### Incontinence

When skin becomes wet or moist, irritation or soreness may occur. It may become fragile and more prone to skin damage.

Moisture can be caused by incontinence, sweat, or medication. For example, around your child's bottom, skin folds or stoma sites (gastrostomy, colostomy, tracheostomy).

Incontinence is loss of control over your bowel or bladder. A suitable continence product may be used; ensure correct type, size and use for your child's needs.

Remember to avoid soaps and use a nonperfumed PH balanced cleanser instead. Always dry your skin gently and thoroughly and avoid talcum powder.

Barrier creams and products can provide a barrier from moisture, you can discuss with your child's healthcare professional.

### Nutrition and hydration

A well balanced diet will help support healing and prevent deterioration.

In addition to food, fluids should be encouraged to maintain healthy skin, e.g. water, squash or milky drinks.

Not eating well can increase the risk of the skin breaking down, particularly over the bony areas. Being overweight can increase the risk of pressure damage to the skin, and may reduce activity level.

Please tell us if you are concerned about your child's nutritional intake. Advice can be provided and referral to dietician if appropriate.

# Please tell us if

- Your child is not eating very much
- Your child is not moving as much as usual
- Your child is incontinent or has diarrhoea
- You think that your child's bed, chair or cushion is affecting their skin
- Your child sits or sleeps on anything special at home
- You find a red/discoloured/'sore' area of concern on your child's body
- Your child has an underlying medical condition
- Your child is expecting surgery
- Your child has had a pressure ulcer previously

### If you have any queries, please contact: Whilst in hospital:

- Your nurse or doctor
- A tissue viability nurse specialist

#### If you are at home:

- Community Children's Nursing team
- School nurse or Health Visitor
- GP

#### For further information please see:

- NICE guidance www.nice.org.uk/guidance
- European Pressure Ulcer Advisory Panel: EPUAP www.epuap.org
- React to Red / Your Turn Campaign www.reacttoredskin.co.uk
- Stop the pressure http://nhs.stopthepressure.co.uk

University Hospitals Birmingham NHS Foundation Trust



# Think about your S.S.K.I.N

**Everyone is vulnerable** 

For infants, children and young people

### **Building healthier lives**

UHB is a no smoking Trust

### What is a pressure ulcer?

'A pressure ulcer is localized damage to the skin and/or underlying tissue, usually over a bony prominence (or related to a medical or other device) resulting from sustained pressure (including pressure associated with shear). The damage can be present as intact skin or an open ulcer and may be painful.' (NHS Improvement, July 2018)

### What can cause skin damage?

#### Pressure

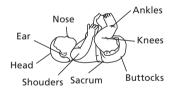
Due to the weight of your child's body pressing on their skin.

#### Friction

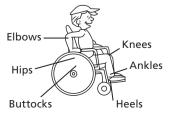
Skin repeatedly rubbed. For example, from ill fitting shoes or clothing.

#### Shear

Movement which stretches the skin and underlying structures. For example, when sliding up /down the bed.



These areas are prone to skin damage, as well as areas of the skin in contact with medical devices.



### What can I do to help? ... Think S.S.K.I.N

### Skin care

Skin should be inspected at least every four hours. If there is evidence of redness or deterioration then the frequency should be increased.

Checking underneath medical devices and giving particular attention to bony prominences such as the shoulders, elbows, hips, bottom, back of the head, ears, heels, between the ankles and knees.

#### "Early inspection means early detection"

#### What to look out for

- Redness that does not fade when you press lightly (for three seconds) and release
- If your child has darker skin, testing for redness is not reliable. Look out for if your child's skin is tight and shiny and may look blue or purple in colour
- Dark areas of the skin that appear hot and painful, or sometimes purplish or maroon, like a bruise - this is known as a deep tissue injury and must be carefully observed
- Any swelling of the skin
- Blistering that does not have any other obvious cause (such as an allergy or burn)

# Surface

Be aware, there are many things that can cause skin damage such as oxygen masks/tubing, ill-fitting shoes, splints, glasses, wheelchairs and seating.

**DO NOT** offer skin massage or rubbing to neonates, infants, and young people.

All equipment should be reviewed if there is any change in skin condition. Further advice can be sought from your child's healthcare professional.

Mattresses and cushions will help but they don't replace the need to "keep moving"!

### Keep moving

Move independently if possible, even small movements are effective such as lifting your bottom or leaning forward.

Changing position two to four times hourly when in bed, using a wheelchair or using any pressure relieving equipment, such as mattresses or cushions helps to relieve pressure on the skin and reduce risk of skin damage.

Using a 30 degree tilt may be helpful. A healthcare professional can help you with this.

