What can I do to avoid pressure ulcers?
There are many ways of reducing the risk of pressure ulcers.

**Keep moving:** Changing your position regularly helps prevent the build up of pressure. If you have limited movement the health care team looking after you will assist you with regular turns in addition to providing specialist mattresses/cushions.

**Look for signs of damage:** check your skin for pressure damage at least once a day. Look for skin that doesn’t go back to its normal colour after you have taken your weight off it. Do not continue to lie on skin that is redder or darker than usual. Also watch out for blisters, dry patches or cracks in the skin.

**Protect your skin:** wash your skin every day using warm water or skin cleansers. Avoid using heavily perfumed soap or talcum powder, as these can soak up the skin's natural oils leading to vulnerable dry areas of skin. If you suffer from incontinence please inform your health care team so they can provide advice regarding pads and barrier preparation to prevent soreness.

**Eat a well-balanced diet:** make sure you eat a healthy balanced diet and drink plenty of fluids.

What should I do if I develop a pressure ulcer?
Tell your doctor or nurse as soon as possible and follow the advice they give you.

Eat a healthy balanced diet.

How can I help reduce healthcare associated infections?

Infection control is important to the well-being of our patients and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming in to or after leaving the ward. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.
What is a pressure ulcer?
A pressure ulcer is an area of damage to the skin and underlying tissue.

Sometimes known as pressure sores or bed sores

What causes pressure ulcers?
Pressure ulcers are caused by a combination of:

Pressure: Normal body weight can squash the skin in people at risk and damage blood supply to the area, which can lead to tissue damage.

Shearing: Sliding or slumping down the bed/chair can damage the skin and deeper layers of tissue as a result of shearing.

Friction: Poor lifting and moving techniques can remove the top layers of skin. Repeated friction can increase the risk of pressure ulcers.

Who is most at risk of developing pressure ulcers?
You may be at risk of developing pressure ulcers for a number of reasons including:

Problems with movement: your ability to move may be limited or you may be unable to move. This may be due to a variety of reasons.

Poor circulation: vascular disease or heavy smoking may affect your circulation.

Moist skin: you may be at increased risk if your skin is damp, due to incontinence, sweat or a weeping wound. It is important that your skin is kept clean and dry.

Problems with sensitivity to pain or discomfort: some conditions (e.g. diabetes, stroke) and some treatments (e.g. epidural pain relief, elastic anti-embolic stockings) may reduce your sensitivity to pain or discomfort so that you are not aware of the need to move.

Previous scar tissue: scar tissue will have lost some of its previous strength and is more prone to pressure damage.

Inadequate diet or fluid intake: poor diet may cause you to be malnourished. Lack of fluid intake may lead to dehydration. Losing too much weight can lead to loss of padding over bony points.

Risk Assessment
Risk Assessment: To assess your risk of developing pressure ulcers, the nursing team looking after you will examine you and ask you some questions. This will help to identify if you require a specialised mattress/cushion and will assist in planning your care.

Early signs of a pressure ulcer
Change in skin colour, redder or darker
Heat
Discomfort or pain
Blister
Skin damage

Without appropriate intervention the damage may worsen, developing into hard black tissue or as an open wound.

Common locations of pressure ulcers