

PARTNERS IN QUALITY CARE



Feature Spotlight

SEPTEMBER | 2026

Protecting Your Client's Skin

Your client's skin is far more than a covering for the body. It's a living organ that protects against injury and infection, helps regulate temperature, and lets a person sense the world through touch. As skin ages, it naturally becomes thinner and more fragile. That's normal, but it also means older adults are more prone to dryness, bruising, tears, and pressure injuries.

UNDERSTANDING THE SKIN

Skin is made up of several structures, but it helps to think of it as **three** main layers working together.

The Epidermis

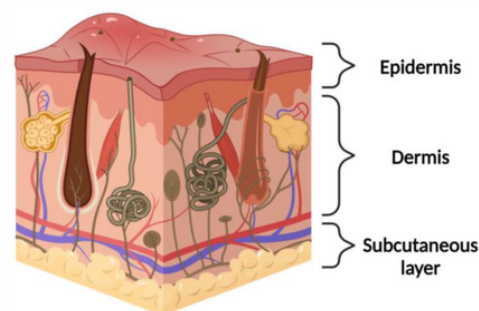
This is the outermost layer. It provides the body's first line of protection and contains the cells responsible for skin color.

The Dermis

Sitting just beneath the epidermis, the dermis holds blood vessels, nerves, hair follicles, and glands. It gives skin its strength and flexibility.

The Subcutaneous Layer

The deepest layer contains fat and connective tissue. Think of it as the body's cushioning and insulation, protecting everything underneath. When any of these layers change, it affects how well skin holds up to pressure, moisture, friction, heat, and cold.



HOW AGING CHANGES THE SKIN

Skin changes are a normal part of getting older, though how much someone changes depends on genetics, nutrition, health conditions, medications, and lifestyle.

Skin Becomes Thinner and More Fragile

As the skin's supporting structures shift with age, the epidermis thins, becomes less elastic and less stretchy, leading to wrinkles and reduced firmness. When this occurs, even a small scrape or even a minor bump can turn into a bruise or skin tear easily.

Skin Produces Less Natural Oil

Oil production tends to decrease with age, which can leave skin dry (xerosis) and more prone to itching and cracking. Regular moisturizing and gentle cleansing go a long way here.

In-Home Aides Partners in Quality Care is a monthly newsletter. © Copyright AHHC 2026 - May be reproduced for In-Home Aides. Melody Beaty, BSN, RN, VP of Medicaid Home Care and Private Pay Services, AHHC of NC and SCHCHA; Author

Objectives

- Review why skin matters and how skin changes with age
- Review early warning signs of skin breakdown
- Review ways to protect fragile skin

References

National Institute on Aging – Skin Care and Aging

<https://www.nia.nih.gov/health/skin-care/tips-healthier-skin-you-age>

Journal of the American Academy of Dermatology

[https://www.jaad.org/article/S0190-9622\(24\)02752-X/abstract](https://www.jaad.org/article/S0190-9622(24)02752-X/abstract)

MedlinePlus – Pressure Sores

<https://medlineplus.gov/pressuresores.html>

Agency for Healthcare

[prevention/mdro-ltc/aging-skin.html](https://www.hhs.gov/healthcare/prevention/mdro-ltc/aging-skin.html)

The Skin Has Less Cushioning

The fatty layer beneath the skin thins over time. With less natural padding, areas over bone become more vulnerable to pressure, and clients may struggle more to regulate their body temperature.

Sweating May Decrease

Because sweating helps the body cool down, reduced sweating in older adults can make it harder to stay cool in hot conditions. Pay close attention to the environment, and always follow the care plan during extreme heat or cold.

Sensation May Change

Some older adults feel less sensitive to touch, pressure, heat, or cold, sometimes due to chronic health conditions. A client who can't feel an uncomfortable position or excessive heat may not realize there's a problem until damage has already occurred.

Skin May Heal More Slowly

Aging skin generally recovers more slowly, and healing can be further affected by nutrition, circulation, diabetes, medications, and overall health. Even a small injury deserves attention and follow-up.

EVERYDAY SKIN CHANGES YOU MAY NOTICE

Not every change in aging skin is a medical problem. Wrinkles, pigmentation, and small growths are common. What matters most is noticing a change from the client's usual condition.

FIVE WAYS CAREGIVERS CAN PROTECT SKIN

1

Use Gentle Hygiene

Follow the client's bathing schedule using warm, not hot, water, and avoid vigorous scrubbing. Take extra care with skin folds, and pat skin dry afterward rather than rubbing.

2

Control Moisture

Moisture from sweat, urine, or stool can quickly lead to irritation and breakdown.

Care tips:

- Clean the skin promptly after soiling
- Use absorbent products as directed
- Keep skin folds clean and dry
- Report persistent redness or irritation

3

Moisturize Dry Skin

Apply an approved moisturizer to dry, intact skin per the care plan.

4

Support Nutrition and Hydration

Healthy skin depends on good nutrition and hydration. Encourage food and fluids within the client's prescribed diet plan, and report poor appetite, trouble eating or drinking, or noticeable weight changes.

5

Encourage Safe Movement

Regular movement supports circulation and reduces how long pressure sits on one area. Encourage movement appropriate to the client's abilities, and always follow the individualized care plan. Never attempt a transfer technique you haven't been trained on.



A sore that doesn't seem to be healing

A new blister or open area

An unusual change in skin color or texture

Unexpected bruising

New swelling, warmth, or drainage

Unexplained bleeding

A new or rapidly changing growth

Repeated skin tears

Anything that concerns you or looks inconsistent with the client's normal appearance

UNDERSTANDING PRESSURE INJURIES

A pressure injury is damage to the skin and tissue underneath, caused by prolonged or repeated pressure. These often develop over bony (prominences) areas like the heels, hips, tailbone, and elbows. Reduced mobility, moisture, friction, poor nutrition, and impaired sensation can all raise the risk at once. Your role is to help reduce that risk, notice changes early, and report concerns.

Who May Be More Vulnerable?

Pay close attention to clients who:

- Spend most of their time in bed or a chair.
- Can't reposition themselves independently.
- Have reduced sensation or a history of pressure injuries.
- Experience urinary or fecal incontinence.
- Have poor nutrition or circulation issues.
- Have difficulty communicating discomfort.
- Show significant weakness or limited mobility.



Risk looks different for every client, so always follow their individual care plan. When something looks different from normal, report the observation to your supervisor..

Friction and Shear

Two forces deserve extra attention during transfers. Friction happens when skin rubs against a surface. Shear happens when skin and the tissue underneath move in different directions, like when someone slides down in bed. Both can damage tissue.

Care tips:

- Use proper transfer techniques
- Avoid dragging the client across a bed or chair
- If needed, use approved equipment that you have been protrained to utilize for client care (i.e., transfer belt, hoyer lift)
- Keep clothing and linens smooth
- When in doubt, ask your nursing supervisor

Skin Tears:

A skin tear occurs when fragile skin separates following an injury, often from friction, pulling, bumping, or another relatively minor event. Older adults may be particularly susceptible because their skin can be thinner and the underlying tissue may provide less protection.

To reduce the risk:

- Handle the client's skin gently.
- Avoid pulling on the arms or legs when assisting with movement.
- Use appropriate transfer techniques based on the client's care plan.
- Keep the client's environment free of unnecessary hazards.

Temperature and Aging Skin

With less insulating tissue and reduced sweating, older adults can be more sensitive to temperature extremes.

Care tips:

- Avoid unnecessarily hot bath water
- Check water temperature before bathing a client with reduced sensation
- Keep the environment comfortable
- Report signs of overheating or unusual sensitivity to cold

KEY TAKEAWAYS

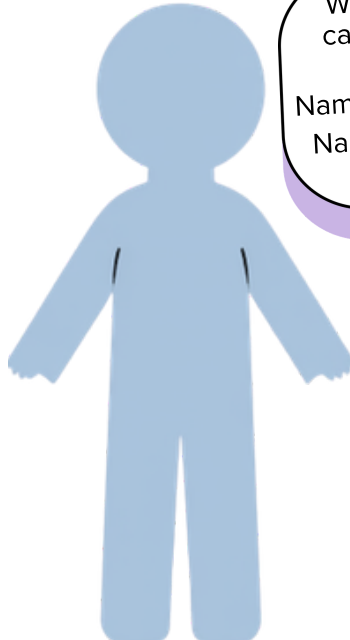
You don't have to know exactly what's wrong with a client's skin to take the right action. Observe, protect within your role, and report promptly.

- No two clients are the same. Skin changes with age in different ways for different people. Always follow the client's individual care plan rather than assuming what worked for someone else will work here.
- Small changes deserve attention. A minor scrape, a new bruise, or a patch of redness can be an early warning sign. Reporting it early gives the care team a chance to step in before it becomes a bigger problem.
- Good hygiene habits protect skin daily. Moisture and friction are quiet culprits. Incontinence, sweat, and sliding during transfers all raise the risk of skin breakdown. Gentle handling and prompt cleanup make a real difference.
- Darker skin tones need a closer look. Redness isn't always obvious. Compare the area to surrounding skin, and pay attention to temperature, texture, and firmness instead.
- Nutrition and hydration matter more than people think. Well-nourished, well-hydrated skin holds up better and heals faster. Encourage water and balanced meals whenever you can based on the care plan.
- Positioning prevents problems. If a client sits or lies in one spot too long, pressure builds and blood flow drops. Simple, regular repositioning goes a long way.
- When in doubt, say something. You don't need to be certain something is wrong to mention it. A quick note to the care team costs little and could catch a problem early.
- Small changes deserve attention. A minor scrape, a new bruise, or a patch of redness can be an early warning sign. Reporting it early gives the care team a chance to step in before it becomes a bigger problem.



SEE IT

Skin color change (redness, darkening, or discoloration), **E**edges that look uneven or open, **E**volving size or shape, **I**ncreased warmth or firmness, and **T**enderness or new discomfort. Any one of these is worth reporting.



What two forces are likely to cause tissue damage during a transfer?
Name one way to control moisture?
Name one thing that healthy skin depends on?