Stop pressure injuries using **SSKIN**



Check for:

What to do:

SURFACE

- · Review all surfaces (eg. mattresses and seat cushions are not 'bottomed out' and covers are clean and intact)
- No additional covers over seat cushions. and only one sheet on mattresses
- · Air-mattresses are on correct individual weight setting and air-cells are working
- · At risk individuals: use pressure reducing or alternating air mattresses, seat cushions and heel lift devices; or "float" heels using pillows
- · Clean mattresses and seat cushions regularly
- · Keep clothes and sheets wrinkle free



SKIN INSPECTION

- RED SKIN ALERT = Stage 1 pressure injury is red intact skin that stays red when pressed. On dark skin feel for heat, cool, hard or boggy skin
- · Hips, heels and sacrum are the most common pressure injury sites
- Check skin and under devices/clothing for red areas and bruising

- Document skin inspections
- · Ask individuals to report any sore areas and inspect these
- · Remove all pressure off pressure injuries
- · Keep skin clean and use the skin care guide
- Report RED SKIN and DO NOT massage red areas as this will increase damage
- · Do not dress residents in clothing or footwear that cause pressure and skin marking



KEEP MOVING

- · Individuals who cannot reposition or mobilise are at most risk
- · Safe handling techniques: slide sheets, transfer belts and hoists. Watch slings as they can cause skin pressure!
- Encourage individuals to move and reposition themselves regularly
- Reposition immobile individuals in bed at least every two hours and hourly in chairs using the 30° lying position
- Use a pillow between knees and ankles to prevent pressure

INCONTINENCE

- · Check skin for damage from urine or faeces
- · Continence pads fitted correctly and changed according to the 'wetness indicator'
- · The correct pads are used for morning, afternoon and night
- · Night pads are placed from 8.30pm

- · Keep to a regular toileting regime
- · Encourage fluids
- · Fold pads length-wise before applying to shape and aid absorbency. Loosen leak guards to prevent leakage
- AVOID SOAP. Use Sorbolene for skin washing and apply a thin layer of Dimethicone to inner thighs and buttocks to protect skin from urine or faeces

NUTRITION

- · Declining nutritional intake and recent weight loss increase the risk of developing pressure injuries. Loss of appetite may be due to illness or side effects of medication, swallowing issues, ill-fitting dentures, and gum and mouth infections
- Individuals' hands are cleaned before eating
- Reduced food or fluid intake, or loss of weight = monitor daily food and fluid intake. Involve Dietician per policy
- · Serve nutritional supplements (e.g. Ensure, Complan, Fortisip) chilled and in small volumes during day to ensure they are consumed
- · Perform regular mouth inspections and daily oral hygiene

Adapted by Mandy Pagan from multiple sources including the NZ Wound Care Society, in partnership with ACC, HQSC and MOH, for the Southland Wound Program 2018



facebook.com/cubro.co.nz

nz.linkedin.com/company/cubro

twitter.com/Cubro_NZ

Get in touch

Cubro has a wide range of pressure care solutions. For advice on what would work best, get in touch with our experienced team of clinical experts, equipment specialists and occupational therapists today on 0800 656 527 or email sales@cubro.co.nz