Purpose
To outline practices and accountabilities to ensure water temperatures for resident\(^1\) bathing fall within the established safe water temperature range for all staff-assisted bathing.

Policy Statement
Covenant Health shall provide residents with the opportunity of at least two baths weekly. The resident or his/her family or alternate decision maker shall have the opportunity to choose the type of bathing method (i.e. tub, shower, full body sponge bath, or bed bath). Frequency of bathing, dependent upon resident care needs, will be identified in the resident care plan.

The hottest flowing water temperatures shall not exceed 49 degrees Celsius or fall below the standards as identified under Principles #2. Safe Water Temperatures. Health care providers shall test and monitor water temperature as specified under Principles #3. Monitoring & Documentation.

Prior to assisting with baths and showers, health care providers shall demonstrate competency and knowledge as noted in Principles #5. Thereafter, health care providers are required to demonstrate competency following any policy breach, as deemed required by the supervising health care provider, and as per Standards. (CCHSS 2016 Section 9.2)

Adverse events, close calls and hazards shall be reported as outlined in Principles #6 and in alignment with corporate policy #III-45, *Responding to Adverse Events, Close Calls and Hazards*.

Applicability
This policy and procedure applies to all Covenant Health Continuing Care facilities and staff in the provision of assisted bath/showers and control and maintenance of facility water systems.

Responsibility
Health care providers who are responsible for assisting residents with bathing shall ensure that they adhere to bathing procedures outlined in the recommended reference text books (refer to Corporate policy #VII-B-115, *Clinical Practice Textbooks*) and the principles outlined in this document.

Management at each facility shall designate specific personnel as being responsible for performing the daily water temperature check for therapeutic tubs in that facility; and are in compliance with the applicable standards.

\(^1\) The term “Resident” is inclusive of residents, clients, and patients.
Principles

1. Resident Autonomy and Choice
   1.1 The resident or his/her family or alternate decision maker is given the opportunity to make an informed choice on the type of bath/shower provided. Depending on the facility resources, a bath/shower choice may consist of tub bath, shower, full body sponge bath, or bed bath.
   1.2 All residents 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 resident's care plan.
   1.3 The resident's preference for method and frequency of bathing shall be documented in the resident's care plan.
      1.3.1 Type and frequency of bath/shower is reviewed with the quarterly/annual assessments.
   1.4 For bath or shower privacy, dignity and safety, staff level of assistance will be designated in the resident care plan. Staff will remain in the bath/shower area at all times.

2. Safe Water Temperatures
   2.1 Safe water temperature range for staff assisted bathing shall be established between 38 – 43 degrees Celsius.
   2.2 The hottest flowing water temperature into a therapeutic tub shall not exceed 49 degrees Celsius.
   2.3 Staff assisting with Bath/Shower shall ensure that the water temperature is at an acceptable level prior to the Resident entering the bath/shower.
   2.4 Three (3) water temperature checks shall be performed for each tub bath/shower (refer to Appendix B – Water Temperature Monitoring Procedures).
3. **Monitoring & Documentation** – document on “Bath/Shower (Staff Assisted) Water Temperature Log” (*Appendix A*)

3.1 Thermometers used for measuring the water temperature of all baths and showers shall be:

   3.1.1 approved for that purpose; and
   
   3.1.2 calibrated and maintained according to the manufacturer’s instructions.

3.2 For therapeutic tubs:

   3.2.1 A daily water temperature check of the hottest flowing water at each therapeutic tub shall be performed prior to the first bath of the day in each therapeutic tub in accordance with Appendix B – *Water Temperature Monitoring Procedures*.

   3.2.2 Management at each facility shall designate specific personnel as being responsible for performing the daily water temperature check for therapeutic tubs in that facility.

3.3 The water temperature of each staff assisted bath or shower shall be monitored.

   3.3.1 Health care providers assisting residents with a bath or shower shall ensure that the water temperature falls within the established safe water temperature range of 38 - 43 degrees Celsius, prior to the resident entering the tub or shower.

   3.3.2 For tub baths, water temperature measurement checks shall be performed a minimum of two times in addition to one sensory check.

   3.3.3 For showers, water temperature measurement checks shall be performed a minimum of one time in addition to two sensory checks.

   3.3.4 Where more than one health care provider is assisting with the bath/shower, one staff member shall be identified as being ultimately responsible for regulating the water temperature, performing and recording the water temperature check, and for bathing or showering the resident.

3.4 For common tub/shower areas, water temperature checks shall be documented on the *Bath/Shower (Staff Assisted) Water Temperature Log* (*Appendix A*) or other log approved by the site.

   3.4.1 The bath/shower log shall be kept in the tub/shower room.

   3.4.2 Completed bath/shower logs shall be retained by the site/unit
manager for the current year plus five years, and any other requirements in accordance with the Covenant Health Records Management Policy.

3.5 For baths/showers provided in individual bath/shower rooms, staff shall document the required water temperature checks in a file, book or other appropriate location, as determined by the site/unit manager.

3.5.1 File retention shall be current year plus five years and any other requirements in accordance with Covenant Health Records Management Policy.

4. Water Supply System

4.1 Maintenance staff or designate shall ensure regular and preventative maintenance of water supply systems, including acceptable water temperatures, that provide water to tubs/showers.

4.2 The water supply system shall be monitored, corrected, reported and documented according to legislation, codes and applicable policies and standards and other relevant requirements.

4.3 Maintenance staff or designate shall perform and document a check, according to the mixing valve manufacturer's instructions, of the maximum water temperatures flowing from each tub/shower outlet.

4.4 Forty-nine degrees (49°) Celsius is the maximum allowable water temperature for tub/shower outlets with or without Water Temperature Control Devices in place.

5. Education/Training, and Demonstrated Competency

5.1 Health care providers must receive safe bathing education and training, and be able to demonstrate competency prior to assisting with bathing.

5.2 Health care providers who have received safe bathing education and training shall demonstrate the ability to:

5.2.1 Identify the safe water temperature range;
5.2.2 Adjust the water flow and mixture to ensure water temperature remains within the identified range;
5.2.3 Obtain accurate water temperature measurements; and
5.2.4 Correctly complete required documentation

5.3 Competency will be demonstrated:

5.3.1 following any policy breach;
5.3.2 as deemed required by the supervising health care professional and
5.3.3 in accordance with standards and regulations.

5.4 Maintenance/designated staff shall demonstrate competency regarding the function and proper operation of temperatures gauges, water temperature alarms, control devices, and tub controls as part of orientation and other audit competency evaluations.

5.4 Safe water temperature demonstrations or competency evaluations shall be documented and retained in accordance with Covenant Health policies and established practices.

5.5 Operators/service providers in Continuing Care are responsible for complying with standards (e.g. the Continuing Care Health Service Standards section 15.0), and are also responsible for ensuring that their health care providers (including health care aides) attain and maintain the necessary competencies by:

5.5.1 Supporting the ongoing education needs that are necessary to obtain and maintain the appropriate knowledge skills and abilities to perform the assigned task; and

5.5.2 Ensuring policies, procedures and job descriptions are in place to support safe care assignment processes.

6. Resident & Family Education

6.1 Residents and their family shall receive general information about bath/shower water temperature safety in move-in/transition information packages and shall otherwise be provided with information from time to time as appropriate.

6.2 Information on the offering of bathing twice a week or more as determined by the resident's assessed need(s) and personal preference(s) shall be provided to the resident and family during the move-in/transition period.

7. Incident Reporting

7.1 In the event of an adverse event, close call, or hazard, health care providers shall adhere to the requirements identified in corporate policy #III-45, Responding to Adverse Events, Close Calls and Hazards and the Continuing Care Health Service Standards to ensure that:

- the immediate needs of the resident has been attended to;
- that other care providers, supervisors and management are notified in a timely manner; and
- incidents are reported to external agencies as appropriate.
7.2 As appropriate, adverse events shall be disclosed to the resident and their family per Covenant Health policy #III-40, Disclosure of Adverse Events, Close Calls and Hazards.

7.3 Health care providers shall immediately report to the unit supervisor and Facilities Management;

- any water temperature checks that are above the safe maximum of 49 degrees Celsius;
- where the water temperature cannot be adjusted to be within the safe water temperature of 38-43 degrees Celsius.

7.4 Health care providers are also encouraged to report incidents on the 'Reporting and Learning System' (RLS). Information available @ http://www.compassionnet.ca/Page576.aspx

Definitions

**Alternate decision maker** means a person who is authorized to make decisions with or on behalf of the patient. These may include, specific decision-maker, a minor’s legal representative, a guardian, a ‘nearest relative’ in accordance with the Mental Health Act, an agent in accordance with a Personal Directive, or a person designated in accordance with the Human Tissue and Organ Donation Act.

**Bathing** means, for the purpose of this document, tub, baths, showers, full body sponge baths or bed baths.

**Care plan** means a specific health record which identifies the resident's personalized plan of care.

**Family(ies)** means one or more individuals identified by the resident as an important support, and who the resident 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.

**Informed choice** means that the resident or his/her alternative decision maker is aware of the benefits and risks associated with the choices that they make in regard to resident care.

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

**Staff assisted** means for the purposes of this document only, where a resident is not able to bath or shower independently and/or needs assistance from staff to get into or out of the tub or shower.

**Therapeutic tub** means a tub in which a resident 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 resident is assisted to bathe in a therapeutic tub and the
water temperature is regulated by the tub and/or the staff member. Examples include: Arjo, Century, Freedom etc.

Resources/Related Documents

Covenant Health Corporate Policies:
- #VII-B-115, Clinical Practice Textbooks

References

AHS Safe Bathing Temperatures and Frequency policy, procedure and temperature logs. Effective April 7, 2017

Government of Alberta continuing Care Health Services Standards, 2016.

Government of Alberta Accommodation Standards and Licensing - Long Term Care Accommodation Standards, 2013

Revisions

February 6, 2015
December 6, 2013
### Safe Water Temperature is 38° to 43°C

**Instructions:** When using an integrated or hand held thermometer, enter exact temperature. When using a calibrated bath thermometer card, indicate temperature check is completed by using “Û” or “okay”. Indicate sensory check is completed by using “Û” or “okay”.

<table>
<thead>
<tr>
<th>Date</th>
<th>Client Initials</th>
<th>Client Room #</th>
<th>Hand-held thermometer Temp</th>
<th>Integrated thermometer Temp</th>
<th>THERAPEUTIC TUB</th>
<th>BATH</th>
<th>BATH Rear/Side Opening Tub (e.g. Parker Tub)</th>
<th>SHOWER</th>
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<tr>
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<td>Check 1 Running water Temp, while tub is filled</td>
<td>Check 2 Water Temp, with arm</td>
<td>Check 3 Staff use hand to constantly check water Temp</td>
<td>Check 1 Running water Temp, with arm</td>
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</tr>
</tbody>
</table>

* When not contraindicated, use client’s arm. If not performed by client, staff to check temp with own arm.
HOTTEST FLOWING WATER TEMPERATURE MONITORING PROCEDURE

1.0 Hottest Flowing Water Temperature Check

1.1. For therapeutic tubs in a continuing care living option, the temperature of the hottest water flowing into each tub must be measured prior to the first bath of the day and documented on the bath/shower water temperature log.

1.2. The hottest flowing water into a therapeutic tub in a continuing care living option shall not exceed 49 degrees Celsius.

1.3. Prior to the first bath of the day the staff member:

   a) Turns on the water tap in the tub to hot only (two handle faucet) or the hottest setting (single-handle faucet);
   b) Runs the hot water at the highest pressure until the hottest water temperature is achieved;
   c) Reduces the water flow to a steady stream;
   d) Determines the temperature of the water:
      I. Places the hand-held thermometer into the water stream for at least 10 seconds without interference; removes the thermometer from the water stream and reads the temperature; and
      II. Reads the temperature from the integrated tub thermometer.
      III. If an integrated tub thermometer is not available a second hand-held thermometer check must be completed.
   e) records the date, time, and exact temperature from the hand-held thermometer and/or the integrated tub thermometer on the bath/shower log for that tub.

1.4. It the hottest flowing water is greater than 49 degrees Celsius:

   a) Place an “out-of-service” sign on the tub over the faucet;
   b) The site/unit manager and all other staff working on that shift shall be notified
   c) Maintenance staff shall be notified of the need to recalibrate the water temperature for that tub.

1.5. Once maintenance staff report that the issue has been resolved staff shall:

   a) Confirm that the hottest flowing water temperature is within the acceptable range (no greater than 49 degrees Celsius) by following the procedure outlined in #3 above.
   b) Inform the site/unit manager and other staff working on the unit that the tub is now safe to use.
   c) Remove the “out-of-service” sign from the tub.

The Care Plan will direct the level of supervision the resident requires with all bath or shower-related activities.  
Note a preference for a water temperature lower than 38 degree Celsius on the resident’s care plan.  Bathing below the resident’s baseline body temperature may cause hypothermia in the elderly and is not recommended.
1.0 **Shower**

1.1. Check #1 – While water is running check water temperature using an integrated thermometer, or hand held thermometer, or bath thermometer card (calibrated to the acceptable water temperature range of 38-43 degree Celsius) held directly in the running water for a minimum of 10 seconds.

1.2. Check #2 – Immediately prior to resident entering the shower, staff member places their bare forearm in the water stream for at least 5 seconds.

1.3. Check #3 – As indicated by resident’s health/condition, invite resident to check temperature with their forearm (intact skin only).

   If resident is unable to check, staff again places their bare forearm in the water stream for at least 5 seconds.

1.4. Document the date, time, and temperature checks on the bath/shower log.

1.5. Resident care provider remains in shower area for assistance as required by resident. Observes and asks for any indication of discomfort and takes appropriate action as required.

1.6. Staff shall monitor shower water temperature for residents who demonstrate cognitive impairment by:
   a) Constantly placing their own forearm in the water stream; and
   b) Observing and asking, where possible, the resident for any indication of discomfort related to the water temperature.
   c) Should the resident indicate that the temperature of the water is too hot:
    a) The resident shall be immediately removed from the shower, and steps shall be taken to provide for their immediate comfort and safety.
    b) The resident’s skin shall be assessed for any reddening; and
    c) The water temperature shall be measured and compared to the temperature at Checks 1, 2, and 3.

   Note: If there is any indication that the resident has been scalded or burned, the resident shall be immediately treated for scalding/bURNS and the site/unit manager and/or the most responsible health practitioner, and the resident’s family/agent/guardian shall be notified in compliance with Section 7.0, Incident Reporting.

1.8. Re-adjust the water temperature to meet the residents comfort performing the 3 temperature checks, and continue with the shower if appropriate.

1.9. Clean and disinfect shower chair between uses. Document shower chair cleaning.
2.0 Tub Bath

Prior to the first bath of the day check the bath/shower log for the tub to confirm that the hottest flowing water check has been completed and does not exceed 49 degree Celsius. If the water temperature has not been recorded, an initial hottest flowing water temperature check must be completed prior to use by any resident (refer to 1.0 of this procedure).

2.1 Check #1 – While water is running, check the water temperature using either the integrated tub thermometer, hand-held thermometer, or a bath thermometer card (calibrated to the acceptable water temperature range of 38-43 degrees Celsius) that has been held in the water until the temperature reading is steady.

2.2 Check #2 – Once the tub is filled to an appropriate level turn off water. Staff performs hand/forearm hygiene and places bare forearm in water and swirls water around to ensure consistent temperature. Using hand held thermometer or bath thermometer card (calibrated to the acceptable water temperature range of 38 – 43 degrees Celsius) check water temperature.

2.3 Check #3 – Immediately prior to resident entering the tub, staff shall immerse bare forearm in water for at least 5 seconds. Water should feel comfortably warm but not hot.

2.4 Document the date, time, and temperature checks on the bath/shower log.

2.5 As indicated by resident's health/condition, invite resident to check the water temperature using their forearm (intact skin only) before entering the tub.

2.6 Remain in tub area observe and ask, whenever possible, for any indication of discomfort related to water temperature while the resident is getting into the tub and during the bath. Take any corrective action required.

2.7 Should the resident indicate that the temperature of the water is too hot:
   a) The resident shall be immediately removed from the tub, and steps shall be taken to provide for their immediate comfort and safety.
   b) The resident’s skin shall be assessed for any reddening; and
   c) The water temperature shall be measured and compared to the temperature at Checks 1, 2, and 3.

Note: If there is any indication that the resident has been scalded or burned, the resident shall be immediately treated for scalding/burns and the site/unit manager and/or the most responsible health practitioner, and the resident’s family/agent/guardian shall be notified in compliance with Section 7.0, Incident Reporting.

2.8 Re-adjust the water temperature to meet the residents comfort.
   a) Staff should submerge forearm in the water and check the water temperature regularly while the tub fills, and
   b) Once the water temperature is readjusted, check the water temperature with a hand-held thermometer that has been held in the water until the temperature reading is steady.

2.9 Clean and disinfect tub between uses. Document tub cleaning.
**3.0 Side or Rear Opening Tub**

Prior to the first bath of the day check the bath/shower log for the tub to confirm that the hottest flowing water check has been completed and does not exceed 49 degree Celsius. If the water temperature has not been recorded, an initial hottest flowing water temperature check must be completed prior to use by any resident (refer to 1.0 of this procedure).

3.1 Staff turns on water using a controlled mixture of hot and cold water.

3.2 Check #1 – While foot well is filling check water temperature using integrated thermometer, hand-held thermometer, or bath thermometer card (calibrated to the acceptable water temperature range of 38 – 43 degrees Celsius).

3.3 Assist the resident into the tub and observe/ask the resident for any indication of discomfort.

3.4 Check #2 - Staff performs hand/forearm hygiene and holds bare forearm in running water to check water temperature constantly while tub fills. Swirl water with hand, observes and asks resident for any indication of discomfort. Take corrective action as required.

3.5 Check #3 – Once tub is filled, turn off water. Using hand-held thermometer or bath thermometer card (calibrated to the acceptable water temperature range of 38 – 43 degrees Celsius) check water temperature.

3.6 Document the date, time, and temperature checks on the bath/shower log.

3.7 Observe and ask resident for any indication of discomfort. Take corrective action as required.

3.8 Should the resident indicate that the temperature of the water is too hot:
   a) The tub shall be immediately emptied and the resident shall be removed from the tub, and steps shall be taken to provide for their immediate comfort and safety.
   b) The resident’s skin shall be assessed for any reddening; and
   c) The tub shall be refilled at a lower temperature following steps 4.1 – 4.7.

Note: If there is any indication that the resident has been scalded or burned, the resident shall be immediately treated for scalding/burns and the site/unit manager and/or the most responsible health practitioner, and the resident’s family/agent/guardian shall be notified in compliance with Section 7.0, Incident Reporting.

3.9 If staff or resident add water after resident has entered the bath:
   a) Staff submerge bare forearm in bath water
   b) Observe and ask for any indication of discomfort
   c) Check temperature using hand-held thermometer. Document.

3.10 Clean and disinfect tub between uses. Document tub cleaning.