on the task of driving. There simply is no safe way to use a cell phone while driving.

Other types of distractions include other passengers, eating or drinking, adjusting music or other vehicle controls, reading, putting on make-up, shaving and even having a pet in the vehicle.



Remember, when you are driving you are responsible for your safety as well as your passengers and other roadway users. Give driving 100% of your attention, 100% of the time. *DebE*

DRIVERS ARE NOT TAKING THIS SERIOUS ENOUGH

Over 84% of drivers recognize the danger from cell phone distractions and find it "unacceptable" that drivers text or send an email while driving. Nevertheless, 36% of the same people admit to having read or sent a text message or email while driving in the previous month.

AAA Foundation for Traffic Safety

Sign up for the monthly

Healthy Outcomes Newsletter:

plbrofee@geisinger.edu

The HCQU works with intellectual disabilities and behavioral health programs in Central PA to provide health care management services for adults with Intellectual/Developmental Disabilities or Autism. Our goal is that all people living in PA, regardless of ability, receive the finest community services available – assuring that they are as healthy as possible and can fully participate in community life. The HCQU works to enhance access to community physical and mental health care through **FREE** education, public health outreach, advocacy, and empowerment as well as to improve health care outcomes. Serving the following counties: Blair, Centre, Columbia/Montour/Snyder/Union, Huntingdon/Mifflin/Juniata, Lycoming/ Clinton, Northumberland, and Schuylkill.

APRIL FALLS DAY: RAISING AWARENESS ON FALL PREVENTION

WE ALL FALL DOWN

Falls are the most common cause of injury and death among people 65 years and older.

Identifying hazards in the home and taking simple steps to correct them may prevent unexpected injuries.

Injury Risk Increases with...

- Changes in vision, hearing, muscle tone and reflexes
- Alcohol consumption
- Medication side effects

Personal Safety – To Do's

- Stay active and healthy
- Know your limits

Kitchen Safety

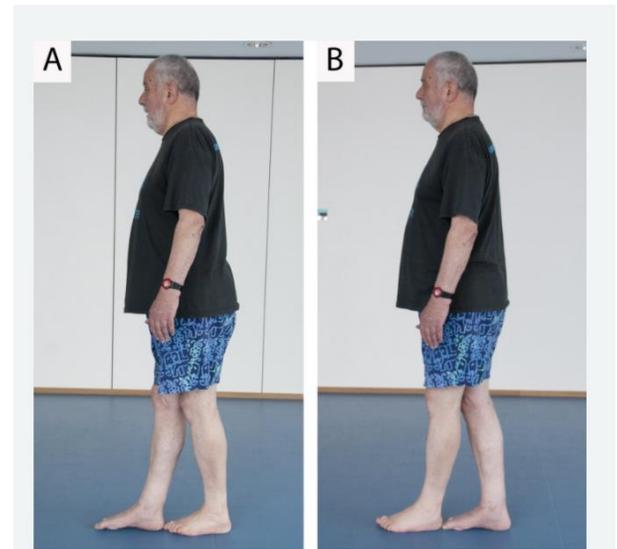
- Avoid cooking in long sleeves
- Use oven mitts or hot pads
- Keep pot handles turned inward
- Have a fire extinguisher close at hand
- Unplug electrical appliances
- Dial 9-1-1 in case of an emergency

Living Room and Hallways

- Install smoke detectors, replace batteries every 6 months
- Provide adequate lighting
- Use light bulb wattage as recommended
- Avoid throw rugs on floors
- Keep hallways, stairs, and doorways clutter free
- Avoid long extension/electrical cords

Continued page 3 ...

While it's not possible to completely prevent a fall, exercises that focus on balance and strength training can reduce the risk of falling. Visit [NHS for simple balance exercises](#) that can be done at home to help improve your health and mobility.



HEEL-TO-TOE STANDING/WALKING

helps keep balance when you have to walk through a narrow space. With fingertips on something solid to help balance, stand heel-to-toe, bend your knees slightly and keep still for ten seconds. Vary the exercise by walking slowly, placing your heel to touch the toe of the other foot.

Contact the HCQU if your agency or Supports Coordination Unit needs training or technical assistance.

Complete our [HCQU REFERRAL REQUEST FORM](#).

FALLS ARE THE LEADING CAUSE OF FATAL INJURY AND THE MOST COMMON CAUSE OF NONFATAL TRAUMA RELATED HOSPITAL ADMISSIONS AMONG OLDER ADULTS.

NATIONAL COUNCIL ON AGING

WHAT'S A FALL RISK ASSESSMENT?

A **fall risk assessment** is used to find out if you have a low, moderate, or high risk of falling. This assessment should be completed upon admission to services, after any change in condition, and annually.

(The Center for Disease Control and Prevention (CDC) and the American Geriatric Society recommend yearly fall assessment screening for all adults 65 years of age and older.)

BE PRO ACTIVE

- 1) *Identify individuals who are at risk of falling*
- 2) *Screen their settings*
- 3) *Assess their risk factors*
- 4) *Develop preventative strategies to protect the individual*
- 5) *Discuss fall risk and prevention with healthcare providers*

WE ALL FALL DOWN *(Continued from page 2)*

Bedroom Safety

- Never smoke in bed
- Check electric blankets for cracks in wiring
- Do not place anything on top of electric blanket, including pets
- Keep space heaters at a safe distance
- Keep bedside light within easy reach
- Place smoke detector outside bedroom door
- Wear snug fitting slippers - no "slides"

Bathroom Safety

- Install handrails/grab bars for tub and shower
- Use a rubber bathmat
- Use a shower chair with handheld shower
- Keep hot water heater between 100 - 120 degrees F
- Use elevated toilet seat
- Use non-skid rugs
- Keep electrical appliances unplugged

Stairways

- Keep stairway clutter free
- Install handrails on both sides of stairs
- Hold handrail while on stairway
- Use adequate stairway lighting

Ladders or Step Stools

- Use wide-based stepstool or ladder
- Do not stand above knee height on ladder
- Confirm base of stepstool ladder is secured
- Tell someone you are going outside to use the ladder

Environmental assessments should be done regularly as part of Fall Prevention. *DebE*

*Deborah Erdman RN MSN CCRN TCRN
Geisinger Outreach/Injury Prevention Coordinator*

Slips, Trips and Falls *Find the words associated with falls.*



Footwear
 Throw Rugs
 Stepstool
 Handrails
 Stairs
 Danger
 Poor Vision
 Confusion
 Injury
 Alcohol
 Balance
 Ladder
 Reflexes
 Trip
 Age
 Medication
 Lighting
 Weakness
 Hazards
 Cords
 Clutter
 Slip

FREE HCQU Online Courses

We are here for your educational credit needs! Our courses are great for DSPs or anyone interested in expanding their knowledge of different healthcare issues. We offer free health-related courses such as Aging and Developmental Disabilities, Allergy Awareness, Bowel Management and Dental Health.

The Alzheimer course has recently been revised. Visit www.geisinger.org/hcqu.

Falls don't just happen, and people don't just fall because they get older. Contact the [HCQU](#) to discuss Fall Prevention training needs for both staff and individuals. Together we can make a difference.



TRAINING OPPORTUNITIES AVAILABLE

Online Dating Safety presented by Sadie Jordan, BA Medical Advocacy Coordinator (One Training-Two Sessions Offered)

While chatting with a stranger may seem new and exciting, we want to make sure that you stay safe and have fun at the same time. During this training, we will review steps you can take to increase your safety when interacting with others through online dating apps and services—whether you are interacting virtually or in person. **Register in advance.**

Online Dating Safety- 10am

When: Mar 29, 2022 10:00 AM Eastern Time (US and Canada)

[REGISTER](#)

Online Dating Safety- 3:30pm

When: Mar 29, 2022 03:30 PM Eastern Time (US and Canada)

[REGISTER](#)

After registering, a confirmation email containing information about joining the meeting will be sent.



Every year, millions of men, women, and children are trafficked worldwide - including right here in the United States. It can happen in any community.

HUMAN TRAFFICKING

FREE RN CEs

WORKING WITH INDIVIDUALS W IDD

April 28th, 2022 10:00 - 11:30 am

Registration is limited to 100 people.

Presented by Sadie Jordan, BA Medical Advocacy Coordinator,
The Women's Center Medical Advocacy Program

[Registration Information Here](#)

WEIS MARKETS

VIRTUAL COOK-ALONGS

APRIL 18TH @1 PM: WHAT'S IN SEASON FOR SPRING?

Join Weis Dietitian Melissa this April to learn about what produce is in season for the spring. Enjoy an informational session followed by a recipe demonstration to show you how to put together an easy spring smoothie.

Recipe:

<https://www.weismarkets.com/recipes/golden-kiwi-smoothie/2262>

Zoom link:

<https://zoom.us/j/91080190537?pwd=Nk5TZHVJRXhMdnlZZHZMcW03SEpzUTog>

Password: 7fdbdcb94f

[VIEW FLYER](#)

[HERE](#)

Golden Kiwi Smoothie



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Our HCQU includes registered nurses experienced in serving individuals with an Intellectual Disability (ID) and/or Autism. Visit our website for their contact information and the counties they support.

[CLICK HERE](#)



A seizure can happen at any time — and learning how to treat a seizure could save a life.

“Seizure Action Plans are meant to guide care in emergencies but are underused. Approximately 70% of persons with epilepsy do not have a Seizure Action Plan.” *Lucretia Long, Epilepsy Alliance America National Program Advisory Committee member*

A Seizure Action Plan (SAP) contains tailored guidelines on how to respond during a seizure, based on the patient’s medical history. It includes health and medical information specific to the patient and helps others recognize seizures and the appropriate steps to take to

keep him or her safe from injury or damage caused by prolonged seizures. [General Seizure Action Plan](#) (fillable)

Rescue Therapy for Seizures

Most people with epilepsy take seizure medications on a regular basis to prevent seizures, but sometimes additional medicines are used. "As needed" medicines are medicines or treatments that are given only if needed for specific situations. These are called **rescue medicines**.

- **Rescue medicines are typically used for seizure clusters, often called acute repetitive seizures, or when seizures are different from a person’s typical pattern, such as more frequent, longer, or more severe.**
- **Rescue treatments are taken "as needed" to try and prevent a seizure emergency from occurring.**
- **Rescue medicines are NOT used instead of daily seizure medicine.**
- **The ideal rescue medicine (1) is easy to use, (2) works quickly, (3) is safe with little to no side effects, and (4) works well.**

Over the past few years, FDA approved nasal spray formulations of the benzodiazepines diazepam (Valtoco — Neurelis) and midazolam (Nayzilam — UCB) have become available to epilepsy patients who experience seizure emergencies, like cluster seizures and status epilepticus. Visit the [Epilepsy Foundation](#) to learn more on Seizure Rescue Therapies.

The information offered in this newsletter is to increase your awareness of health-related situations. It is not intended to be a substitute for professional medical advice. If you believe you or someone you support has a condition, please seek the advice of a physician.