

# Obituary: Judy Waterlow MBE

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I was immensely saddened to hear of the death of Judy Waterlow, she has been a constant part of my (and many others) wound care journey.

Judy trained as a nurse at St Thomas's hospital in the early 1950s, after taking time out to have her 3 daughters (all of whom became nurses) she returned to nursing in the 1970s as a Clinical Tutor. (<https://www.nursingtimes.net/archive/judy-waterlow-pressure-ulcer-care-reformer-01-03-2010/>) She developed the Waterlow Score while working as a Clinical Tutor in Taunton in 1985 (and later updated it in 2005) and the little

yellow cards that were the way we all remembered the score became the bedrock of many clinicians' practice. Whilst many have criticised the score and decried the amount of research behind it, for those in practice it was a safe haven, a familiar framework to work from and how wonderful it was that Judy took the time to write the Waterlow Score handbook to help improve the way the system was interpreted and guide our teaching.

I first met Judy when she came to speak at a TVS conference I had organised in my very first TVN post, I can remember being awe struck that

WATERLOW PRESSURE SORE PREVENTION/TREATMENT POLICY						
RING SCORES IN TABLE, ADD TOTAL. SEVERAL SCORES PER CATEGORY CAN BE USED						
<b>BUILD/WEIGHT FOR HEIGHT</b> ★		<b>SKIN TYPE VISUAL RISK AREAS</b> ★		<b>SEX AGE</b> ★		<b>SPECIAL RISKS</b> ★
AVERAGE	0	HEALTHY	0	MALE	1	<b>TISSUE MALNUTRITION</b> ★
ABOVE AVERAGE	1	TISSUE PAPER	1	FEMALE	2	
OBESE	2	DRY	1	14 - 49	1	
BELOW AVERAGE	3	OEDEMATOUS	1	50 - 64	2	
<b>CONTINENCE</b> ★		CLAMMY (TEMP ↑)	1	65 - 74	3	e.g.: TERMINAL CACHEXIA
COMPLETE/		DISCOLOURED	2	75 - 80	4	CARDIAC FAILURE
CATHETERISED	0	BROKEN/SPOT	3	81+	5	PERIPHERAL VASCULAR DISEASE
OCCASION INCONT	1					ANAEMIA
CATH/INCONTINENT	2					SMOKING
OF FAECES	3					
DOUBLY INCONT	3					
		<b>MOBILITY</b> ★		<b>APPETITE</b> ★		<b>NEUROLOGICAL DEFICIT</b> ★
		FULLY	0	AVERAGE	0	eg: DIABETES, M.S, CVA, MOTOR/SENSORY PARAPLEGIA
		RESTLESS/FIDGETY	1	POOR	1	
		APATHETIC	2	N.G. TUBE/	2	
		RESTRICTED	3	FLUIDS ONLY	2	
		INERT/TRACTION	4	NBM/ANOREXIC	3	
		CHAIRBOUND	5			
						<b>MAJOR SURGERY/TRAUMA</b> ★
						ORTHOPAEDIC - BELOW WAIST, SPINAL ON TABLE > 2 HOURS
						5
						5
						<b>MEDICATION</b> ★
						CYTOTOXICS, HIGH DOSE STEROIDS ANTI-INFLAMMATORY
						4

  

<b>SCORE</b>	10+ AT RISK	15+ HIGH RISK	20+ VERY HIGH RISK
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The Waterlow Score

she would actually take the time and effort to travel all that way up to Halifax to speak at what was, after all, quite a small internal study day — and frantically started advertising it as far and wide as I could to boost the numbers! Even then Judy had quite bad rheumatoid arthritis and I'm sure I'm not the only person that remembers her carrying her own personal cushion with her to prevent herself developing a pressure ulcer. She was so helpful and encouraging and at the break time patiently answered questions from so many people, some of which she had quite clearly covered in her presentation — but I think people just wanted the opportunity to speak to her. I can't begin to imagine how many people saw her present, the TVS roadshows were legendary and so many of us were so proud to have had the actual Judy Waterlow come and speak at our events.

Judy has been described by many colleagues as passionate and inspirational which she truly was but she was also unfailingly helpful, encouraging and supporting. I know myself and many colleagues have at some point corresponded with

her, either because we were introducing the score, or doing a literature review on risk assessment for an assignment and she has always responded in great detail with words of encouragement.

The Waterlow Score still remains one of the most widely used risk assessment systems in the UK as well as being used in many other countries, which reflect how well she understood how general clinicians think and make decisions.

She was recognised for her services to nursing with the award of an MBE in the Queen's Birthday Honours list, and there have been calls to name her local hospital after her as one of the top 10 influencers in the NHS (<https://www.change.org/p/matthew-hancock-mp-name-a-new-hospital-judy-waterlow-mbe-recognised-as-one-of-the-top-10-nhs-influencers>).

Judy's passion for focussing on the patient and their individual risk factors inspired and helped so many people. She raised the profile of risk assessment and made a significant contribution to pressure ulcer prevention in the UK and wider a field. For many of us it is the end of an era — she will be sadly missed. **WUK**