

Madawaska Valley

Association For

Community Living

**POLICY: SCALDING PREVENTION**

**PAGES: 3**

**REVISED: JULY 19, 2018**

**REVIEWED: NOVEMBER 26, 2021**

**APPROVED: JUNE 27, 2013**

**NUMBER: 5-30**

**CATEGORY: SERVICE DELIVERY**

Policy Statement

Madawaska Valley Association for Community Living will ensure that all precautions are taken to prevent the risk of scalding for the people we support.

Procedure

All locations will have their water system processed through a temperature control device set no higher than 49 degrees Celsius. Hot water is regulated through a mechanical thermostat control valve on regular hot water tanks.

Each day, at all locations, staff will:

* Test the water temperature from the bathtub or shower taps in the home with a hand held digital thermometer and document on the nightly checklist.
* Staff will ensure that the water runs for 1 ½ - 2 minutes uninterrupted at the hottest setting, (wide open) prior to testing to ensure that the temperature does not fluctuate within a 5 second period.
* Check water temperature when there have been no showers or laundry done for at least one (1) hour.
* Fill a cup or glass with the hot water and test the temperature while allowing the water to continuously flow from the cup/glass.
* In the event that the testing indicates that the temperature of the water exceeds 49 degrees Celsius, a maintenance request must be completed immediately.
* Staff are to ensure that no person supported is exposed to risk of scalding by tagging the tap or taps with orange flagging tape, to ensure they are not used until the temperature is returned to 49 degrees Celsius.
* The house Manager must be notified in the morning. Over the weekend or Statutory Holidays notify the on-call Manager at 613-635-1352 between the hours of 07:30 – 21:00.
* Document on the daily logs below temperature recording the actions you took.

In the Kitchen

* Never leave items cooking on the stovetop unattended. Cook on the stove’s rear burner whenever possible and turn pot handles toward the rear of the stove.
* Use extreme caution when handling hot liquids and remove persons with no awareness of danger from the work area.
* Staff will not leave their own hot drinks unattended.
* Be aware of cords on electric appliances, so they are not accidentally pulled or burned.
* Follow the printed instructions when microwaving packaged foods. If the instructions say not to microwave the food, take the extra few minutes to warm it conventionally.
* Remove the lid carefully when taking a dish out of the microwave. The steam that has built up inside the dish can cause a nasty burn.
* Stir and test food before serving it to eliminate the “hot spots” often caused by microwaving.

In the Bathroom

* Never put an individual in a tub or shower before testing the water yourself. Test the water with an ungloved hand.
* Persons with Epilepsy or a seizure disorder shall always be supervised while swimming or bathing. When privacy concerns conflict with such supervision, the person will be seated safely in a free draining tub or shower and use a hand-held shower attachment.
* If a scalding burn occurs see the procedure below.

Burn Procedure

* Examine it to see what type of burn it is. The individual may need to see a doctor immediately.
* Check the burn to see if the skin is intact and whether the burned area hurts when touched. The most serious burns are deeper ones with loss of skin and sensation. Seek emergency treatment if you notice discoloration under extensive areas of peeling skin.
* Second and third degree burns leave skin blistered and charred. These burns also required immediate medical attention.
* A first degree burn leaves skin red and slightly swollen. If the burn covers a large part of the body, you need to see a doctor immediately. Otherwise, you can treat a first degree burn at home.

Minor Burns

* **Cool the burn**. Hold the burned area under cool (not cold) running water for 10 or 15 minutes or until the pain subsides. If this is impractical, immerse the burn in cool water or cool it with cold compresses. Cooling the burn reduces swelling by conducting heat away from the skin. Don’t put ice on the burn.
* **Cover the burn with a sterile gauze bandage.** Don't usefluffy cotton, or other material that may get lint in the wound. Wrap the gauze loosely to avoid putting pressure on burned skin. Bandaging keeps air off of the burn, reduces pain and protects blistered skin.
* **Take an over-the-counter pain reliever.** These include aspirin, ibuprofen (Advil, Motrin, others), naproxen (Aleve) or acetaminophen (Tylenol, others).

Minor burns usually heal without further treatment. Watch for signs of infection, such as increased pain, redness, fever, swelling or oozing. If infection develops, seek medical help. Avoid re-injuring or tanning if the burns are less than a year old — doing so may cause more extensive pigmentation changes. Use sunscreen on the area for at least a year.

*Caution*

* **Don’t use ice.** Putting ice directly on a burn can cause a person's body to become too cold and cause further damage to the wound.
* **Don’t apply egg whites, butter or ointments to the burn.** This could cause infection.
* **Don’t break blisters.** Broken blisters are more vulnerable to infection.

Major Burns

Call 911. Until an emergency unit arrives, follow these steps:

* **Don’t remove burned clothing.** However, do make sure the victim is no longer in contact with smoldering materials or exposed to smoke or heat.
* **Don’t immerse large severe burns in cold water.** Doing so could cause a drop in body temperature (hypothermia) and deterioration of blood pressure and circulation (shock).
* **Check for signs of circulation (breathing, coughing or movement).** If there is no breathing or other sign of circulation, begin CPR.
* **Elevate the burned body part or parts.** Raise the burned part above heart level, when possible.
* **Cover the area of the burn.** Use a cool, moist, sterile bandage; clean, moist cloth; or moist cloth towels