

# SSKIN Pressure Ulcer Risk Assessment

(For non-digital areas not yet using ASSSKINGME risk assessment)

**SSKIN +ve** if a patient says yes to **any** of below, plan person centred care in accordance with [Best Practice Statement - Prevention of Pressure Ulcers](#) and for patients with **new or existing pressure ulcers** - implement [Pressure Ulcer Core Care Plan](#).

- Inpatients - commence [SSKIN Care Bundle](#) and reassess risk **daily** (long term inpatients can be reassessed weekly if **considered low risk**)
- Community Nursing – [commence SSKIN Care Plan](#) – reassess risk as per care plan

**SSKIN –ve** if no to all below

- Inpatients - reassess pressure ulcer risk **daily**
- Community Nursing – reassess pressure ulcer risk as per clinical judgement (on each visit if considered at risk)

Document Risk Assessment outcome (SSKIN +ve or SSKIN –ve) within relevant patient record.

## Skin Inspection

- Do you have an existing/previous pressure ulcer, redness or a hot/painful area?
- **Observation** - blanching, discolouration, moisture damage, dry, thin skin, oedematous, clammy, age (elderly/children). Think Check Protect Refer (CPR for Feet)

## Surface

- Do you have or require equipment for pressure relief - cushion, mattress, heel off-loading devices?
- **Observation** - Is the patient a wheelchair user?

## Keep moving

- Are you unable to reposition yourself? Do you have reduced mobility today?
- **Observation** - Is there any equipment in place that may cause friction, i.e. tubes, masks, tapes for securing devices? Is surgery planned - reducing mobility?

## (In)continence

- Do you have any continence issues (urine/faeces) or have excessive sweating?
- **Observation** - is there any redness or irritation to the skin?

## Nutrition

- Do you need assistance with eating and drinking? Tell me about your diet?
- **Observation** - is the patient obese, underweight, MUST >2?

**Judgement** In your clinical judgement is this person at risk of developing pressure damage?

- Consider increased awareness towards conditions including: diabetic, frail and/or elderly, PVD, cardiac/respiratory/renal failure, acutely unwell, in pain, surgical procedure, end of life, neurological, motor/sensory impairment, MS, CVA, paraplegic, anaemia, smoker.
- Medication - cytotoxic, anti-inflammatory, long term/high dose steroids.
- Long term **mobile** inpatients with **intact skin**, assess if SSKIN Care Bundle required.