



Queen Victoria Hospital  
NHS Foundation Trust

# Advice and support after a burn injury

Peanut Ward and the  
Paediatric Psychology Service



**Please contact peanut ward immediately for advice if any of the following occur after your child goes home:**

- The dressing becomes wet or begins to fall off.
- The dressing becomes smelly and starts to leak or ooze.
- Your child becomes unwell and develops any of the following:
  - Rash
  - Fever
  - Diarrhoea
  - Vomiting
  - Not passing urine in 6-8 hours

Give your child painkillers (as instructed) regularly in the first 24-48 hours after discharge and then as required.

Occasionally a child will develop a temperature following a burn or scald or after a dressing change. Please ensure you give paracetamol or ibuprofen as instructed. If their temperature remains high, contact peanut ward as soon as possible.

Encourage your child to use the affected part of their body as usual, unless the nurses or doctors have instructed you otherwise.

Encourage your child to eat and drink normally. It is very important that they keep drinking.

**We will always contact your GP and where appropriate Health Visitor, either by letter or telephone to notify them of your attendance/admission.**

## Contact us

If you are unsure of anything please do not hesitate to contact us anytime day or night.

### **Peanut Ward**

**Tel: 01342 414469**

### **Paediatric Assessment Unit (8am—4pm)**

**Tel: 01342 414468**

## Please remember—no question is silly!

If you have safeguarding concerns, please contact our safeguarding team on 01342 414587.

## Supporting your child after a burn injury

When a child sustains a burn injury, we know this can be a distressing and stressful time for the child, their parents and other family members.

This leaflet includes information on common feelings and reactions that children might experience and how parents/carers can help to manage them. It is also aimed at helping parents/carers to understand their own feelings and reactions to their child's burn injury as well as assist them with overcoming any distress which they may be experiencing.

Extra support around this time can be important for all of you. Please get in touch with us if you have any questions or concerns or if you would like any further information or support from our psychological therapies team.

## Common reactions to a traumatic experience

You or your child might experience some of these reactions, which are quite normal after a traumatic event and usually fade in time.

- Nightmares and trouble sleeping
- Vivid memories or pictures of what happened unexpectedly 'popping' into your mind
- Avoidance of places, people, and activities that are reminders of the trauma
- Feeling irritable, angry or more easily upset
- Feeling jumpy or easily startled

## Changes in your child's behaviour:

Young children may not recognise that a situation is dangerous until an accident actually happens, this may leave them feeling helpless and they may have reduced confidence in how safe they feel. This can result in changes to their behaviour.

Children often struggle to express their feelings with words so they may express them in other ways.

- You may notice an increase in clingy or challenging behaviour
- You may see increased agitation or irritability
- Your child may show avoidant or fearful behaviour
- They may behave as they did when they were younger, such as being scared of the dark, or having toileting accidents
- Your child may have an increase in physical complaints such as tummy ache and headaches

## Things you can do to help support your child

- Try to maintain usual boundaries and routines as far as possible. Returning to normal work and leisure activities can help with this.
- Try to take care of yourself. This is important and is often the 'best medicine' you can give yourself and your child..
- You can help children to make sense of what has happened by talking to them about this. This may help to correct any misunderstandings they must have, such as believing it is their fault.
- Your child may wish to play, draw or talk about what happened. It is helpful to encourage them to do this if they would like to.

## Returning to school/leisure activities

Depending on the size and healing progress of the burn, your child may require a gradual return to school/leisure activities. If you are unsure please check with the burns team.

It can be useful to have a member of the medical team contact your child's school, or for you to share a copy of this leaflet with them.

Getting back to normality and seeing friends as much as possible can help your child to feel safe and know that things haven't changed.

## “But it’s only a little burn...”

You may think that the after-effects of a small burn would be easier to ‘get over’ and that only people with bigger burns need more support. This is not necessarily true, so try not to worry if you are struggling and please get in touch with us so we can provide further support. There is no relationship between the size or severity of the burn and the stress and distress that it might cause the family.

## Siblings

If your child has siblings, and you are concerned about how they are coping following the burn injury, we can also offer our support. Siblings may have witnessed the injury occur and may not have been able to see their brother or sister whilst they were in hospital. They may feel worried about what is happening to them. Let siblings know that their brother or sister is being well looked after.

It can be important to try and spend some quality time with the other children to listen to their concerns and remind them they have not been forgotten.

## Parent/Carer distress

We know that sustaining a burn injury can be traumatic for parents and carers, as well as for a child.

It is common for parents to become over-protective towards their child and want to spoil them, maybe to compensate for what they are going through or because parents may feel that they have failed to protect their child from harm.

Parents can often feel helpless and overwhelmed when their child is undergoing a lot of medical treatments and they are uncertain about what they can do to help. This can create a lot of anxiety. Talking to the hospital staff involved in your child's care and being involved in as many decisions as possible regarding your child's care can help to reduce this.

## Common thoughts and feelings

- You may feel guilty or responsible
- You might feel sad
- You might question your abilities as a parent, thinking "if only..." or "what if..." or "could I have done more?"
- You may feel angry and blame others



## Looking after yourself

Your child will be looking to the adults around them to find positive ways to deal with the event. Try to make sure that you get enough sleep, eat well-balanced meals and stick to regular routines if you can. If possible, share the visiting and caring responsibilities with others so you have time to rest and look after your own needs.

**Seek support from others.** As you are also responding to the trauma, it is very important to talk to other parents, friends, counsellors and/or burns team staff. Share your anxieties and frustrations with them and don't be afraid to ask for help.

**Take time to deal with and think about your own feelings.** It is often a lot harder to help your child if you are worried or upset. Try to talk about your feelings with your family and friends.

**Remember that people in your own family may react in different ways.** Your child's feelings may be very different from yours and their siblings may feel upset as well.

## When and where should I get help for my child/for myself?

In the first days after a burn injury your child may feel confused, upset or jumpy. This is completely normal and most young children just need some time before they begin to feel more secure and comfortable.

You or your child may experience reactions to trauma described in this leaflet. These feelings are normal and usually fade in time; however, if you remain concerned please do not hesitate to get in touch with us.

Please contact us if there is anything concerning you, either from the information provided here or if, for example:

- A few weeks after the injury, your child is still very distressed (clingy or withdrawn)
- Either you, your child or a family member is getting upset over things that remind them of the burn injury
- Your child has stopped playing or doing things they used to enjoy (e.g. school, seeing friends)
- You or your child are having difficulties with returning to usual routines (e.g. sleeping and eating)

You can contact the Psychological Therapies department on **01342 414478** or **[qvh.psychologicaltherapy@nhs.net](mailto:qvh.psychologicaltherapy@nhs.net)**

Alternatively you can talk to a member of staff on peanut or PAU who will contact psychological therapies for you.

## Further Support and Information

### **Supporting Children with Burns**

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

### **Children's Burns Trust**

[www.cbtrust.org.uk](http://www.cbtrust.org.uk) Tel:020 7881 0902

### **Children's Burn Camps**

[www.britishburnassociation.org/burn-camps](http://www.britishburnassociation.org/burn-camps)

### **Changing Faces**

[www.changingfaces.org.uk](http://www.changingfaces.org.uk)

### **London and South East Burns Network**

[www.lsebn.nhs.uk](http://www.lsebn.nhs.uk)

Psychological therapies department  
at Queen Victoria Hospital

**01342 414478**

**[qvh.psychologicaltherapy@nhs.net](mailto:qvh.psychologicaltherapy@nhs.net)**

Please ask if you  
would like this leaflet  
in larger print or an  
alternative format.

Psychological therapies

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