

Pressure Ulcers Prevention in Children

This leaflet offers information about the prevention of pressure damage during your child's time in hospital. If you have any further questions or concerns, please speak to the staff member in charge of your child's care.

What is a Pressure Ulcer?

A pressure ulcer or bed sore is localised injury to the skin and/or underlying tissue usually over a bony prominence caused by two forces: pressure and shear. They are caused by prolonged pressure or shearing against the skin which stops the blood supply therefore damaging the skin or underlying tissue.

Your child may be at greater risk of developing pressure damage whilst in hospital as they are often less mobile due to being unwell or having had an operation.

Pressure damage is a problem as it can result in a wound which may get infected, be painful, cause a longer stay in hospital and restrict your child's mobility further.

The most common risk factors for a pressure ulcer to develop are immobility, weight, continence status, age, reduced nutritional intake, poor circulation and other medical conditions such as neurological conditions.

What are the signs and symptoms?

A pressure ulcer will usually occur over a bony prominence or if there is an external force of pressure such as drains or tubing which

could cause damage to your child's skin. The initial signs of a pressure ulcer can be non-blanching redness or pain over a bony prominence that has sustained pressure.

A pressure ulcer can vary from an area of intact red skin to a wound that extends through all the layers of skin and be very extensive. The emphasis should always be on prevention and early detection, so pressure ulcers do not form.

A pressure ulcer can form in a matter of hours or sometimes damage can occur to the underlying tissue and move outwards towards the skin so may take several days to present.

Looking after your child's skin whilst in Hospital

St George's University Hospitals NHS Foundation Trust is committed to the early assessment of patients and the prevention of pressure damage in our hospitals. Patients and relatives/carers are encouraged to participate in care and decisions regarding the prevention of pressure ulcers. This is because a partnership in care results in better outcomes for the patient.

Correct sitting and lying positions are important, so we may reposition your child more frequently. We may also increase the frequency of nappy / pad checks to reduce the risk of developing moisture lesions / nappy rash.

In the hospital, your child's skin will be inspected regularly, have a pressure relieving mattress and be encouraged to reposition regularly or if unable to change their position independently, they will be assisted by nursing staff/therapists.

Sometimes pressure ulcers are not always preventable and if they develop your child may need management of the damaged skin or

wound with dressings. It is important that the same steps taken to prevent pressure ulcers are continued during the treatment of a pressure ulcer.

You should ask your doctor or nurse if you are worried about pressure ulcer development and always inform a member of staff if you notice any discoloured areas of skin or pain.

What can be done to help?

1. Keeping moving. This is the most important aspect in preventing pressure ulcers. If your child is not able to change their position independently staff will need to assist them in doing so every two to four hours.
2. Sitting correctly. Ensuring your child is sitting well in a chair with a 90-degree angle at their hips and knees. If your child is at risk of developing a pressure ulcer, they should not sit in a chair for longer than two hours at a time.
3. Regular skin inspection and care. Nursing staff/carers should be checking your child's skin at least daily for any signs of pressure damage and maintaining a good skin care regime ensuring the skin is well moisturised.
4. Eating and Drinking. A poor nutritional status increases the risk of pressure ulcer development and can impair healing in any existing pressure damage.

Useful sources of information

European Pressure Ulcer Advisory Panel www.epuap.org

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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