PROCEDURE

TITLE
SAFE BATHING TEMPERATURES AND FREQUENCY

SCOPE
Provincial: Continuing Care

APPROVAL AUTHORITY
Vice President

SPONSOR
Seniors Health

PARENT DOCUMENT TITLE, TYPE AND NUMBER
Policy: Safe Bathing Temperatures and Frequency

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

• To identify consistent practices to ensure that water temperatures of all staff assisted bathing remains within a safe designated temperature range for patients in Continuing Care.

• To identify consistent practices to ensure that regular offering of bathing are offered at a minimum twice a week or more based on the patient's assessed need across Continuing Care Designated Living Option settings.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary) in Continuing Care.

ELEMENTS

1. Bathing Frequency

1.1 All patients in a Continuing Care Designated Living Option setting shall be provided the opportunity for bathing, at a minimum, twice a week by the method of his/her preference and more frequently when determined by the patient's care plan.

1.2 If the patient's preferred method of bathing is deemed unsafe by a health care professional, the service provider shall discuss those concerns with the patient and may develop and implement a managed risk agreement with the patient.
2. **Bathing Equipment**

2.1 Thermometers used for measuring water temperature of all staff assisted bathing shall be:

   a) approved for that purpose; and
   
   b) calibrated and maintained according to the manufacturer's instructions.

2.2 Alberta Health Services (AHS) recommends use of the following thermometers for measuring bathing water temperature:

   a) **integrated tub thermometer**;
   
   b) hand held thermometer; or
   
   c) bath thermometer card (pre-set to measure the acceptable water temperature range of 38 to 43 degrees Celsius).

3. **Safety Precautions**

3.1 The acceptable water temperature range for staff assisted bathing across Continuing Care is 38 to 43 degrees Celsius.

3.2 The care plan will direct the level of supervision the patient requires with all bathing related activities.

3.3 Procedures for bathing and equipment operation shall be readily accessible to staff; a poster identifying temperature limitations and required checks should be placed in bath areas within Continuing Care Designated Living Option settings (refer to Appendix A: Water Temperature Check Process).

4. **Bath Water Temperature Checks**

   **Note:** Refer to Appendix A: Water Temperature Check Process.

4.1 For therapeutic tubs situated in a Continuing Care Designated Living Option setting, check the bath/shower log for the tub to confirm that the hottest flowing water check has been completed and does not exceed 49 degrees Celsius (see AHS Safe Bath Temperatures and Frequency - Hottest Flowing Water Procedure).

   a) If the water temperature has not been recorded, an initial water **temperature check** must be completed prior to use by any patient according to the AHS Safe Bath Temperatures and Frequency - Hottest Flowing Water Procedure.

   b) Where the hottest flowing water exceeds 49 degrees Celsius, ensure the tub is designated out of service according to the AHS Safe Bath Temperatures and Frequency - Hottest Flowing Water Procedure.
4.2 Fill the tub with water:
   a) Turn on the water, using a controlled mixture of hot and cold.
   b) Check the water temperature while the water is running using either the integrated tub thermometer, or if unavailable, use a hand-held thermometer or a bath thermometer card (pre-set to measure the acceptable water temperature range of 38 to 43 degrees Celsius) that has been held in the water until the temperature reading is steady (Check 1).
   c) Fill the tub to an appropriate level for the type of tub used.
   d) Turn off the water.
   e) Swirl water around to ensure consistent water temperature throughout.
   f) Check the water temperature (Check 2), with a hand-held thermometer or bath thermometer card (pre-set to measure the acceptable water temperature range of 38 to 43 degrees Celsius).

Note: The maximum allowable water temperature is 43 degrees Celsius.

4.3 Immediately prior to the patient entering the water, staff shall immerse forearm and hold the inside of forearm in the water for at least five (5) seconds (Check 3).
   a) Water temperature should feel comfortably warm but not hot.

4.4 Record the date, time, and temperature checks on the bath/shower log.

4.5 If not contra-indicated by patient's health or other condition, invite patient to check the water temperature using their forearm (intact skin only) before entering the tub.

4.6 Observe and ask the patient, whenever possible, for any indication of discomfort related to the water temperature:
   a) while getting into the tub; and
   b) during the bath.

4.7 Should the patient indicate that the temperature of the water is too hot:
   a) the patient shall be immediately removed from the tub;
   b) steps shall be taken to provide for the patient's immediate comfort and safety;
   c) the patient shall be assessed for any reddening of the skin; and
   d) the water temperature shall be measured and compared to the temperature at Checks One (1), Two (2), and Three (3).
Note: If there is any indication that the patient has been scalded or burned, the patient shall be immediately treated for scalding/burning, and the Site/Unit Manager and/or the most responsible health practitioner and the patient’s family, agent, and/or guardian shall be notified in compliance with AHS Disclosure of Harm Policy. All adverse events shall be reported according to the reportable incidents process, as outlined in the AHS Reporting of Clinical Adverse Events, Close Calls, and Hazards Policies.

4.8 The tub water temperature will be re-adjusted for the patient’s comfort.

a) Staff should place their own forearm in running water and/or submerge forearm in the water and check the water temperature constantly while the tub fills; and

b) once the tub is filled, check the water temperature with a hand-held thermometer that has been held in the water until the temperature reading is steady.

4.9 Where the patient identifies a preference for a water temperature lower than 38 degrees Celsius, this preference shall be noted on the patient’s care plan and communicated to every health care provider.

Note: Temperatures exceeding 43 degrees Celsius are not allowable due to a risk of scalds.

5. Rear or Side Opening Tubs

Note: Refer to Appendix A: Water Temperature Check Process.

5.1 For patient baths in a rear or side-opening tub (e.g., Parker tub), where the patient enters the tub prior to the tub being filled with water, Staff shall:

a) turn on the water, using a controlled mixture of hot and cold;

b) check the water temperature while the water is running using either an integrated tub thermometer, or if unavailable, use a hand-held thermometer or bath thermometer card (pre-set to measure the acceptable water temperature range of 38 to 43 degrees Celsius) that has been held in the water until the temperature reading is steady (Check 1);

c) assist the patient into the tub, and observe/ask the patient for any indication of discomfort related to water temperature;

d) hold forearm in running water and/or submerge forearm in the water and check the water temperature constantly while the tub fills (Check 2); and

e) once the tub is filled, check the water temperature with a hand-held thermometer or bath thermometer card (pre-set to measure the acceptable water temperature range of 38 to 43 degrees Celsius) that has been held in the water until the temperature reading is steady (Check 3).
5.2 Record the date, time, and temperature checks on the bath/shower log.

5.3 Should the patient indicate that the temperature of the water is too hot:
   a) the tub shall be immediately emptied and the patient assisted to exit the tub;
   b) steps shall be taken to provide for the patient's immediate comfort and safety; and
   c) the patient shall be assessed for any reddening of the skin.

   **Note:** If there is any indication that the patient has been scalded or burned, the patient shall be immediately treated for scalding/burning, and the Site/Unit Manager and/or the most responsible health practitioner and the patient’s family, agent, and/or guardian shall be notified in compliance with AHS Disclosure of Harm Policy. All adverse events shall be reported according to the reportable incidents process, as outlined in the AHS Reporting of Clinical Adverse Events, Close Calls, and Hazards Policies.

5.4 The tub shall be re-filled at a lower temperature.

5.5 Where the patient identifies a preference for a water temperature lower than 38 degrees Celsius, this preference shall be noted on the patient's care plan and communicated to every health care provider.

   **Note:** Temperatures exceeding 43 degrees Celsius are not allowable due to a risk of scalds.

### 6. Shower Water Temperature Checks

**Note:** Refer to Appendix A: *Water Temperature Check Process.*

6.1 Staff assisting the patient to shower:
   a) turn on the water, using a controlled mixture of hot and cold;
   b) while the water is running, check the water temperature using a thermometer (Check 1):
      (i) read the exact temperature on the integrated shower thermometer or, if unavailable;
      (ii) hold the hand held thermometer or bath thermometer card (preset to measure the acceptable water temperature range of 38 to 43 degrees Celsius) directly in the flowing water for a minimum of 10 seconds.
   c) immediately prior to the patient entering the shower, staff places their own forearm in the water stream for at least five (5) seconds to check the water temperature (Check 2);
d) if not contra-indicated by patient's health or other condition, invite patient to check the water temperature using their forearm (intact skin only) (Check 3) prior to entering the shower;
   
   (i) if the water check is not performed by the patient, then staff again place their own forearm in the water stream for at least five (5) seconds to check the water temperature (Check 3);
   
   e) observe and ask, where possible, the patient for any indication of discomfort related to the water temperature during the shower.

6.2 Record the date, time, and temperature checks on the bath/shower log.

6.3 Staff shall monitor shower water temperature for patients who demonstrate cognitive impairment by:
   
   a) constantly placing their own forearm in the water stream; and
   
   b) observing and asking, where possible, the patient for any indication of discomfort related to the water temperature.

6.4 Should the patient indicate that the temperature of the water is too hot:
   
   a) the patient shall be immediately removed from the shower, and steps shall be taken to provide for their immediate comfort and safety;
   
   b) the patient's skin shall be assessed for any reddening; and
   
   c) the water temperature shall be measured and compared to the temperature at Checks One (1), Two (2), and Three (3).

Note: If there is any indication that the patient has been scalded or burned, the patient shall be immediately treated for scalding/burning, and the Site/Unit Manager and/or the most responsible health practitioner and the patient's family, agent, and/or guardian shall be notified in compliance with AHS Disclosure of Harm Policy. All adverse events shall be reported according to the reportable incidents process, as outlined in the AHS Reporting of Clinical Adverse Events, Close Calls, and Hazards Policies.

6.5 Re-adjust the water temperature for the patient's comfort and continue with 6.1 and 6.2 above.

6.6 Where the patient identifies a preference for a water temperature lower than 38 degrees Celsius, this preference shall be noted on the patient's care plan and communicated to every health care provider.

Note: Temperatures exceeding 43 degrees Celsius are not allowable due to a risk of scalds.
DEFINITIONS

Agent means the person(s) named and enacted in a Personal Directive who can make decisions on personal matters according to the wishes expressed by the patient.

Bathing means, for the purposes of this document suite only, tub baths, showers, full body sponge baths or bed baths.

Care plan means, a specific health record which identifies the patient’s personalized plan of care.

Continuing Care means, for the purposes of this document suite only, Home Living, Supportive Care, Facility Living/Long-Term Care, hospice, and adult day program spaces.

Continuing Care Designated Living Option (Designated Living Option) means, for the purposes of this document suite only, residential accommodation that provides publicly funded health and social services appropriate to meet the patient’s Assessed Unmet Needs. The level of care is accessed through a standardized assessment and single point of entry process and consists of Designated Supportive Living Levels 3, Designated Supportive Living Levels 4, Designated Supportive Living Levels 4 Dementia, and Facility Living/Long-Term Care spaces.

Family means one or more individuals identified by the patient as an important support and who the patient wishes to be included in any encounters with the health care system, including, but not limited to, family members, legal guardians, friends, and informal caregivers.

Guardian means, for an adult: a) an individual appointed by the Court to make to make decisions on behalf of the adult patient when the adult patient lacks capacity.

Health care professional means an individual who is a member of a regulated health discipline, as defined by the Health Disciplines Act [Alberta] or the Health Professions Act [Alberta], and who practises within scope and role.

Health care provider means any person acting on behalf of Alberta Health Services who is providing a good or a service to a patient, inclusive of health care professionals, staff, students, volunteers and other persons acting on behalf of or in conjunction with Alberta Health Services.

Health record means the Alberta Health Services legal record of the patient's diagnostic, treatment and care information including the care plan.

Integrated tub thermometer means, for the purposes of this document suite only, a device that controls or restricts the hot water for baths or showers. This may include, though is not limited to, mixing valves, scald free taps, and automatic shut-off systems.

Most responsible health practitioner means the health practitioner who has responsibility and accountability for the specific treatment/procedure(s) provided to a patient and who is authorized by Alberta Health Services to perform the duties required to fulfill the delivery of such a treatment/procedure(s) within the scope of his/her practice.

Patient means all persons who receive or have requested health care or services from Alberta Health Services and its health care providers and also means, where applicable:
Staff assisted means, for the purposes of this document suite only, where the patient is not able to bath/shower independently and/or needs assistance from staff to get into or out of the tub/shower.

Temperature check means the bath/shower water has been measured using an integrated bath/shower thermometer, hand-held thermometer or thermometer card. When an integrated bath/shower thermometer or hand-held thermometer has been used, an exact temperature must be recorded. When a bath thermometer card is used, indication that bath/shower water falls within the acceptable water temperature range of 38 to 43 degrees Celsius must be recorded (eg. “✓” or “okay”).

Therapeutic tub means, for the purposes of this document suite only, a tub in which a patient is lifted into or it is fully accessible, often by a side door, which may or may not include a reservoir for water, jets, hydro massage or hydro sound. The patient is assisted to bathe in a therapeutic tub and the water temperature is regulated by the tub and/or the staff member. This is not a residential type tub. Examples include: Arjo, Century, Parker, Rhapsody, Freedom, Advantage, Serenity, Bellentra or Primo tub.

REFERENCES

- Alberta Health Services Governance Documents:
  - Safe Bathing Temperatures and Frequency Policy (#PS-47)
  - Safe Bathing Temperatures and Frequency - Hottest Flowing Water Procedure (#PS-47-01)
  - Reporting of Clinical Adverse Events, Close Calls, and Hazards Policy (#PS-11)
  - Disclosure of Harm Policy (#PS-01)

- Non Alberta Health Services Documents:
  - Continuing Care Health Service Standards (Alberta Health)
  - Long-Term Care Accommodation Standards (Alberta Health)
  - Supportive Living Accommodation Standards (Alberta Health)

VERSION HISTORY

<table>
<thead>
<tr>
<th>Date</th>
<th>Action Taken</th>
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</thead>
<tbody>
<tr>
<td>November 19, 2012</td>
<td>Initial approval/effective</td>
</tr>
<tr>
<td>March 5, 2014</td>
<td>Revision</td>
</tr>
<tr>
<td>November 5, 2014</td>
<td>Revision</td>
</tr>
<tr>
<td>April 7, 2017</td>
<td>Revision &amp; change to title</td>
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## WATER TEMPERATURE CHECK PROCESS

<table>
<thead>
<tr>
<th>Temperature Checks</th>
<th>Bath</th>
<th>Bath Rear/Side Opening Tub</th>
<th>Shower</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hottest Flowing Water for Therapeutic Tubs in a Continuing Care Designated Living Option</td>
<td>maximum water temperature of 49° Celsius</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Ensure the hottest flowing water has been measured for each therapeutic tub in Designated Supportive Living Level 3, Designated Supportive Living Level 4, Designated Supportive Living Levels 4 Dementia, and Facility Living/Long-Term Care.</td>
<td></td>
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<tr>
<td>Acceptable Water Temperature Range for each staff assisted patient bath/shower</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• maximum water temperature of 43° Celsius</td>
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<td></td>
</tr>
<tr>
<td>• minimum water temperature of 38° Celsius</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>While water is running, using integrated tub thermometer or if unavailable, use hand-held thermometer.</td>
<td>Check 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>While the water is filling, using integrated tub thermometer or if unavailable, use hand-held thermometer.</td>
<td></td>
<td>Check 1</td>
<td></td>
</tr>
<tr>
<td>While the tub is filling, using staff’s forearm to check. Constantly.</td>
<td></td>
<td>Check 2</td>
<td></td>
</tr>
<tr>
<td>While water is running, using an integrated shower thermometer or if unavailable, use a hand-held thermometer.</td>
<td></td>
<td>Check 1</td>
<td></td>
</tr>
<tr>
<td>Once tub is filled, using hand-held thermometer.</td>
<td>Check 2</td>
<td>Check 3</td>
<td></td>
</tr>
<tr>
<td>Immediately prior to patient entering bath/shower using staff’s forearm.</td>
<td>Check 3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immediately prior to patient entering shower and if NOT contra-indicated, using patient’s unaffected forearm. If not performed by patient, then checked using staff’s forearm.</td>
<td></td>
<td>Check 3</td>
<td></td>
</tr>
</tbody>
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