

What can you do to avoid pressure ulcers?

Look for signs of damage

If you are able, check your skin regularly or ask a relative or carer to do this for you. Do not continue to sit or lie on a red or painful area of skin and avoid rubbing any reddened areas.

Keep moving

One of the best ways to prevent a pressure ulcer is to relieve the pressure by regularly changing your position. This can be as simple as standing and walking on the spot for a few minutes every hour.

If you are sitting, try and lift your bottom off the seat every hour.

If you are in bed, try and change your position without digging your heels into the bed as this can cause damage.

Try not to slide down the bed as this can damage your skin.

Protect your skin

Wash your skin using warm water or pH neutral soap cleansers. Do not rub or massage your skin as this can cause damage.

Do not use heavily perfumed soap or talcum powder.

If you have continence problems, please inform your health care team.

If you are using a splint, a cast or have tubes i.e. oxygen tubing or a catheter next to you skin, check the area under it for soreness and see if its position can be changed to prevent pressure.

Eat a well balanced diet

Aim to eat a balanced diet - having regular meals which include fruit, vegetables,

starchy, protein and dairy foods will help achieve this.

Have a variety of fluids, include at least 6-8 drinks daily. Your health care team may refer you to a Dietitian for advice.

How your healthcare team can help you

Assessment

a member of your health care team will complete a risk assessment to identify if you are at risk. If the health care team are concerned they may refer you to the Tissue Viability Team who are clinical nurse specialists specifically trained in this area.

Surface

following assessment pressure relieving mattresses and cushions will be provided.

Skin assessment

you or your carer will be advised to undertake regular assessments of your skin.

Keep moving

you will be advised about repositioning using the correct equipment.

Incontinence

your skin will be assessed for the presence of moisture and advice will be given to help keep your skin clean and moisturised. A continence assessment may be needed to help manage your continence.

Nutrition

your nutritional intake will be assessed and advice will be given to help you maintain a balanced diet. If you are at risk, supplements may be prescribed and a referral to a dietitian will be discussed with you.

If you suspect you or the person you care for may have a pressure ulcer tell your nurse or doctor as soon as possible.

More information about pressure ulcer prevention can be found at www.your-turn.org.uk

Getting in touch with CityCare

You can feed back any compliments, concerns, complaints or comments by:
T: 0115 883 9654
E: ncp.customercare@nhs.net
W: www.nottinghamcitycare.nhs.uk

If you would like this information in another language or format such as larger print, please contact: **0800 561 2121**

www.nottinghamcitycare.nhs.uk

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Preventing Pressure Ulcers

A guide for patients and carers



CARING FOR YOUR SKIN MATTERS



NHS

Who is CityCare?

We are your local provider of high quality community health services.

We provide quality care you can trust.

We deliver a range of nursing and healthcare services - from health visiting and education for young families, to community nursing and home-based rehabilitation services for older people, to an Urgent Treatment Centre and specialist diabetes and educational nutrition and dietetics sessions.

We have a long heritage of delivering high quality care for you and your family at home, or close to home, in community settings such as health centres, schools and GP surgeries.

As a social enterprise we work in partnership with patients, staff, partners and the local community to build a healthier more sustainable future for all.

The Tissue Viability Service

Our team of specialist Wound Care Nurses provide expert advice on the treatment and prevention of wounds. These include pressure ulcers (bed sores), leg ulcers, moisture lesions, surgical wounds, infected wounds and any other wounds failing to heal.

We give information and support to you and your carers, making sure you get the best possible care to heal your wound.

Many pressure ulcers are easy to prevent and this leaflet explains how.

What is a pressure ulcer?

A pressure ulcer (bed sore) is an area of the skin and underlying tissue which is damaged. This is due to lying or sitting in one position for too long without moving, or by rubbing causing friction.

Who is at risk?

You are at risk if you have:

- **Problems with movement**
if your ability to move is limited, the area of skin you are lying or sitting on too much does not get enough oxygen and can breakdown.
- **Poor circulation**
vascular disease, diabetes and smoking can reduce the blood flow to the skin.
- **Moist skin**
caused by incontinence, sweating or a weeping wound.

- **Previous skin damage**
scar tissue is more vulnerable to pressure as it is not as strong as normal skin making it more prone to breaking down.
- **Poor diet or fluid intake**
lack of fluid may dehydrate your skin.
- **Weight gain or loss**
changes in your weight can increase your risk of developing a pressure ulcer.
- **Reduced sensitivity to pain or discomfort**
some illnesses such as a stroke, diabetes or multiple sclerosis will reduce your ability to feel pain or discomfort and you may be less aware of the need to move.

What should I do if a develop a pressure ulcer?

CityCare is committed to patient safety and is working hard to reduce the number of pressure ulcers which occur in in the community. If you have sustained 'skin damage' due to pressure whilst under the care of one of our services you can be confident that this will be fully investigated and that where appropriate you will be informed regarding the outcome of the investigation in line with Duty of Candour requirements.

Areas of the body at risk of developing a pressure ulcer

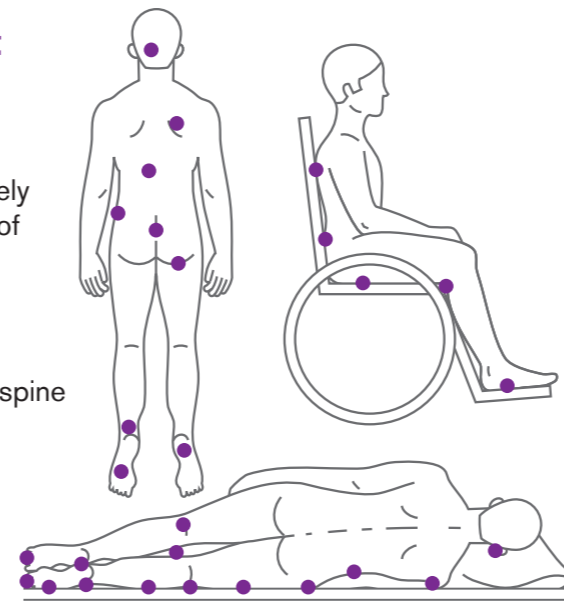
Pressure ulcers are most likely to develop over bony areas of the body.

The areas most at risk are:

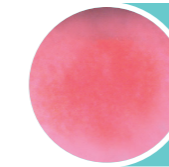
- heels
- buttocks and base of the spine
- elbows
- shoulders
- back of the head
- toes

What to look for

Red or dark patches which do not disappear within 1- 2 hours, discomfort, pain, blistering, numbness, soreness, swelling or hardening of the skin



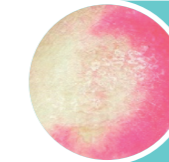
Pictures of skin damage from pressure



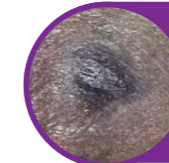
Redness is the first response to pressure.



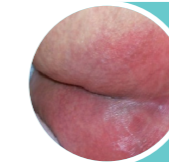
Press finger over reddened area for 15 seconds, then liftup finger. When you take your finger off the area it should turn white/pale (blanche).



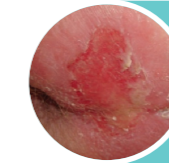
If the area blanches, it is not a pressure ulcer. If it stays red, it is a pressure ulcer.



Darkly pigmented skin does not blanch, signs to look for are purple discoloration, skin feeling too warm or cold, numbness, swelling, hardness or pain.



This is the beginning of a pressure ulcer.



This is scuffed skin from pressure or from sliding down the chair or bed.



This is heel blister caused by pressure.



This is potential pressure damage that could develop into a deep ulcer.