Ohio | Department of Developmental Disabilities

Office of MUI/Registry Unit

John R. Kasich, Governor
John L. Martin, Director

Health & Safety Alert #37-01-13

Hot Water Burns

The purpose of this Alert is to heighten awareness to the danger of burns from hot water. The most common hot water burns occur during baths or showers. Scald burns caused by moist heat can result in significant injuries. The following information identifies burn classifications, treatment options, cause and contributing factors and several ways to prevent burns in the future.

Classification of Burns

1st Degree burn – causes redness and swelling in the outermost layers of the skin.

2nd Degree burn – involves redness, swelling, and blistering. The damage may extend to deeper layers of skin.

3rd Degree burn – destroys the entire depth of the skin.

Did you Know?

- Adults will get 3rd degree burns on exposure to hot water in **less than one second** at 160 degrees and between 9 and 10 minutes at 120 degrees.
- Children will get 3rd degree burns on exposure to hot water in **less than ¼ of a second** at 160 degrees and **just over 3 minutes at 120 degrees**.
- Children are at risk as their skin is thinner than that of adults.
- Individuals, who are elderly, may be less sensitive to extreme temperatures so the withdrawal reflex may be delayed.
- The severity of a burn injury depends on the temperature of the liquid, length of time exposed, age of the victim, and the size of the area affected.
- Only cooling stops the skin from burning.

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Treatment

- It is critical to immediately remove non-sticking clothing and apply cool water. This is to begin to cool the skin.
- Wrap the burn loosely in clean cloth. Don't use oils, butter, etc.
- Seek immediate medical attention for all but minor burns.

Causes/Contributing Factors

- Failing to routinely check water temperatures in the home (120 degrees or less).
- Hot water tanks that don't have tempering valves or thermostatic mixing valves (Regular maintenance on these valves 60 – 90 days).
- Failing to test water before individuals enter the bathtub or shower.
- Leaving individuals unattended in the bathtub or shower

Prevention

- Provide appropriate supervision as required to protect individuals during bathing times.
- Make sure all supplies needed for the bath/shower are available prior to entering the bathroom so supervision can be maintained from start to finish.
- Do not allow other interruptions to take away from appropriate supervision (phone calls, doorbells etc…)
- Turn hot water heater thermostat to 120 degrees Fahrenheit or less.
- Install scald resistant faucets, a tempering valve, or a thermostatic mixing valve. (This very simple step is critical to hot water safety and burn prevention).
- Always test the temperature before someone gets in the bathtub or shower. Wait until the tub water is at the depth you want. Test the water with your wrist.

Hot water burns are preventable……Let's work together to help keep everyone safe……!!

For questions or comments regarding the above Alert, please contact the MUI/Registry Unit at (614) 995-3810.

RE-ISSUED: January 2013

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Health and Welfare Alert

Sexual Abuse Prevention and Reporting

#56-02-13

Purpose

The purpose of this alert is to remind those who are involved in providing care, managing programs, investigating or overseeing the investigation of alleged sexual abuse cases about the importance of recognizing the signs of sexual abuse, implementing immediate actions and timely reporting. The Ohio Department of Developmental Disabilities (DODD) has identified these red flags through review of alleged sexual abuse cases and although they are not seen frequently, they are important enough to try and avoid entirely.

For questions or comments regarding this alert, please contact the MUI/Registry Unit at (614) 995-3810.

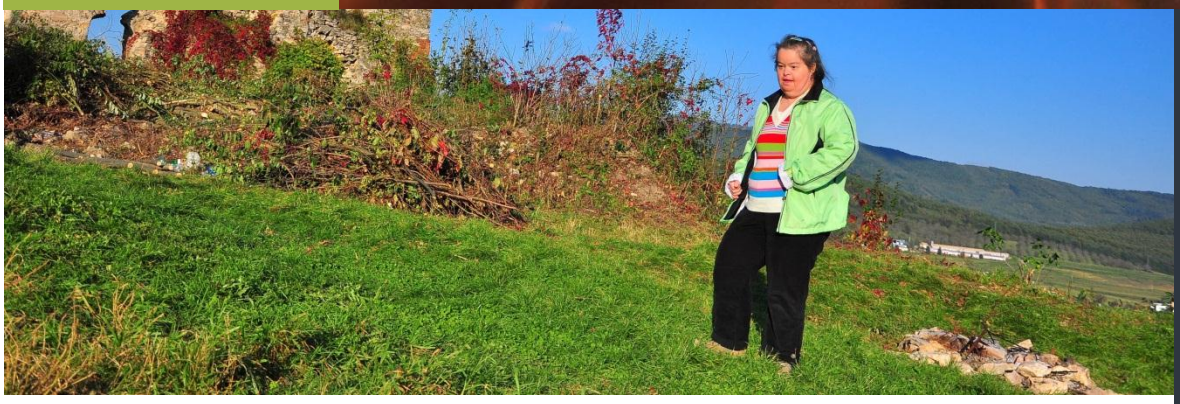
Service providers have duties and responsibilities to protect individuals from harm, including reporting suspected sexual abuse. Unfortunately, sexual abuse is under-reported. This means that incidents of suspected sexual abuse are not reported to the proper authorities as they should. "Sexual abuse" is defined as unlawful sexual conduct or sexual contact as those terms are defined in section 2907.01 of the Revised Code and the commission of any act prohibited by section 2907.09 of the Revised Code (e.g., public indecency, importuning, and voyeurism).

There are different reasons why suspected sexual abuse may not be reported. These include the following:

- The individual may not be able to clearly express what occurred (or is occurring) in ways that others understand.
- The individual may not realize that he or she has been victimized.
- The individual may be afraid to reveal what has occurred.
- The individual's allegations may be dismissed as fabrications or untruthful reports.
- Persons aware of the suspected sexual abuse may be reluctant to get help and remain silent.
- Possible signs of sexual abuse are not recognized or are not fully considered by staff and others close to the individual.
- Staff may fear reprisal if a co-worker is the suspected perpetrator.
- Staff may be uncertain if the actions described or observed constitute sexual abuse.
- Staff may also be uncertain about what to do – how the suspected sexual abuse should be reported, and to whom.

When suspected sexual abuse is not reported, the individual may continue to be victimized and suffer the consequences repeatedly. Needed services and supports to assist the individual in response to such an event cannot then be provided.

Service Providers of all types must be prepared to respond to incidents of suspected sexual abuse. Listed on the following page are basic steps that service providers should take to protect the health and welfare of the person.



Be aware of the possible signs of sexual abuse. This includes but is not limited to:

- Bruising, bleeding, soreness, redness, irritation, itching, and unusual discharges.
- Torn or stained underwear or linens.
- Difficulty in walking or sitting.
- Ongoing and unexplained health problems such as stomach pain.
- Display of new fears.
- Withdrawal from previously enjoyable activities, places, or persons. The person may suddenly avoid these places or people, or display fear or discomfort.
- Changes in sleep patterns such as nightmares, trouble sleeping, sudden bedwetting, and other sleep problems.
- Changes in appetite, loss of appetite, weight gain or loss.
- Resistance to being touched or undergoing physical examination.
- Sudden or marked changes in behavior; for example, aggression, attention-seeking behavior, self-destructive behavior, depression, refusal to participate in activities, clinging to others.
- New sexual knowledge or sexual behavior, including hints about sexual activity.
- Unexplained accumulation of money or gifts.
- Sexually transmitted diseases

Take action if an individual communicates that he or she has been abused. Do not ignore or dismiss any such reports regardless of whether or not they appear plausible. The proper authorities will determine what occurred. **Report according to O.A.C. 5123:2-17-02 to Law Enforcement or CSB and to the County Board of DD immediately but within 4 hours. Immediately protect the individual from continued contact with the Primary Person Involved (PPI).** If the PPI is a staff member, the staff member should be removed from a position of direct contact with individuals. If the alleged PPI is someone other than staff, necessary precautions should be taken to protect others who may be at risk.

Steps to Take

- Get the individual appropriate medical attention.
- Take immediate action to protect the person from further assault
- Report immediately to law enforcement or CSB
- Report to the County Board immediately but within 4 hours
- Sexual assault assessment, when appropriate, should be sought immediately.
- Remember to NOT imply blame on the victim.
- Ask questions like “Were you able to..?” instead of ”Why didn’t you?” when talking to the individual.
- Emotionally support the alleged victim
- Remember to refer the individual for counseling and victim’s assistance as appropriate.
- Notify DODD MUI Unit if the alleged PPI is a County Board Employee. Screen the individual for pregnancy and/or sexually transmitted disease.

More Info

For further assistance regarding sexual assaults contact

Ohio Alliance to End Sexual Violence
888.876.8388

Rape, Abuse and Incest National Network
1.800.656.4673

National Sexual Violence Resource Center
http://www.nsvrc.org/

For Questions or Comments

For questions or comments regarding this alert, please contact the MUI/Registry Unit.

Contact Info

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Health and Welfare Alert Choking #18-04-13

Purpose

The purpose of this Alert is to provide critical information to caregivers on choking prevention. People with developmental disabilities are at a high risk for choking. Those providing care can help reduce these risks, provide timely care, and potentially save a life. This Alert will provide some signs that may indicate a person is choking and what you can do to help.

All DD Employees are required to be trained, annually, on identification and reporting of Major Unusual Incidents and Unusual Incidents prior to unsupervised contact. This training includes the review of any **Health and Welfare Alerts** released since the previous calendar year's training.

For questions or comments regarding this Alert, please contact the MUI/Registry Unit at (614) 995-3810.

Last year, nine Ohioans with developmental disabilities passed away due to choking related accidents. We believe prevention is the key to saving lives. While nine people lost their lives, many more were saved by the fast action of others. In fact in over 350 other cases, a caregiver (family member, staff member or friend) successfully intervened by performing abdominal thrusts or back blows and saved that person's life. We want to provide some information to you about choking and urge you to be prepared in the event that someone you are caring for chokes.

What is Choking? When you breathe air goes through your nose or mouth and then down a tube called the trachea (sometimes called the "wind pipe") and then into your lungs. If food or something else gets into your wind pipe and gets stuck, then the air you need cannot get to your lungs. When that happens, you are choking.

Who is in danger of Choking?
Anyone can choke, but choking is more likely for someone who:

- Has cerebral palsy or a seizure disorder.
- Has few or no teeth, or wears dentures.
- Has trouble chewing or swallowing.
- Does not sit up while eating.
- Someone who is prescribed medications such as muscle relaxants, anticonvulsants or psychotropics, which may delay swallowing or suppress protective gag and cough reflexes.
- Has Gastroesphogeal Reflux Disorder (GERD) which may cause aspiration of refluxed stomach contents.

What Causes Choking? Certain behaviors can cause choking. These behaviors include:

- Eating too quickly.
- Not chewing food completely, so that large pieces remain in the mouth.
- Talking or laughing while eating.

How can you tell if someone is Choking:

- Trying to speak, but are not able.
- Coughing weakly.
- Breathing noisily or making high pitched sounds.
- Turning blue in the face.
- Nail beds turning blue.
- Fainting.
- Moving around a lot and looking very upset.
- Not responding.
- Slumped over in chair where they were eating.
- Wide -Eyed Look on face.

Choking Prevention:

- Cut food into small pieces.
- Encourage individuals to chew slowly and completely before swallowing.
- Do not talk or laugh while you have food in your mouth.
- Use any needed adaptive equipment.
- Do not run or play while you have food in your mouth.
- Eat with other people who can help you.
- Make sure proper supervision is provided.
- Serve food in proper diet texture

Steps to Take if someone is choking:

- **Always follow your First Aid training**
- **If an individual's airway is blocked, have someone call 911 immediately (if another person is unavailable, call 911 yourself) and perform Abdominal Thrust (formerly known as the Heimlich maneuver). This has been extremely successful in dislodging foods.**
- **If an individual is in a wheelchair or has physical characteristics that make it difficult to do Abdominal Thrust, move the individual to a flat, hard surface to ensure the greatest success. Be ready to initiate quick chest compressions to help unblock airway.**
- **Even if the Abdominal thrust is successful, immediately notify a health care professional. It is advisable to have the individual physically checked by a health care professional following the use of these procedures.**

More Info

For further assistance regarding Choking Prevention, please contact:

American Red Cross

http://www.redcross.org/take-a-class

American Heart Association

http://www.heart.org/HEARTORG/

SafeKids USA

http://www.safekids.org/

For Questions or Comments

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