



Great Ormond Street Hospital for Children NHS Foundation Trust: Information for Families

# Looking after your child's skin during a hospital stay

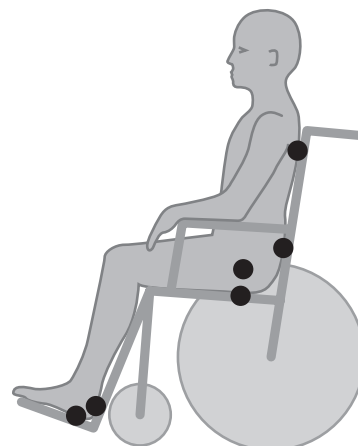
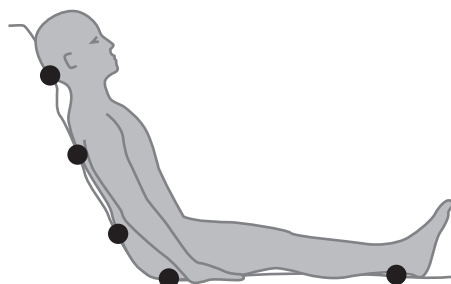
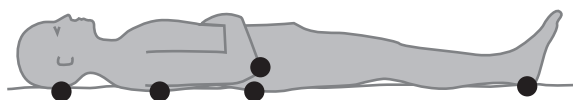
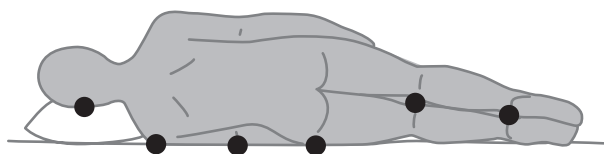
**Our skin is the most important barrier against infection so we need to look after it carefully. Sometimes, for a variety of reasons, people who are unwell develop pressure ulcers. They can be very painful and can lead to complications. Most people think that pressure ulcers only affect older people, but this is not true.**

**At Great Ormond Street Hospital (GOSH), we recognise that children can develop pressure ulcers too, so we have changed the way we work to reduce the chance of our patients developing a pressure ulcer. This information sheet explains about the steps we will take to look after your child's skin while they are staying at GOSH.**

## What are pressure ulcers?

Pressure ulcers (also known as bed sores) happen when there is constant pressure on an area of skin because a person is not able to move or change position. They can also form when there is friction against the skin, for instance, rubbing on a bed sheet. Moisture can also make it more likely for a sore area to start. Areas that can be affected in children include: the back of the head, ears, heels, elbows, base of the spine and the nappy area. Some medical devices, such as nasogastric tubes, splints and CPAP masks, can also cause pressure ulcers.

When a pressure ulcer is first developing, the area can just look a bit bruised. In light-skinned people, the area might look reddened. In darker-skinned people, the area might look darker or purple, blue or violet in colour. The skin might seem shinier than usual and feel 'stretched'. As a sore area develops, the skin might swell, develop blisters or crack. In the worst cases, the skin breaks down to form a deep wound.





## How can we prevent pressure ulcers?

The first thing we will do is look closely at your child's skin as soon as they are admitted. We use an assessment form that helps us measure how active your child is, whether they are able to tell us of any discomfort, whether their blood circulation is good and whether they are in nappies or pads. If we decide that your child is 'at risk', this does not mean that they will definitely develop a pressure ulcer. It just alerts us to put special equipment and nursing care in place to stop one developing.

### If your child is 'at risk'

There are a variety of things we can do to reduce the chance of a pressure sore developing. We will discuss our plans with you as soon as we have identified your child as 'at risk' of developing a pressure sore. Basic details of what care might involve include:

- **Turning and repositioning** – This helps relieve pressure on specific parts of the body. We might turn your child over or reposition arms and legs. We aim to move your child every two hours or more frequently if needed. There will be times when moving your child is not an option, but we will explain if this is the case.
- **Special 'air' mattress** – These are different to regular bed mattresses and also relieve pressure on your child's skin. Again, there are circumstances where an air mattress is not suitable, but we will explain this to you.
- **Protective dressings** – These can help to protect the skin and act as an extra layer of padding between the skin and a device or the bed. They can also help protect from rubbing and you will be given advice on how to use them.

- **Nappy and pad changing** – If your child uses nappies or pads, we will change them more frequently than usual to prevent any moisture building up on your child's skin. We also use creams and sprays to protect against moisture and nappy rash.

- **Aqueous cream** – We use this instead of soap when we wash your child, as it is moisturising but not greasy. It is particularly useful if your child develops nappy rash, as it is non-irritating. If you use specific products to wash your child, please tell us about them and bring in a supply if you want to continue to use them.

- **Barrier cream or spray** – This helps protect the skin against urine, faeces and sweat and comes as a cream or a spray.

If your child develops a sore area, we will ask our Tissue Viability team to review it. They will suggest how to treat the sore area, which could involve special dressings that encourage healing. Very rarely, the area may need a surgical procedure to help it heal and we would make a referral to our Plastic Surgery team to advise on this.



## How you can help us

Please tell us if your child has a history of pressure ulcers. At GOSH, we practise 'family centred care', which means that we like you to continue caring for your child in hospital in the same way you do at home if you feel able. When you are washing and dressing your child, you can help us by looking closely at your child's skin and telling us about any changes to your child's skin.

You can also help us when we are turning or repositioning your child, helping us with moving them and telling us about favourite sleeping positions, for instance. Creased or rumpled bed sheets can rub so please straighten them if they become messed up when moving your child.

Please encourage your child to move if they are able, as this will reduce the risk of pressure sores. A good balanced diet and hydrating fluids are especially important for those at risk of developing a pressure ulcer. If your child is on special feeds or under the care of a dietitian, please let their team know.

If you have any questions about pressure ulcers and what we are doing to prevent them, please ask your nurse or ask them to contact the Tissue Viability team.