## About the burns outreach service

The burns outreach service is based in the burns unit at Queen Victoria Hospital NHS Foundation Trust in East Grinstead, West Sussex. The aim of the service is to ensure that specialist burn care is made available to people who are unable to access services on-site at the QVH.

The service is run by a burns specialist nurse who will visit you either in hospital or at home. The nurse will carry out an assessment, take photographs of the burn and liaise with the burns team at Queen Victoria Hospital.

The burns team includes surgeons, anaesthetists, physiotherapists, occupational therapists, psychological therapists, pain specialists, dieticians and pharmacists.

They will discuss all aspects of your care and a treatment plan will be made. This may involve surgery to perform a skin graft or specialist dressings.

The plan may change over time but at all stages you will be involved in any decisions that are made regarding treatment and the outreach nurse will ensure that you are fully informed of all treatment options.

# If you have been admitted to your local hospital

It may be that, although you have sustained a burn injury, there are other medical or surgical problems that need to be diagnosed, treated or stabilised and it may be necessary for you to stay in your local hospital.

Once you have been referred to our burns service, the outreach nurse will visit you in hospital and provide advice about the most appropriate treatment and dressings for you to the medical and nursing teams looking after you. The outreach nurse will give ongoing support to you and the hospital staff regarding burn care. Your burn wound will be reviewed regularly by the outreach nurse and the hospital staff will contact the outreach service if they have any concerns.

If you require surgery to treat the burn wound, you will be transferred to the burns unit at Queen Victoria Hospital once all other medical problems are resolved or stabilised. If surgery is not needed or is not appropriate and you are discharged home, the outreach nurse will visit you at home and liaise with the community nursing team to ensure that specialist burn care continues.

## If the outreach nurse visits you at home

Your community nurse, practice nurse or your GP may have referred you to the burns service. The outreach nurse will visit you at home. The outreach nurse will liaise with the nurses and your doctor and put in place a treatment plan. All those involved in the care of your burn wound will be advised to follow this plan. The wound will be reviewed regularly by the outreach nurse and if surgery is required admission to the burns unit at Queen Victoria Hospital will be arranged.

## Looking after your burn injury

#### Pain

You may have been prescribed painkillers for your burn. If your pain is not controlled please inform the community or hospital nurses and the painkillers can be increased or changed.

Pain is often worse on movement or when you are having a dressing change. If this is the case please tell the nurse or doctor. Some pain is to be expected but it must be at tolerable levels. If the pain is preventing you moving or sleeping then your painkillers are not adequate. Pain can also be caused by the dressing, so please inform the nurses if the dressing feels uncomfortable.

#### Dressings

Keep dressings clean and dry. Showering and bathing can be organised but a new dressing will then have to be applied if it gets wet. Please discuss with the outreach and local nurses about showering and organising a visit to change dressings. If the dressing slips please wash hands in soap and water before and after touching dressings and/or wound. Please feedback to the nurses regarding your dressings if they are uncomfortable or slip. They can then address any issues.

### **Burn wounds and infection**

The wound may produce a high level of discharge which smells offensive and is a brownish green or straw colour. This may be normal in some burn wounds. It is not necessarily a sign that there is infection present that needs to be treated with antibiotics. Burn wounds can be treated with an antibacterial cream. The application of this may well be part of your treatment. If your dressings are not managing to contain the discharge or the smell is becoming a problem please tell the nurses or outreach nurse. The dressings can be altered or changed more frequently.

#### Signs of infection that need attention

- if you feel unwell and feverish or have a temperature
- if you are experiencing a persistent increase in pain or notice redness appearing around your dressing

Please ring your local community nurses or your practice nurse or GP if you are attending the surgery for dressings so that they can assess the wound to see if you need to be prescribed antibiotics.

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#### **Activities and rest**

It is important that you carry on with daily activities but also have periods of rest. If your burn affects your hands, feet or lower legs it is important to elevate these when you are at rest. This is because swelling may develop around the area and prevent a good blood supply reaching the wound. This will have a negative impact on healing. If you notice increasing swelling it may be that you need to increase the time that you rest and elevate the area.

If your burn affects a joint you will be given exercises by the burns outreach nurse. It is important to move the joint to prevent stiffness and maintain the joint's full range of movement and function. As the burn heals the area will feel tight. This is normal and you cannot harm the wound by stretching it during your exercises.

#### Diet

It is important to maintain a good balanced diet and drink plenty of fluids. This will support the body as it repairs itself.

#### Effects on your general wellbeing

Burn injuries can be very traumatic to the person that they happen to and to their friends and family, especially if they have witnessed the accident or have discovered the person after the accident. Thinking frequently about the accident and/or resulting injury is a normal reaction to trauma. Flashbacks and nightmares may occur. If you are experiencing any of these, please talk to the outreach nurse. Again this is normal for a while but if they persist over weeks it may be that you need some help. Everyone is different and it may be that you experience none of these things.

The outreach service will remain part of your care until your burn has healed or improved to such an extent that it no longer needs specialist input. For matters that require urgent attention such as a dressing that has fallen off, please ring your local nurses but do not hesitate to phone the outreach service or the burns unit if you have any concerns or questions.

## Contact details for patients

Should you have any questions or concerns, please contact us: Burns Outreach Service Tel: 07917 589159 Monday-Thursday

Please leave a message on the answerphone as the nurse may be driving or with a patient. If your call has not been returned within two hours or you need to speak to someone outside the hours listed above please ring the burns unit directly on 01342 414440 and the burns staff will assist you.

For all in-house Burns Outreach referrals, please email qvh.burnsoutreachreferrals@nhs.net All new referrals must be discussed with the Burns Unit on 01342 414440 prior to acceptance by the Outreach service.

If you'd like to find out how you can support QVH, please visit www.supportqvh.org



CHARITY Please ask if you would like this leaflet in larger print or a different format.

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## **Patient Information**

