Burns and Scalds – First Aid and Prevention
The NHSGGC approach

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Royal Hospital for Sick Children

- Burns Team
  - 4 surgeons
  - Burns Nurse Specialist
  - Physiotherapists
  - Dietician/psychology

- Emergency Department

- Burns Ward
  - Cubicles
  - Experienced nursing staff

- Dedicated theatre lists and out-patient clinics
Activity Data 2012

- ~450 emergency attendances/year
- 115 admissions to ward (192 in GRI)

31 hot drink scalds
Extent of injury/Treatment

Yorkhill GRI

Extent of Injury (%TBSA)

Duration of stay 1-14 days

Graft

Dressings

Skin substitutes

Exposed
Burns - First Aid

- Remove from source
- Cool the wound
- Protective dressing/Analgesia

- EMSB Course
  - Cool *running* water for 20 mins
  - Between 8-25°C (Ideally 15°C)
  - Avoid ice

- Cooling is beneficial up to 1 hour post burn
  - Some evidence to suggest benefits up to 2 hours
Benefits of Cooling

- Analgesia
- Reduce tissue temp
- Reduce oedema
- Improved healing

From Nguyen et al. Burns;28:173-6, 2002
Public Awareness

- Intuitive
- First Aid Courses
- Minority cool effectively

from Graham *et al* Burns;38:438-43, 2012
Background

- Multi partnership workshop to consider how bad the burns and scalds issue is in NHSGGC
- Engineering, Environmental, Enforcement, Education and Empowerment prevention options
- Short life working group set up to agree actions
- Consultation carried out with parents, carers and staff in NHSGGC
- Agreement on importance of first aid message and secondary prevention approach
STOP
First Aid for burns and scalds

S  Strip hot clothes and jewellery if possible.

T  Turn on cold tap (never use ice). Run the burn under cool water for 10-20 minutes. Keep the rest of the person warm.

O  Organise medical assistance. Contact NHS 24 - dial 111, attend A&E or dial 999.

P  Protect burn with cling film or clean cloth (NO dressings, fluffy cloth, creams/lotions). Give painkillers.

Keep your children away from these:

Fridge Magnets

Posters
Actions

• Funding secured to purchase first aid fridge magnets
• 50,000 magnets to be distributed across NHSGGC
• Brief Intervention with every family
• Successful event with pharmacists
• Launch with case study 12th June, 2014
  – Extensive media coverage
  – Facebook and Twitter
  – RoSPA and NHSGGC websites
Distribution

- All families with babies at 10 day visit
- All children in Nursery Schools
- Local community venues focusing on ambulant toddlers
  - GP practices
  - Health improvement teams (6 regional teams)
  - Mothers & toddlers groups
  - Pre-5 centres/weaning centres
  - Go Safe Scotland
  - Soft play centres/Schools/swimming pools/sports centres
Evaluation/Further Actions

• Close the audit loop
• Follow-up assessment of pharmacy training
• Assess number of attendances/admissions
  – Needs better data collection (attendances)
• Widen the message nationally
• Research on cold tap temperatures throughout year
• Undertake cost-benefit analysis
• Consider other primary prevention strategies