



# My Child is Leaving Hospital - What Now?

A BOOKLET FOR PARENTS WHOSE CHILD IS LEAVING  
SARUM WARD AT SALISBURY DISTRICT HOSPITAL

Published by BUGS (Odstock Burns Support)  
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*The BUGS Booklet ... My Child is leaving Hospital – What now?*

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## Introduction

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While you and your child were on Sarum Ward you will have been longing to get home, but once there you may miss the support of the staff who were able to answer questions. This booklet has been produced as a result of parental response to a previous booklet published by BUGS called 'The BUGS booklet ...I'm leaving Hospital – What Now?'. The booklets have been developed in conjunction with the multi-disciplinary team of Sarum Ward. You will have met many of them during your child's stay at the hospital. The team includes the Consultant Plastic Surgeons, Specialist Nursing and Therapy teams, Clinical Psychology and Dietetics. The booklets have also been reviewed by patient representatives.

For many patients, burn care does not stop once they leave Sarum Ward and the hospital. The length of recovery depends on the extent of the injuries, the need for surgery and the body's natural healing processes.

On being discharged from hospital you may feel worried and anxious about how you and your child are going to cope and you may find it difficult to return to the family's old routine.

We hope that our information will help *you* and also help you to support your child through any difficulties you may find that you have to face together, now that your child has left the hospital.

We have separated the sections in to Day to Day Care, Social and Emotional Impact, Scar Management, Mobility and The Future. You may find it useful to dip into individual sections as required. A list of helpful organisations on pages 42 to 45.

**If you have any questions concerning your child's care once you are at home, please do not hesitate to contact Sarum Ward on 01722 336262 ext. 2560/2561**

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# Who are BUGS – Odstock Burns Support?

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BUGS is a small independent charitable group founded in May 2000 by staff trained in burn care and an ex-patient. BUGS was set up to provide support to all current and former patients and their families, who may or may not have been treated in Salisbury. More recently we have extended our role to a wider group of patients under the care of plastic surgeons at Salisbury District Hospital. We are funded solely through charitable donations and run by lay and staff volunteers.

## Mission Statement

To support and encourage people as they move out into the community who are under the care of the Odstock Centre for Burns, Plastic and Maxillofacial Surgery, by providing the opportunity for friendship, information, as well as practical and professional help and advice.

## Objectives

- To support and encourage patients and their families/carers.
- To gather and impart relevant information to survivors and their families /carers.
- To provide public education through the media and programmes to help reintegration into society.
- To fund raise to support the work of BUGS
- To provide grants to help a patient return to their community or access specialist support.
- To support relevant research that will benefit BUGS members

## **We provide:**

- Essential toiletries for inpatients
- Patient information
- Emotional Wellbeing in association with the Engage Project
- Funding for children aged 8 to 17 years and young adults aged 18 to 23 years to attend Burns Camps
- Aromatherapy on Odstock Ward
- Discretionary grants to individuals and for research
- Patient advocacy

Our website and Facebook page aim to provide links to helpful organisations and information of relevance to burn survivors and their families.

**Website:** [bugssalisbury.co.uk](http://bugssalisbury.co.uk)

**Facebook:** @bugs.salisbury

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## **Thoughts from Parents**

*...he has progressed well and it would appear that his burn has not restricted him from doing the things that he likes.'*

*'...an initial overwhelming tiredness which contributed to how I coped with every situation.'*

*'...coming to terms, as a parent, with the fact that my hitherto 'perfect child' will be scarred for life'.*

*'I appreciate the skills of everyone who looked after my child at Salisbury District Hospital and ensured a full recovery.'*

## My Child Still Has Dressings

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If your child has been discharged from hospital and is still having dressings, you should keep the dressing in place until the next appointment.

**unless: -**

- fluid oozes through the dressing
- the dressing becomes accidentally wet
- your child experiences worsening pain or discomfort

**If any of these happen you should contact Sarum Ward to seek advice.**



## I'm Worried My Child Might be Unwell

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A wound infection needs prompt treatment. It is important to be aware of the signs of infection which are:

- high temperature
- skin rash
- vomiting and/or diarrhoea
- redness and/or any swelling
- increased pain
- discharge from the wound.

If you notice any of these signs, please contact **Sarum Ward on 01722 336262 ext. 2561/2560**. If your child is very unwell, consider getting your child to medical help urgently.

## What Do I Do If My Child Has Pain?

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You may be given painkillers for your child when they leave hospital. You should give these to your child as they have been prescribed. However, you should contact Sarum Ward or your GP for advice if you feel that the pain has become a problem and is not being managed adequately.

Having fun or doing an activity can help distract your child from thinking about their pain.



## Inhalation Injuries

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If your child had an inhalation injury following their accident (injury to the throat, lungs or breathing airways) they may have some periods of shortness of breath or wheezing even after a small amount of activity.

They may also have some hoarseness in their voice or have colds and coughs more often than usual. This is very normal. You may need to see your G.P. if your child does not recover from colds or coughs as quickly as they used to.

## Daily Skincare

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It is important to moisturise the skin after washing. The oil and sweat glands are often damaged in a burn injury, making the scar area drier than normal skin.

New skin will benefit from massage with a moisturising cream a minimum of 2 – 3 times a day. This will help to improve its quality and flexibility, which will make the area supple, less dry and also help to reduce itchiness.

Wash your child's skin carefully before a session of applying the moisturising cream. This will help to prevent the cream from building up, which can lead to blackheads or pimples.

If blackheads or white spots appear do not squeeze them, but use a sponge and gently wash the area with soap in a gentle circular motion.

You should use a simple, non-perfumed, aqueous (water-based) moisturiser that suits your skin. The cream that you use should be light and non-greasy. Please test any creams on a small area of the scar before applying it to the whole area in case of irritation or a reaction to the cream. You will need to use as much cream as required to moisturise the skin. Be sure to massage the cream into the skin well.

During your visit to our hospital, the nurses may have applied **My Trusty™ Sunflower Cream** fragrance free moisturiser, on your child's skin. Specifically formulated by our own NHS skincare specialists, it is the type of cream that is recommended to use on newly healing or scar tissue, once the skin is no longer fragile and less red. More information is provided at the end of this booklet.

## Should My Child Bathe or Shower?

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If your child is discharged with dressings, check with the staff whether your child can bathe. If the dressings are stuck to the skin you may find it helpful to soak them first. This can be done by your child getting in the bath or shower for a few minutes before trying to remove the dressings. Pressure garments used for scar management should be removed before bathing.

If your child's wounds are healed it is important that your child has a bath or shower every day. This helps to prevent a build-up of the moisturising cream that you will be using on their skin.

As part of normal good hygiene, the bath must be cleaned and rinsed before it is used. This should be done with a clear liquid or foam cleaner. A more abrasive cleaner may leave bits in the bath that may irritate the skin.

You will find that the skin is more sensitive to hot and cold temperatures. For this reason, it is important that you test the water temperature in the bath or shower before your child bathes. It is best to test the water with an area of healthy skin first. The temperature should be at a pleasant warmth for your child. Water thermometers, which indicate the safe temperature of the water, are available from chemists.

## Washing

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It is important to use a mild or pure non-perfumed soap, such as ‘baby’ soap or bubble bath, when washing and use your hand gently. This will help to reduce the chance of the skin becoming irritated. Using aqueous cream to wash with can help if your child’s skin is very dry and itchy. Encourage your child to help with washing their body.

The skin needs to be cleaned as you have been advised. This will reduce the risk of infection. Make sure that the skin is dried gently with a clean towel. Your child will find that their skin will feel more supple after being warmed and after being in water.



## Washing Your Child’s Hair

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If your child’s head has been burned, you can use just water or a very gentle, ideally non-perfumed shampoo or body wash. This will reduce the likelihood of irritating unhealed or newly healed areas of skin.

Wash their head with gentle pressure from your fingertips rather than with your nails. Make sure that you rinse the hair thoroughly to remove all of the shampoo.

## What Kind of Clothes Will Be Best?

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Your child will probably feel more comfortable if they wear loose clothing made of natural fibres such as cotton, linen or silk, rather than man-made fibres like polyester. Using tops with buttons can help if there is discomfort when dressing.

They may be more sensitive to extremes of temperature and they should dress so that they are comfortable. A number of thin layers allow clothes to be removed or added as required. We do suggest that jeans should be avoided in the early months if your child has leg burns, as the material can be harsh on newly healed skin.



## What Shoes Should My Child Wear?

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If your child's feet have been burned it is important that their shoes are comfortable and do not rub the newly healed skin. A larger size than usual may be necessary and you will need to make sure that the style of shoe does not cause problems to your child's skin. Two pairs of cotton socks will help to reduce rubbing and help with foot hygiene.

Slippers are often a good choice of footwear in the beginning. A reputable shoe shop will be happy to advise on appropriate shoe fitting and size.

## Eating and Drinking

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There is nothing your child cannot eat because of the burn. It is important that they eat a well-balanced diet including a variety of different foods at each meal to give them all the energy and nutrients required to help the wound to heal.

You may find that you need to offer drinks and healthy snacks more often than you used to before the injury. Also, some children can seem more difficult and grumpier when they need to eat or drink.

You can use the Eatwell Plate over the page to help you plan their meals. Encourage them to try to eat something from each of the food groups at every meal.

It is important to remember that your child needs to drink plenty of fluids, such as water. Having been in hospital, where drinking is encouraged, it is easy to forget to drink once home.

# Eatwell Guide

Use the Eatwell Guide to help you get a balance of healthier and more sustainable food. It shows how much of what you eat overall should come from each food group.

Check the label on packaged foods

Each serving (150g) contains

Energy	310kcal	340kcal	340kcal	340kcal	340kcal
Carbohydrate	40g	10g	10g	10g	10g
Fibre	4g	7g	8g	8g	8g
Salt	0.4g	0.4g	0.4g	0.4g	0.4g
Saturated fat	13%	7%	8%	8%	8%

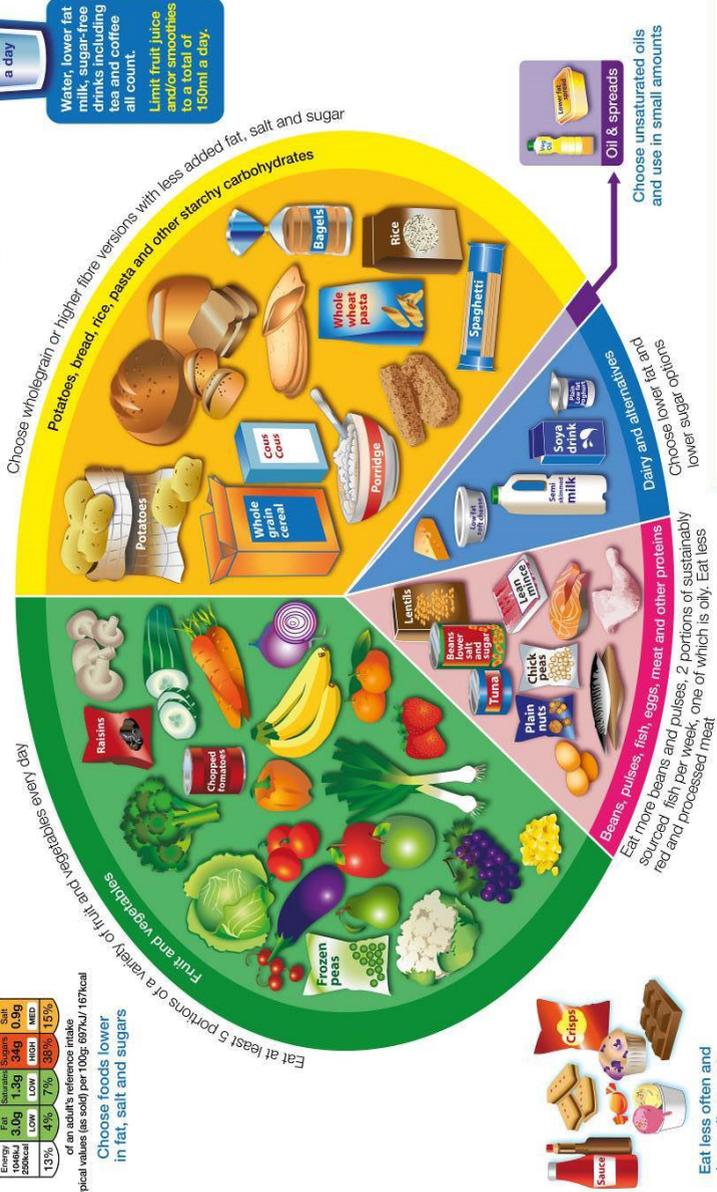
of an adult's reference intake  
Typical values (as sold) per 100g: 687kJ/167kcal

Choose foods lower in fat, salt and sugars

Eat at least 5 portions of a variety of fruit and vegetables every day

Choose wholegrain or higher fibre versions with less added fat, salt and sugar

Water, lower fat milk, sugar-free drinks including tea and coffee all count.  
Limit fruit juice and/or smoothies to a total of 150ml a day.



Per day 2000kcal 2500kcal = ALL FOOD + ALL DRINKS



## What If My Child Is Distressed?

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Children react in different ways depending on their age and development, personality and the circumstances of their injury. Some children may not experience any emotional distress whereas others may be more affected.

Following a burn injury, you may see changes in your child's behaviour. This change may be immediate or delayed. Sometimes children cope very well initially and then start to struggle weeks, months or years later, often during times of transition such as starting a new school.

Children may have worries about different aspects of their injury and experience. They may be experiencing physical pain, itching, or changes in movement of the affected body part. They may worry about the appearance of their burn and how others may react. If they have had time away from school, they may worry about returning to school, catching up on missed work and whether they will have the same friends.

Depending on how they got their burn injury, your child – and you – may become distressed when thinking and being reminded about the incident.

This distress is really common after people experience overwhelming events and is usually temporary. If you and/or your child feel overwhelmed by these feelings or if they continue for more than a month after the injury and it is having an effect on the family, then you may need some extra support. Please contact the Clinical Psychologist via Sarum Ward, or your G.P., to discuss how we can help.

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Distress may be expressed as:

- Regression (return to younger behaviours e.g. bedwetting, fear of the dark)
- Changes in appetite
- Sleep disturbance, nightmares and night terrors
- Anxiety (worry), sadness and tearfulness
- Flashbacks to the incident – i.e. feeling like it's happening all over again
- Repetitive play/talking about the experience
- Anxiety about coming to hospital appointments/having procedures
- Worrying about being away from you
- Tantrums, hyperactivity
- Physical symptoms such as headaches and stomach aches
- Avoiding any reminders including talking and thinking about what happened

## What Can I Do to Help?

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Your family has been through a difficult and distressing experience and it is important to both acknowledge this and find a way to move forward. As parents, you know your child best. The skills and knowledge you developed as parents before the injury are still appropriate to use once you return home. Remember, your child will look to you and other close adults for comfort and to guide them in how they should react to their experience.

There are websites and charities that can offer support. See pages 42 to 45 for helpful organisations.



## Returning to 'normal' family life

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When you return home, you may find that your child prefers to have you close by and may need extra comfort and reassurance for a time – you may find it difficult to be apart from them as well. It may take some time to get back to what is your 'normal', especially if you or they are still feeling distressed by the experience.

Whilst your family may not be able to get back to their usual activities straight away, it can be helpful, in time, to get into a routine of sorts. Have a 'wake up' time to start the day, plan mealtimes and try to avoid your child staying inside the house all day.

Children respond well to familiar routines like meal and bedtime. When it feels right, start to put this back in place.

Don't be afraid of setting usual limits and boundaries around your child's behaviour but do be mindful about whether there has been a significant change in behaviour since the burn injury, as this may be an expression of their distress.



## Talking with your Child

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Whatever their age, talking helps children to make sense of things, to express feelings, and cope with what has happened to them. Even very young children like to understand what is going on.

Talk in ways suitable to their age, and use words they understand. Young children will need simple, short explanations, maybe using drawing or pictures to help their understanding.

Older children may want to know more details about what happened and talk about their feelings. They may, or may not wish to express both the good and the difficult things about their life after the injury.

You may find talking about it difficult too but try not to avoid the subject. Reassure your child that mixed feelings are normal, correct any misunderstandings they may have about what happened and reassure and remind them that they have your love and support.

Encourage them to talk to you if they have any concerns. If you find this too distressing, encourage them to talk with another close relative or friend and think about whether you may need further support to help you come to terms with what happened.

## When Can We Begin Normal Daily Activities?

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It is normal for your child to feel more tired than usual when you first go home from hospital. You may need to pace their activity level according to how they feel. If you break an activity into smaller chunks rather than one big chunk, your child is more likely to complete the activity. The aim is to avoid tiredness, frustration or feeling demotivated.

Do not be discouraged if you and your child cannot manage all your normal daily activities immediately. Many things will take longer than before the injury as there are more personal needs. At times this will be frustrating but it is important to remember that the end result is worthwhile. Encourage your child to do as much for themselves as possible and praise them for the progress they are making.

Trying to reach a balance between ensuring your child is safe and allowing them to explore and try new things can be difficult after they have been injured. It's natural to feel protective towards your child and want to make a fuss of them to compensate for what they have gone through. However, allowing children to take risks is part of growing up and enables them to learn vital skills they need for adulthood.

Doing things outside the home can help break up the day and meet other people. So, when you both feel ready, start to return to activities your child – and you - enjoyed before their injury. Take small steps and you and your child's confidence will grow as they become more independent again.

## Relationships

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The whole family can be affected when a child is injured and spends time in hospital. Siblings may feel mixed emotions about what has happened to their brother or sister – they may worry about the accident and the injury, but dislike the amount of extra attention given to them; in turn, they may feel guilty about this. Such mixed feelings are normal and should settle with time. Make a point of including your other children, giving them appropriate information. Give them the chance to ask questions so that you can correct any misunderstandings and reassure them of your love and support.

Your child may worry about their relationships with friends. Older children may have particular concerns about their relationships with girlfriends or boyfriends. Encourage your child to talk about the situations they are concerned about. Practise what to do or say in difficult situations such as answering questions or dealing with teasing. Initially, your child may feel more comfortable talking to close friends on the phone or having them visit at home. Gradually encourage them to get back into their usual activities and see more people as their confidence grows.

Couples may also find that stress, tiredness, low mood and worry affect their personal relationship. Again, this is quite common. It is important to try and talk to your partner about any concerns you have, and to address them together. With time and understanding, these problems usually resolve. If you experience ongoing relationship difficulties, talk to your GP who will direct you to appropriate sources of help – the organisation RELATE works with couples with relationship difficulties and usually has branches locally.

## Dealing with Other People's Reactions



People, especially children, are naturally curious. If your child has a noticeable visible difference following their injury, they may experience questions, comments and increased attention. Usually these comments are not meant in a mean way but children can feel anxious about how to respond.

A useful way of dealing with them is to practice an answer with your child that explains, reassures and distracts...

EXPLAIN	what happened	<i>"I was burned in a fire....."</i>
REASSURE	themselves and others that it's ok	<i>but it doesn't hurt, I'm fine now.</i>
DISTRACT	them from asking other questions:	<i>Did you watch the football last night?"</i>

At times, you and your child may find questions and comments upsetting. If this is the case then encourage them to ignore the person and go and find their friends, teacher or an adult they trust to talk to. Sometimes children worry that telling an adult, like a teacher, will make it worse. It is important to reassure your child that their wishes will be included when dealing with any issues so that they feel in control of what happens next. Depending on the age of your child, talk to them about how they would like the situation dealt with and the pros and cons of any approach.

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Sometimes you may notice people staring. It can be helpful to practice ways of managing this. For example: make eye contact with the person who is staring; smile at them and pass the time of day. If they continue to stare, be prepared to ask them not to stare, to distract them by talking about something else or to walk away.

If your child is anxious about social situations, try building their confidence in more familiar situations first - e.g. with family and friends. As you help them cope, they will be more confident about dealing with less familiar situations.

The charity, Changing Faces, have some good tips on their website about how to manage people's reactions.  
[changingfaces.org.uk](http://changingfaces.org.uk)

## Your Own Feelings

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Parents sometimes struggle to adjust following their child's burn injury. Although families often look forward to returning home, it is not uncommon to experience a mixture of feelings; relief about finally going home and worry about how you and your child will cope outside of the hospital. Getting back to 'normal' life requires patience and understanding from both yourselves and those around you.

Periods of feeling down, restless, problems with sleeping or reliving the accident are not unusual. It is common to have days when you feel your family has returned to normal, as well as days when you are overwhelmed by what has happened. You or other members of your family may feel they are unable to cope. You may feel upset over other people's reactions to your child's scarring.

It is quite normal for parents to have feelings of guilt and grief about some aspects of the accident. Parents often say they wish they could take the place of their child and take the pain away. There may be feelings about your involvement in the accident, or how the accident might have been avoided. Your child may have feelings of guilt or loss too. Let them know that it is common to feel this way after an injury. Make sure that you correct any misunderstandings they may have about what happened. Reassure them and remind them that they have your love and support.

If you find that you are feeling low for several days you may find it helpful to discuss your feelings with your partner or friend or to make an appointment with your G.P. Your G.P. can put you in touch with local psychology services such as IAPT (16yrs+) or CAMHS (children) with whom you, or any family member, can discuss your particular problem, in confidence.



## Making Time for Yourself

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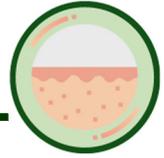
Parents may find that coping with the practical and emotional consequences of their child's burn injury can be very stressful. Making time to share any worries or concerns with your partner or a trusted friend, without interruption, can help manage this stress. It is also important for your own mental health to do things that you find relaxing and enjoyable, e.g. meeting with friends, getting back to former leisure activities.

Don't be afraid to ask for help if you need it. Friends and family are often keen to offer support, this may be practical - picking up children from school, cleaning the house - or emotional - having a chat over a coffee. Accepting help can make things seem less overwhelming.

If you are worried about any aspect of your or your child's emotional adjustment following their burn, please talk to your Health Visitor, GP or contact the Clinical Psychologist via Sarum Ward.

## Skin Changes

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With a burn or scald injury it is probable that there will be some scarring. This depends on the depth of the burn and the length of time that it takes to heal.

It is impossible to predict the severity of the scarring that will occur. It depends on: -

- the size of the burn
- location on the body
- depth of the burn
- your child's skin type

Scar tissue undergoes changes in colour (red/purple/blue), texture and flexibility over time. Eventually, most of the scar will become paler, soft and supple.

To help control scarring and skin tightness we recommend that you encourage: -

- **Exercise and stretches** as you and your child have been taught, to keep joints mobile. (see pages 34 and 35)
- **Keeping your child active.** Not only will this help with mobility but will help lift morale.
- **Massage** and cream the scars as you have been advised to help keep the scarring as supple as possible. (see page 8)
- It is important that your child wears any **pressure garments** that they have been given. Ensure that any **splints or pressure garments** that your child has been given are worn as you have been advised and make sure that they are well fitting. This will help reduce the tightening of the scar. (see pages 31 and 35)

## Changes in Body Temperature

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It is *normal* to find that the body does not regulate temperature in the same way as it used to before the injury. Your child may feel hot when you would not expect them to do so. You may also find that they sweat differently.

No one can predict how long these changes will last. We advise that your child wears layers of clothing which can be taken off or put on as necessary. It is important that they remember to drink enough water if they have a tendency to feel hot.



## Changes in Scar Colour

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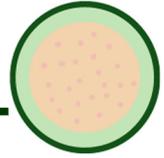
Scar or donor areas may appear dark pink, deep red or purple. Discolouration of burn or scald areas is normal because of changes in the blood circulation and the make-up of the newly healed skin.

The change in colour may be more noticeable at different times, when the body temperature changes or when your child is doing activities which increase their heart rate.

The skin's natural colour might return to areas that have superficial or partial thickness burns after several months. Deeper burns may have some permanent discolouration. Skin which has had a deeper burn will always be a different colour compared to the surrounding skin.

## Skin Problems – Blisters

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The newly healed skin will be quite delicate for several months and will have a tendency to develop little blisters which may seem to appear for no specific reason. They may occur as a result of rubbing from clothes or pressure garments or after a knock.

It is important not to pop the blisters if they appear normal i.e. not infected. Keep the area clean. You can expect the blister to pop or get smaller by itself. The tendency for blisters to form gradually disappears over time.

Pressure garments should not be worn until the blistered area has healed.

Do continue to use the cream but do not apply cream to any open areas and massage delicate skin with care.



## Skin Problems – Swelling

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This may continue to be a problem for some time. To help control swelling: -

- Wear the pressure garments
- Exercise regularly

Affected arms and legs should be elevated on pillows when your child is sitting or resting.

## Skin Problems – Itching

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This is a common problem and is a result of nerve endings growing back, which are often damaged through the injury or surgery. Although there is no complete cure, with time, itching should decrease. It can be worse in the summer and at night when the body will be warmer, therefore keeping cool will help. It can cause loss of sleep and appetite. To minimise the problem: -

- Good skin care is essential. When moisturising, keeping the cream in the fridge and using it cold, can increase the relief obtained when moisturising.
- Bathe the area with cool water, using a flannel soaked in cold water or frequent cool baths, may bring some relief.
- Wash pressure garments carefully. Avoid strong washing powder. Ensure that soap powder is thoroughly rinsed out.
- Wear cotton clothes and sleep in cotton sheets. Wool and nylon will tend to increase skin temperature and therefore increase itching.
- Encourage your child not to scratch as this might cause the skin to break down. Cut their nails and use cotton gloves overnight.
- Applying pressure to the area can help.
- Your doctor may be able to prescribe medication which might help.
- Once the skin is well healed you can try other products, such as different moisturisers, to help minimise the itching.
- Laser treatment may be beneficial and can be discussed in clinic.

## Quick Check Table for Skin Problems

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PROBLEM	WHY MIGHT THIS HAPPEN
<b>Blisters</b> may occur on the burn or scalded areas as well as on donor sites. They are common for the first few months.	Rubbing from clothing or pressure garments or from accidental knocks to the skin.
<b>Skin breakdown</b> that can happen over a long period of time.	Small knocks, rubbing, scratching or infection.
<b>Whiteheads and blackheads</b> are a common problem which decrease over time.	They can be caused by things such as cream, dirt or soap collecting in the uneven scar tissue.
<b>Cysts</b> may occur in the first six months and can be very uncomfortable. They may appear as red, black or yellow raised lumps under the surface of the skin.	Cysts can occur as a result of small areas of skin, or dirt becoming trapped under the skin leading to a localised infection.

<b>TREATMENT</b>	<b>HOW COULD IT BE PREVENTED</b>
<ul style="list-style-type: none"> <li>• Leave the blister alone</li> <li>• Do not pop it</li> <li>• Use a dressing to protect the blister under your clothing and garments</li> <li>• If the blister becomes larger or infected contact your practice nurse or Sarum Ward for advice</li> </ul>	<ul style="list-style-type: none"> <li>• Follow your skin care instructions carefully</li> <li>• Make sure that your pressure garment fits well</li> <li>• Change your pressure garments daily</li> <li>• Wash pressure garments daily</li> <li>• Avoid tight fitting clothing</li> </ul>
<ul style="list-style-type: none"> <li>• Contact Sarum Ward for advice</li> <li>• Your pressure garments may be causing the problem</li> </ul>	<ul style="list-style-type: none"> <li>• Follow the above information</li> <li>• Try not to knock your vulnerable area</li> <li>• Do not scratch</li> </ul>
<ul style="list-style-type: none"> <li>• Gently wash the area with a soft sponge and soap in warm water</li> </ul>	<ul style="list-style-type: none"> <li>• Good skin hygiene is essential</li> <li>• Careful washing of your skin to remove old cream before applying the new is very important</li> </ul>
<ul style="list-style-type: none"> <li>• Soak in warm water and then gently wash the area with a circular motion using a soft sponge</li> </ul>	<ul style="list-style-type: none"> <li>• Good skin hygiene is essential</li> </ul>

## Burns Scar Management Clinic

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The Scar Management Clinic is a multidisciplinary clinic, led by a therapist and clinical scientist, who have access to nurses, consultants, psychologists, BUGS and other specialists. If you are at risk of scarring following your burn injury, you will be given an appointment for the scar clinic; usually within 1 month of being healed.

The aim of the clinic is to help you care for your newly healed skin and provide information and treatment. This will help to improve the appearance and suppleness of the scars. A therapist may also assess your movement, function, and suggest ways to improve this if necessary.

A decision will be made as to whether you would benefit from having pressure garments or any other scar management products or therapies. This will all be discussed with you during the clinic appointment.

You may receive support from the clinic for up to two years. This depends on how your scar matures. You are likely to have appointments every three to four months.

## What Are Pressure Garments?

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These are close fitting garments made of Lycra. They are either off the shelf garments for use when the skin is delicate, or made to measure garments. Your child will be encouraged to wear the garment for many hours both day and night.

The staff in the Scar Management Clinic will explain about the garments and their use. They will also advise you and your child about when the garments should be worn particularly if there are small unhealed areas of skin. Pressure garments should not be worn if there are significant areas of unhealed skin or blisters.

The appearance of the scars will be improved by the pressure put on them from these garments.

At home, make sure that they fit well. When the garments are new, you may find that your child feels they are quite tight. Your child might need to wear their garment for short periods to begin with, gradually increasing the wearing time until they are able to wear them for the length of time prescribed.

Other products or treatments may be recommended for some of the scarring. The staff will advise you about this.

## Skin Camouflage

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Skin camouflage is the application of specialist cover creams to improve the appearance of scarring and other disfiguring skin conditions, including scarring from burns.

The creams are used to conceal blemishes and they provide effective, long lasting, waterproof cover on any area of the body. They are appropriate for children of any age as well as women and men.

The charity called Changing Faces offers a free skin camouflage service provided by volunteer practitioners. To access the service a doctor's referral is required and, subject to the G.P.'s approval, the creams are available on prescription.

## How Can Lasers Help?

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The Laser clinic has a long history of treating burn scars using lasers. It is situated at the end of the Plastics corridor on Level 3 of the hospital. Members of staff in the Scar Management Clinic will help to identify scars that would be suitable for laser treatment. The laser treatments would be performed at an outpatient appointment. The scars can be treated using one of two lasers.

The first laser (Pulsed Dye Laser) can help with the symptoms of both redness and itch. Benefit has also been seen in the reduction of both pain and scar thickness. Some patients have also reported an improvement in range of movement as the laser may increase the suppleness of any firm scar. This laser works better on red scars that are in the early inflammatory stage of development. Treatment would therefore generally start within 3 - 6 months of the wound healing.

The second laser (Fractionated Erbium:YAG or Carbon Dioxide) is used to flatten or soften mature, raised and firm scars that are often paler in colour.

Treatment with either laser is relatively painless and is said to feel "like being flicked with an elastic band". However, it does depend on the pain threshold of the patient and the use of anaesthetic may be necessary for children or young adults. In some cases, a local anaesthetic cream may be applied to the area to be treated an hour before treatment. For young children, general anaesthetic may be preferred. The options for anaesthetic will be discussed before any course of laser treatment.

## Exercises

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You and your child will have been given advice while in hospital about the importance of exercise to regain and maintain movement. This is most likely to have been given to you by a physiotherapist or a nurse.

It is important that any exercises that your child has been given are done regularly a minimum of 2 – 3 times a day. These exercises need to continue until your child feels that they are able to maintain their movement through their normal everyday activities.

Even then you may find that they need to do the exercises occasionally.

If you are concerned that your child is not moving as well as they could you should contact Sarum Ward to talk to a physiotherapist.

It is sometimes easier to exercise in the warmth of the bath. However, remember that the exercises should be done at other times of the day as well. Games can be a fun way of achieving the exercises and increasing movement.

Be flexible in your approach to encouraging exercises and vary them depending on how your child is feeling and other activities they are doing.

## Stretches

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If the burn has happened to skin that goes over a joint you will need to encourage your child to stretch to maintain the movement or to regain movement. As the skin heals it will get tighter and reduce movement. You and your child will be taught stretches by the physiotherapists to help minimise this problem. It is important to do these regularly. If you have any concerns you can contact the Burns Therapists via Sarum Ward.



## Does My Child Have to Wear Their Splints?

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Splints are very useful in helping to maintain or improve range of movement in joints. If your child is having a problem with keeping movement in a joint, they may be given a splint made from a plastic material. This will be specifically made by a therapist. You and your child will be advised when the splint should be worn and its use will be explained.

After your child has been discharged from the hospital you will need to check that the splint always fits properly. If it does not fit, or it is not doing its job properly, contact your therapist and arrange for the splint to be reviewed.



## Returning to School

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To help resume normal activities and to mix with friends your child should return to school as soon as they feel ready. It is recommended to discuss when your child could go back to school with a clinician, as this may be dependent on the risk of infection if the wounds are not fully healed.

It is advisable to also discuss your child's return to school, and any special needs that they may have, with their teacher. Your child may be concerned about how their school friends will react and will need help and support with what to say to them. You may like to ask the school to talk to classmates. Good information, clearly given, will greatly reduce the number of questions class mates feel the need to ask. It should also have the effect of promoting a caring atmosphere. If your child is having a graduated return to school, this can also be explained.

Your child will probably find it helpful to have someone who they can go to when they are having difficulties. You need to agree with your child and the school who this person might be and give them opportunities to meet together to build their relationship.

If you find it difficult getting the school to understand your child's needs, the following people are available to help:

- Nursing Staff on Sarum and Odstock Wards
- BUGS by providing information to you and the school
- School Nurse

N.B. If your school has a school nurse, they must be included in all plans for your child's first attendance.

## Returning to Leisure Activities

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Getting back to former leisure activities will depend on the injury and the sport.

It may be necessary for your child to do some stretches before and after any activity.

Your child may find that they get more overheated during physical activity, so they must remember to drink enough water to compensate for fluid loss. You may also find that they sweat differently after their burn. It is also important to make sure their clothing is not going to cause problems by being too tight or rub and cause friction.



## Swimming

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Swimming is possible once the burn has fully healed.

**Swimming Pools** - A high chlorine content in the water may cause itching or a rash, so it is important that your child showers thoroughly at the end of the swimming session.

Moisturising cream should be applied afterwards.

**Swimming Outdoors or in the Sea** - If your child is swimming in an outdoor pool or in the sea, make sure that they wear waterproof sun cream over the burned areas. They should also wear a shirt and initially only stay in the water for half an hour at a time. Try to rinse the skin thoroughly and apply more sun cream after they come out of the water.

## Can My Child Go Out in The Sun?

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**It is essential for you to protect your child's skin from the sun.**

Following a burn injury, we advise that your child does not sunbathe at all. As their skin is likely to burn, always use a high protection sunscreen when out in the sun. See over the page for advice on choosing a sun cream.

Follow these directions carefully: -

- Avoid direct sunlight on the affected areas for **at least** two years after healing has occurred.
- **Always use a sun cream.** It should be designed for sensitive skin and applied to areas that you are unable to protect with clothing, even on a cloudy day. Sun cream needs to be re-applied according to the manufacturer's instructions and particularly after swimming.
- Clothing should be worn over the pressure garments. The most comfortable clothing will be made from cotton, silk or linen. The pressure garments will not protect the skin from the sun as they allow 60% of the sun's rays through. UV clothing can be obtained from supermarkets and there are some companies who specialise in sun protective clothing.
- Schedule activities to take place in the cool of the day if possible. Avoid the hottest time of day between 11.00am and 3.00pm for outdoor activities.
- Sunburn can still occur while sitting under sun canopies and on cloudy days.

## Choosing A Sun Cream – UVA and UVB Protection

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It is important that you wear a sun cream which provides good protection for both UVA **AND** UVB exposure. Recent scientific experiments suggest that it is important to look at UVA as well as UVB factors. UVB causes burning, but now UVA is believed to play a greater role in skin cancer than previously thought although it does not cause burning to the same extent as UVB.

Although sunscreens do not provide the same protection against UVA as they do against UVB it remains important to wear a high factor sun protection.

Sunscreen UVB continues to be indicated by a factor rating e.g. 20, 30 etc. A star rating indicates UVA protection. The highest star-rated cream available is 5-star.

**We recommend using factor 50  
for at least 2 years post burn.**

The usual guidelines for sun exposure, such as covering up, seeking shade and avoiding the midday sun still apply.

## Burns Camps

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Burns camps are run for children aged 8 to 17 years, and their aim is total inclusivity. A Young Adults camp is also run for ages 18 to 23 years.

All those who attend have burn scars of some sort. Even though some are quite minor and some are very extensive, every child can take part in every activity. Many of the children have been going to camp for years and have built up very strong friendships. They support each other through social networking even when not at camp. What is most evident is how it helps survivors of burns injuries to build their confidence. Here is just some of the feedback we receive about Burns Camp:

- It helped me to gain more confidence
- I strengthened my ability to talk to people who I don't know and have made more friends
- I've learnt to be patient and accept people's different needs
- Listening to other people's life stories helps with issues that you have
- I enjoyed the weekend, activities were cool
- Camp helps as I can talk to people who are the same

The camps are organised by the Frenchay After Burns Children's Club (FAB Club) and The Burned Children's Club. BUGS funds children to go to the Burn camps every year. We also fund volunteers to attend and help children we have sponsored.

If you or your child is interested in attending any of the activity camps that are on offer, please contact The Paediatric Outreach Nurse on Sarum Ward, or visit our website: [bugssalisbury.co.uk](http://bugssalisbury.co.uk)

## A Message from My Trusty™ Sunflower Cream

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Salisbury Hospital Burns & Plastic skincare specialists researched and developed an award winning, natural moisturiser. When skin is damaged or impaired, additional levels of linoleic acid (vitamin F) are needed to aid the healing process. Natural sunflower oil was chosen as a primary ingredient due to its high linoleic acid content, beneficial for moisturising the skin and its antibacterial properties.

Clinically proven, and dermatologically tested, My Trusty™ is safe to use on all skin types and ages including babies upwards of 8-weeks old. Our NHS moisturiser will help relieve/soothe dry itchy skin and improve the appearance of scar tissue. The non-perfumed, aqueous (water-based) sunflower cream comes in two sizes (100ml & 250ml).

Apart from leaving your skin feeling smooth and soft, what's really nice is that all proceeds are reinvested back into NHS patient care. So, it's not just your skin that's left feeling great!

### How to Try or Buy!

If you haven't tried My Trusty™ free samples are available. Contact the My Trusty™ team on 01284 766261 or email [salesoffice@ry.tm](mailto:salesoffice@ry.tm)

### Get 20% Discount on all My Trusty™ Products

Offered to outpatients of Odstock or Sarum wards only, when bought direct from [mytrustyskincare.co.uk](http://mytrustyskincare.co.uk)  
Use coupon code **'bugs20'**.



## Helpful Organisations

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### **ABUK - [adultburnsupportuk.org](http://adultburnsupportuk.org)**

Funded by Dan's Fund, ABUK runs an online forum for parents, relatives as well as adult burn survivors to discuss burn-related topics. The forum is every Wednesday (7.30– 9.00pm) on the Adult Burn Support UK website.

### **British Red Cross - [redcross.org.uk](http://redcross.org.uk)**

Provides short-term loans (e.g. medical equipment, a transport service, Care in The Home package) after people have had a hospital stay, as well as therapeutic care.

44 Moorfields, London. EC2Y 9AL

Tel: **0344 871 1111**

email: [contactus@redcross.org.uk](mailto:contactus@redcross.org.uk)

Area Offices:

Avon, Cornwall, Devon, Dorset, Gloucestershire, Somerset, Wiltshire, Berkshire, Buckinghamshire, Oxfordshire.

Tel: **01235 552 665**

email: [ilcrsouthciadmin@redcross.org.uk](mailto:ilcrsouthciadmin@redcross.org.uk)

Bedfordshire, Hertfordshire, Essex, Kent, Sussex, Hampshire, Surrey, Isle of Wight

Tel: **01622 690 011**

email: [ilcr\\_southeastadmin@redcross.org.uk](mailto:ilcr_southeastadmin@redcross.org.uk)

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### **Changing Faces - [changingfaces.org.uk](http://changingfaces.org.uk)**

A national charity providing free help, support, information and skin camouflage advice for adults and children is relevant to a wide number of conditions that affect appearance.

The Squire Centre, 33-37 University Street, London. WC1E 6JN

Tel: 0345 450 0275

email: [info@changingfaces.org.uk](mailto:info@changingfaces.org.uk)

Skin Camouflage Advice Service

Tel: 0300 012 0276

email [skincam@changingfaces.org.uk](mailto:skincam@changingfaces.org.uk).

### **Children's Burns Trust - [cbtrust.org.uk](http://cbtrust.org.uk)**

A national charity dedicated to providing rehabilitation support for burned and scald injured children and their families.

2 Grosvenor Gardens, London. SW1W 0DH

Tel: 020 7881 0902

email: [info@cbtrust.org.uk](mailto:info@cbtrust.org.uk)

### **Dan's Fund for Burns - [dansfundforburns.org](http://dansfundforburns.org)**

A national charity providing practical support for Burn Survivors

c/o J Huston, 38 Mulberry House, Lynwood Village, Rise Road,  
Ascot SL5 0FJ

Tel: 01344 622 977

email: [info@dansfundforburns.org](mailto:info@dansfundforburns.org)

## Helpful Organisations Continued...

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### **The Katie Piper Foundation - [katiepiperfoundation.org.uk](http://katiepiperfoundation.org.uk)**

A national charity set up to help people with burns and scars to reconnect with their lives and their communities.

PO Box 334, 19-21 Crawford St, London. W1H 1PJ

Support Line: [07496 827266](tel:07496827266)

email: [info@katiepiperfoundation.org.uk](mailto:info@katiepiperfoundation.org.uk)

### **Outlook**

A confidential psychological service for children and adults aimed at improving the day to day experience of living with a different appearance. Referral is accepted from a G.P. or any health care practitioner.

Admin Team, Gate 38, Level 3, Brunel Building, Southmead Hospital, Southmead Road, Westbury-on-Trym, Bristol. BS10 5NB

Tel: [0117 4144888](tel:01174144888)

email: [Outlook&CHP@nbt.nhs.uk](mailto:Outlook&CHP@nbt.nhs.uk)

### **Relate – [relate.org.uk](http://relate.org.uk)**

Provides relationship counselling and support for couples, families and children.

Relate, Premier House, Carolina Court, Lakeside, Doncaster DN4 5RA.

email: [relate.enquiries@relate.org.uk](mailto:relate.enquiries@relate.org.uk)

Tel: 0300 100 1234

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**Scar information service - [smith-nephew.com/awm/scar-info](http://smith-nephew.com/awm/scar-info)**

Factual information on scars and their treatment with useful addresses for further information and services relating to scarring. Contact is only via their website.

**[supportingchildrenwithburns.co.uk](http://supportingchildrenwithburns.co.uk)**

A website, designed with parents and carers, specifically to support families of children who have had a burn injury

**TalkHealth - [talkhealthpartnership.com/talkscars](http://talkhealthpartnership.com/talkscars)**

A website aimed to make health support easily accessible to everyone, offering interactivity between health professionals, charities and fellow patients and their carers.

**YoungMinds - [youngminds.org.uk](http://youngminds.org.uk)**

A national charity championing the wellbeing and mental health of young people. It provides advice, support, information for young people and parents.

Parents Helpline – 0808 802 5544

## References and Credits

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- 'The BUGS Booklet. I'm Leaving Hospital – What Now?'  
Published by BUGS Salisbury District Hospital, 2006
- Home at Last!  
Published by McIndoe Burns Support Group, East Grinstead
- Burns Scar Management Clinic Patient Information Leaflet,  
Salisbury District Hospital
- The Salisbury Laser Clinic Leaflet – 'Spending Time  
Outdoors'  
Salisbury District Hospital
- Wound / Scar - After Care Guidance  
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Northwood, Middlesex. HA6 2RN
- Jobskin Ltd, Unit 13a, Harrington Mill, Leopold Street, Long  
Eaton, Nottingham, NG10 4QG
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## **Disclaimer for The Parent's Booklet**

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BUGS has taken care to ensure that the information presented in this booklet is accurate at the time of going to press. The information is relevant to patients and ex-patients and their families or carers at Salisbury District Hospital. BUGS cannot accept any responsibility for any inappropriate use of the information.

# Notes

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## Notes

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# **BUGS**

**Odstock Burns Support**



**Salisbury, Wiltshire, SP2 8BJ**  
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**Sarum Ward ext. 2560/2561**

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