**The Braden Q risk assessment tool**

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| **Patient name ­­­­­­­ DOB**  | **Date:** |  |  |  |  |
| **Mobility** | **1 Completely immobile** | **2 Very limited** | **3 Slightly Limited** | **4 No Limitations** |  |  |  |  |
| **Activity**. | **1 Bedfast:** | **2 Chair fast** | **3 Walks Occasionally** | **4 All patients too young to ambulate OR walks frequently** |  |  |  |  |
| **Sensory Perception** | **1 Completely limited** | **2 Very Limited** | **3 Slightly Limited** | **4 No impairment** |  |  |  |  |
| **Moisture** | **1 Constantly Moist** | **2 Very Moist** | **3 Occasionally Moist** | **4 Rarely Moist** |  |  |  |  |
| **Friction -****Shear** | **1 Significant Problem**: | **2 Problem:** | **3 Potential Problem**. | **4 No Apparent****Problem** |  |  |  |  |
| **Nutrition** | **1 Very Poor** | **2 Inadequate** | **3 Adequate** | **4 Excellent**. |  |  |  |  |
| **Tissue****Perfusion****and****Oxygenation** | **1 Extremely****Compromised** | **2 Compromised** | **3 Adequate** | **4 Excellent** |  |  |  |  |
|  |  |  |  | Total: |  |  |  |  |

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| **Strong tool** **Nutrition Score** | 4-5High risk | 1-3Medium risk | 2If down to disease | 0Low risk |
| **Braden Q** **Nutrition score** | 1Very poor | 2Inadequate | 3Adequate | 4Excellent |
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| **Braden Q Score** | **Risk** |
| 22-28 | Mild (low) |
| 17-21 | Moderate (medium) |
| <16 | Severe (High) |

Does the patient have medical equipment/ objects or hard surfaces pressing or rubbing on skin? Yes/No

**If** **Yes score the patient as Severe (high)**

Has the patient a pressure ulcer or had previous existing pressure damage? Yes/No

**If** **Yes score the patient as Severe (high)**

Complete a **Paediatric wound assessment** to document the pressure ulcer or previous pressure damage found on the G/N drive in TV folder pressure ulcer folder.

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| **DATE** | **Braden Q RISK SCORE** | **NURSE SIGNATURE** |
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Complete a **pressure damage prevention care plan** found on the G/N drive under TV pressure ulcer folder.

Ensure patient has appropriate equipment according to patient’s risk score. Equipment supplied by Tissue viability. To request equipment complete an equipment request form found on G drive under TV pressure ulcer folder. Email equipment referrals to Tissueviabilityadmin@oxfordhealth.nhs.uk

If you need help or advice on completing any of this form please speak to Laura Brooker or Avril Howe , or contact Tissue viability on tissueviability@oxfordhealth.nhs.uk

**Equipment Guide**

The premier glide mattress used is made from high density castellated foam. Castellated foam (see picture above) is the way the foam is cut, these cuts allow the foam to move in all directions reducing sheer and friction. The castellation also allow the patient to slightly submerge into the mattress reducing point pressure. This mattress also further reduces shear and friction when on a profiling bed by the bottom half of the mattress moving with the bed and the top half moving with the patient see you tube link <https://www.youtube.com/watch?v=T-fnovJj1gE>

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| Braden Q Scale Score | Mattress | cushion |
| 22-28 Mild Risk (low) | Foam (premier glide mattress) | Foam (essentials cushion) |
| 17-21 Moderate Risk (medium) | Static air (repose mattress) | Static air (repose cushion)Foam & gel (Flow Form Ultra 90) |
| <16 Severe Risk (high) | Combination foam/dynamic mattress.(Premier Active mattress) Dynamic alternating mattress (Talley Quattro Mattress) | Static air (Starlock/ Roho)Dynamic cushion (Baros) |
| Please note that the sizes available are standard adult sizes (Standard single bed size for mattresses) and 18”x18” (45cmx45cm) cushion sizes. Bespoke paediatric sizes are possible through tissue viability and the special orders system. |
| For further advice please email tissueviability@oxfordhealth.nhs.uk Or go on the Tissue viability website for guidance and referral forms [www.oxfordhealth/tissueviabiliy](http://www.oxfordhealth/tissueviabiliy)  |