

Pressure ulcers, also known as bed sores, are areas of damage to the skin and the tissue underneath it as a result of pressure on the skin. They usually develop on skin that covers bony parts of the body such as heels, ankles, tailbone and hips.

This leaflet is for front line care workers and explains who's at risk of developing pressure ulcers, what you need to look out for and how can you reduce the risk. You can use it to develop your own knowledge or as a reminder in your day to day work.

What are pressure ulcers?

They can be extremely painful and can even be life threatening if left untreated.

They can often be prevented which is why it's important that you know who's more at risk, how to look out for them, prevent them and what to do if someone does develop one.

If pressure ulcers are the result of neglect, poor care or they aren't treated properly, this is a **safeguarding** issue. This could have serious consequences for you and your employer.

What are pressure ulcers?







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If you support someone with personal care look out for:

- Ω part of the skin becoming discoloured (people with pale skin tend to get red patches, while people with dark skin tend to get purple or blue patches)
- Ω discoloured patches not turning white when pressed
- Ω a patch of skin that feels warm, spongy or hard
- Ω pain or itchiness in the affected area.

Any of these could be early signs of a pressure ulcer and the person should contact their GP or nurse. There are photos you can check with on the React to Red Skin website at www.reactoredskin.co.uk.

Ge ed ca ad ce ed a e f e e a :	
	red, swollen skin
	pus coming from a pressure ulcer or wound
	cold skin and a fast heartbeat
	severe or worsening pain
	confusion that's unusual for them; a change to their usual level of understanding and/or behaviour
	a high temperature (fever) of 38C (100.4F) or above.



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Social care and health services should do a risk assessment around developing pressure sores for each individual.

Anyone at risk should have a 'tissue viability' care plan which might include monitoring the individual's skin and using preventative measures, such as regular repositioning or pressure relieving cushions or mattresses.

if their care plan doesn't include this, talk to the individual and your line manager. If someone is accessing care and support in their own home or has limited mobility, their GP should do this risk assessment.

