

The Safety Net

DIVISION OF DEVELOPMENTAL DISABILITIES



DEPARTMENT OF ECONOMIC SECURITY

A Quality Assurance Bulletin

Your Partner For A Stronger Arizona

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Equal Opportunity Employer/Program

Under Titles VI and VII of the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, and disability.

The Department must make a reasonable accommodation to allow a person with a disability to take part in a program service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program of activity because of your disability, please let us know of your disability needs in advance if at all possible.

To request this document in alternative format or for further information about this policy, contact the Division of Developmental Disabilities ADA Coordinator at (602) 542-6825; TTY/TTD Services: 7-1-1.

SCALD INJURY

Scalding Accidents Can Happen to Anyone!

—Sandy Stanley
DISTRICT CENTRAL ALTCS SPECIALIST

Although scald burns can happen to anyone, individuals with disabilities, young children, and older adults are most likely to incur such injuries. Most scald burn injuries happen in the home in connection with the preparation and serving of hot food or beverages and from exposure to hot tap water in bathtubs/showers. Both behavioral and environmental measures may be needed to protect those vulnerable to scalds because of age or disability, and because they normally do not have control of water temperature settings.

Mobility impairments, slow or awkward movements, muscle weakness, fatigue, or slower reflexes increase the risk of spills while moving hot liquids. Burns to the lap are common when a person attempts to carry hot liquids or food while seated in a wheelchair. Moving hot liquids can be extremely difficult for someone who uses a cane or walker.

Sensory impairments can result in decreased sensation—especially to the hands and feet—so the person may not realize if something is “too hot!” Changes in an individual’s cognitive ability, perception, memory, judgment or awareness may hinder his or her ability to recognize a dangerous situation.

The severity of a scald injury depends on the temperature to which the skin is exposed and how long it is exposed. The most common regulatory standard for the maximum temperature of water delivered by residential water heaters to the tap is 120 degrees Fahrenheit (F). At this temperature, the skin of an adult requires an average of five (5) minutes of exposure for a full thickness burn to occur. When the temperature of a liquid is increased to 140° F, it takes only five (5) seconds or less for a serious burn to occur. Coffee, tea, hot chocolate and other hot beverages are usually served at 160° to 180° F, resulting in almost instantaneous burns that may require surgery. Since immediate removal of the hot liquid from the skin may lessen severity, splash and spill burns may not be as deep as burns suffered from a bathtub or shower.

The majority of scald injuries are related to hot tap water and cooking accidents. These are the injuries where we have the most control, as they are completely preventable. The Division expects providers to monitor water temperatures, especially at bathing sources, to ensure the safety of individuals served.

FOR ADDITIONAL RESOURCE INFORMATION:

<http://www.burninstitute.org>

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1934304/pdf/amjpathol005020018.pdf>



DIVISION OF DEVELOPMENTAL DISABILITIES FRAUD HOTLINE

Fraud by a provider, employee or consumer means the intentional deception or misrepresentation made by a person with the knowledge that the deception could result in an unauthorized benefit to the individual or another person. It includes any act that constitutes fraud under applicable Federal or State law. ARS§§13-1802; 13-2003; 13-2310; 13-2311; 36-2918 [www.azleg.gov]

**TO REPORT SUSPECTED FRAUD CALL TOLL FREE
DES/DDD FRAUD HOTLINE: 1-877-822-5799**



BED BUGS - YIKES!!!

Increasing at Alarming Rates!

—Diana Taylor
QUALITY ASSURANCE SPECIALIST

If you have never experienced an infestation of bed bugs — believe me, you don't want to. Lost sleep, itchy, red, weeping sores which, if they get infected, may require antibiotics from your doctor. Then there is the major hassle and expense of getting rid of the little blood sucking pests. Infestations are not always easy to get rid of and may need a team of professionals to do the job, which may cost as much as \$1,000! Ouch!

Here are few simple tips to prevent bed bugs getting into your home:

 If you travel regularly and use hotels/motels, check the room carefully. Look out for dark fecal spots or blood spots on bedding. Check the folds and creases of the mattress. Look for bugs in the closets and drawers before you unpack your belongings.

If you can avoid it, do not take used furniture into your home as bed bugs may be hiding out especially in drawers and bed frames. If you do purchase such an item, check it carefully before taking it home. Clean it thoroughly and use a non-toxic bug spray as a precaution. 

If you have suffered an infestation which has been successfully treated, here are a few tips to help prevent bed bugs from invading your home again:

FILL GAPS & CRACKS: If you have cracks and gaps in walls and floors where bed bugs were found, make sure they are filled in order to reduce hiding places. 

GOOD HOUSEKEEPING: Check & vacuum the bedding and mattresses regularly. Should you spot any signs of bed bugs, treat the area to prevent them from multiplying and spreading.

BED BUG-PROOF COVERS: To protect your box spring and mattress, covers may be a worthwhile investment for both older and new beds. This is a great solution for older beds which may have holes in the fabric where bugs could get inside and become difficult to treat. 

FOSSIL SHELL DUST: Apply a dusting of fossil shell dust along the walls and bed frame along the floor. The product will dehydrate and kill bed bugs. 

BED BUG TRAPS: Placing bed bug traps on chair legs, furniture, bed posts, and elsewhere is another simple and effective way to eliminate bed bugs. They become firmly trapped and unable to escape. 

Bed bug infestations are increasing at alarming rates. If you follow these simple tips on how to prevent bed bugs, you should be able to sleep a little more easy!

FOR ADDITIONAL RESOURCE INFORMATION:

http://www.medicinenet.com/bed_bugs/article.htm

<http://www.mayoclinic.com/health/bedbugs/DS00663>

<http://www.epa.gov/bedbugs/>

<http://www.ca.uky.edu/entomology/entfacts/ef636.asp>



REMINDER: In the event of ANY consumer emergencies,

CALL 9-1-1 IMMEDIATELY!



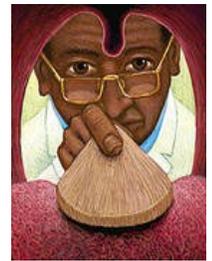
is presented by Division of Developmental Disabilities' Central Office Quality Assurance Unit. Articles are researched and compiled by Quality Assurance staff and Division Managers. Any questions or feedback? Please contact Steven Stencil at SStencil@azdes.gov or 602-771-8113.

SERIOUS COUGH ON THE RISE!

Tdap Vaccination Highly Recommended

—Annette Lammon-Belcher, R.N.
HEALTHCARE SERVICES MANAGER

Whooping cough, also known as Pertussis, is on the rise in babies in California and Arizona. This bacterial infection is very contagious and can be deadly to babies. The source is from teens and adults that are not vaccinated against Pertussis. All teens and adults that may come into contact with babies should be vaccinated with a Tdap vaccination. If you do not know if you have had a recent Tdap vaccination, speak to your health care provider about getting one. This vaccine is covered by most insurance.



For additional information regarding Pertussis from the Center for Disease Control (CDC), go to the following web address: <http://www.cdc.gov/Features/Pertussis/>

BE ALERT!

—LaWanna Bellerive
QUALITY ASSURANCE SPECIALIST

SOME COMMON FOODS NOTED IN CONSUMER CHOKING INCIDENTS

Hog Dogs & Peanut Butter Sandwiches
Apples & Corn & Potato Chips & Peanuts

What can support teams do to reduce an individual's chances of choking?

- Teams can meet together to strategize for ways to keep the person safe during meals.
- Since some individuals do not know, or cannot express, the universal sign for choking (*above*), caregivers should maintain visual-facial contact during meals with individuals who are at-risk for choking.
- Discuss if there are any unaddressed food safety risks and how can they be addressed.
- Additional tasks, such as a med prep, laundry, etc., should be done by an additional caregiver on duty so the caregiver sitting with the individual is not distracted.
- Provide additional training to caregivers regarding the recognition of and emergency response to choking.
- Assess for choking risk and *clearly state what the expectations for caregivers must be.*



Clearly stated interventions help clarify with caregivers specific expectations. Listed below are EXAMPLES of *vague* vs. *clear* interventions:

Vaguely stated: Supervise person during mealtimes.

Clearly stated: Caregiver will sit with person during mealtimes.

Vaguely stated: Observe person during mealtimes.

Clearly stated: Caregiver will keep person in visual-facial contact during mealtimes.

Vaguely stated: Monitor person during mealtimes.

Clearly stated: Caregiver will maintain visual-facial contact and will remind person to chew food or not take too much food.

When identifying interventions to prevent choking incidents, keep in mind that Risk Assessments are not "one-size-fits-all". Individuals are unique, and each plan needs to be tailored to the person.

For menu planning or alternative snack/food choices, you may find WebMD is a great resource: <http://www.webmd.com>.