

How to keep yourself safe

What you can do to reduce your chances of developing common avoidable conditions or harm.

Patient Information Leaflet

Below you will find some information and simple steps you can take to help yourself or someone you care for. If you have any questions please speak to your nurse or doctor.

Reducing the risk of falls

What is a fall?

A fall is when you lose balance unintentionally and it causes you to fall to the floor. Falls can happen at any age but they are more common as we get older.

Some people may be prescribed medications that can increase the risk of them falling. Patients recovering from illness or surgery may be at a higher risk of falling until they feel better. If you've fallen recently, are unsteady on your feet, or have a fear of falling, please speak to staff.

- We can keep your bed low if it helps you feel secure.
- We will keep the call bell within reach and other essential items nearby so you don't have to stretch to reach for them.
- Have you suffered broken bones before? You may need a bone density scan that will look at the health of your bones.

What can I do to help myself or how can my carer help?

1. Make sure you can see clearly (lighting should be good).
2. Have your eyes tested every two years. If you wear glasses keep them clear of dust and smudges.
3. Check for obstacles or clutter that might trip you up and report any liquid spillages straight away.
4. Clothes should fit well – check trousers and nightdresses are the right length, not too long and dressing gown belts aren't dangling.
5. Footwear is low heeled, fastened to the foot and the correct size. If you are in hospital and you do not have slippers, slipper socks that have grips on the sole can be provided to stop you slipping.
6. Take your time when moving especially if you've just woken up or

are getting up from a sitting position. Sit on the edge of the bed for a moment before you stand.

7. Exercises can improve your strength, balance and confidence. Chair-based exercises can help if you cannot walk at the moment. If you are worried about walking on your own, ask someone to go with you until you feel confident.
8. Make sure you have the most appropriate equipment (for example, walking aids and grab rails). Ask your therapist, nurse or doctor if you are unsure or ask someone to help you until you feel confident again.
9. In some cases, the use of bed rails can be helpful, but not in all. Although bedrails might make you feel safe, they can also create problems such as:
 - Someone trying to get out of a bed with bedrails may try to get over the rails and fall from a greater height, or may become trapped in the bedrails.
 - Bed rails can restrict your ability to get in and out of bed and can therefore reduce your independence.

If you do have a fall, don't panic. Call for help and do not try to get up straight away.

Prevention of pressure ulcers

What is a pressure ulcer?

A pressure ulcer, sometimes called a pressure sore or bed sore, is an area of damage to the skin and underlying tissue, caused by prolonged pressure to any part of the body.

The first signs that pressure damage may be developing is usually discoloured skin, blisters, swelling or hot/cold patches which may become progressively worse.

People who sit for long periods, have long term conditions or are recovering from an illness or surgery can be more at risk of

developing a pressure ulcer.

Muscle tissue is more likely to be affected, so the damage may be under the skin which you cannot see.

An ulcer can develop in as little as a few hours, but can take up to a year to heal.

The surface of skin does not have to be broken for damage to happen underneath.

What can I do to help myself or how can my carer help?

1. Change your position as often as you can, from common pressure areas such as elbows, hips, bottom and heels. For example, when in bed alternate between lying on your back and side and if you can, when sitting, stand for at least one minute every half an hour. If you have pain, ask for pain medication.
2. Sit or lie on clean, dry, crinkle free sheets.
3. Check your skin for signs of pressure damage at least once a day. If skin is darker, redder or more sore than usual, do not continue to lie or sit on that area and tell your carer, nurse or GP. People with darker skin tones are less likely to have visible reddening of the skin.
4. Use mild and baby soaps (as these are pH balanced), that do not dry out the skin. Dry carefully, without rubbing hard, especially between the toes, groin and under the breasts. Keep your skin moisturised by applying a simple moisturiser. Avoid talcum powder. If you have sore areas seek advice.
5. If you suffer from incontinence it is important to wash your skin with a gentle soap.
6. Please inform your therapist, nurse or doctor if you feel you have a problem with incontinence.

Prevention of a blood clot

What is a blood clot?

Blood clots can happen to anyone but are more likely if you are unwell, less active or dehydrated. Blood becomes more 'sticky' and can form a clot. You cannot see it because it is deep within the veins, often in the legs.

This is known as a deep vein thrombosis (DVT). If a piece of the clot breaks away, travels through the bloodstream and lodges in the lung it is known as a pulmonary embolism (PE). This is serious and can be fatal.

What should I do if I think I'm at risk?

If you are known to be at risk of developing a blood clot you may have been:

- prescribed medicines to help prevent a clot forming.
- given special stockings to help the circulation in your calves and legs.

You should take your medicine and wear the stockings as you've been directed.

Let your therapist, nurse or doctor know immediately if you have any pain or swelling in your leg or if you suddenly experience a shortness of breath which is not normal for you.

What can I do to help myself or how can my carer help?

1. It is very important to keep the circulation moving in your lower legs. Keep as active as you can.
2. If you are less mobile it's a good idea to do gentle leg exercises.
3. Try moving your ankles around in a circular motion and moving your toes up and down especially if you are chair bound.
4. If bed bound flex your feet so you can feel your calf muscles stretching every few hours.

5. Smoking can increase the risk of a blood clot. If you do smoke you can get help to stop. Ask a healthcare professional for information.
6. Do not roll down the stockings or fold them over.
7. Make sure you drink enough fluids.

You may be given an injection

This will be a small needle that will deliver medicine just under your skin. The injection can be given in your stomach, thigh or any fatty tissue. You will be asked to do this yourself; the nurses will show you, or maybe your carer, how to do this.

You may need to continue this at home for a few weeks.

Food and Drink

Eating and Drinking

When you are unwell it's important to get the right nutrition to help with the healing process and your recovery. This would include eating regularly with three meals a day and small snacks in between, especially if your appetite is reduced.

Menus are given out to you if you are in hospital. If you require help filling this in ask a member of staff.

If you don't feel much like eating, milky drinks can be a very helpful way of getting extra energy and protein. You may be given supplement drinks to increase your nutritional intake which can be made with milk or water.

Drinking plenty of fluids will help to keep you hydrated and may help with the absorption of some medicines. Some medicines say to "take with food", or on an empty stomach.

If you follow a medically prescribed diet, be sure to let the ward know as soon as possible so that the right food can be provided.

Sometimes, depending on the reason why you are in hospital, you may be advised to change your diet or to eat a modified diet.

Staff will advise you what may be best for you at the time.

All patients should be screened routinely on admission for risk of malnutrition. If you have lost weight because of illness or are struggling with a poor appetite let your nurse know.

Food hygiene – Your help

When in hospital, food brought in by visitors / relatives is discouraged other than a selection of healthy snacks, such as washed fruit.

Our help

If carers or nursing staff serve your food, they must have washed and dried their hands. In hospital they also need to wear a green plastic apron.

If you are in hospital, all wards have “Protected Meal Times” – this means that doctors, nurses and visitors are asked not to visit the ward whilst meals are being served and eaten. If you need help with feeding, the nurses will help you and carers are welcome to assist with feeding too.

Medicines safety while in hospital

Medicines Safety

Good Medicines Management aims to:

- Make better use of the skills of health care professionals such as doctors, pharmacists and nurses.
- Give more information to patients.
- Reduce waste and save money.

Know your medicines

- If you are in hospital you will usually be visited by someone from the pharmacy team. Your medications will be checked

against GP records and they will ask you questions about your medicines. Ask the nurse, doctor or pharmacist if you do not know what the medicine is for.

- Tell the staff if you are allergic or sensitive to any medications; you will be asked to wear a red wrist band if this is the case.
- You will be advised to take your medication at specific times to make sure they are digested and absorbed at the right time.
- Ask your doctor, nurse or pharmacist if there are side effects of the medicines you are using.
- If you need to come into hospital bring a recent copy of your repeat prescription and the medicines that you are taking.

What can you do?

1. Inform your doctor, nurse or pharmacist if you are not taking the medicines that you have been prescribed. This will have an effect on the rate at which you recover or how well your condition is managed.
2. When at home only request what you need and what you take.
3. Tell your doctor, nurse, or pharmacist if you are taking any other medicines (for example vitamins or supplements).
4. If you use your own medicines in hospital you **MUST** keep them securely as advised, and out of sight.
5. If in hospital, **NEVER** leave medicines on your lockers or bedside table.
6. If in hospital, only take medicine's given to you by the nursing staff.
7. When in hospital, then the staff give you your medicines, ensure that they check your wrist band, and ask for you to verify who you are and your date of birth before you take them.
8. Ask for information about your medications.
9. If you are given a medicine that is new ask what it is for before taking it.
10. Always take medicines as advised e.g. "with food or at night".

If you use needles for any medicine you **MUST** dispose of the needles in sharps waste containers that are provided.

Blood tests and investigations

Blood tests

While you are in hospital or at home you may require blood tests. The blood tests will tell the doctor or nurse a lot of information about how you are and how your body is managing your condition.

When you have a blood test check that the following happens:-

1. The nurse or doctor washes their hand thoroughly and applies gloves.
2. Make sure that the doctor or nurse writes your name on ALL the blood bottles before they leave.
3. Inform the doctor or nurse if you have fainted in the past when having blood taken before the test.
4. TELL your doctor or nurse if you are allergic to plasters or tape used to secure the cotton pad.
5. TELL your doctor or nurse if you take anticoagulants like warfarin or heparin, and watch the site for bleeding after your blood test, as you may experience bruising at the site due to the blood thinning medication that you are taking.

Investigations

There are many tests and investigation that you may be offered. The investigations you are offered will depend on many reasons, including what the doctor or nurse is trying to exclude.

BEFORE you have your investigation / test:

1. Ask the doctor or nurse what the investigation is for.
2. Make sure you listen and fully understand what they are telling you. If you are not clear ASK AGAIN.
3. BEFORE you have the test, the staff should read out your name, date of birth and sometimes your GP to check that you are in the correct place and undergoing the test requested by your doctor or nurse.
4. Confirm with the staff what will happen with the results and when you will be given them.

Leaflet Details

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Other formats

If you would like to receive this information in an alternative format, then please contact : 01539 795497.

Travelling to our hospitals

For the best way to plan your journey visit our website: <http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS): 01539 795497.

Useful Contact Details

NHS 111 (for 24 hour urgent health advice): telephone 111

Your Information

If you would like to know how we use, share, disclose and secure your information and your rights of access to the information we hold about you, visit the Trust's website: <http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS) on 01539 795497.

Evidence

Details of the evidence used in writing this leaflet are available on request from: Patient Information Officer at 01524 512476.

Feedback

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment, please speak to a member of staff or contact PALS on 01539 795497.

UHMBT is a no smoking Trust. Smoking is not permitted on any of the hospital sites. You can contact the NHS North Lancashire Stop Smoking services on the number below:

NHS Quit Squad - **0800 328 6297**

If you live in Cumbria, please call **0300 013 3000** to find a local pharmacy who are offers 1-2-1 support and nicotine replacement therapy.

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