



Pressure Injuries Prevention: Repositioning and Mobilizing Strategies

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Equipment

- Individual's medical notes/care plan, including the individual's repositioning/mobilizing plan
- Pressure redistributing devices, as needed

Recommended Practice

Purpose

Pressure injuries (PIs) are areas of localized damage to the skin and underlying tissue that occur due to pressure and/or shear forces for long periods of time. Immobility is a major risk factor for the development of PIs. Pressure injuries are preventable, and repositioning or mobilizing (ie, turning the individual to a different body position) is important to redistribute or reduce the duration and magnitude of pressure over vulnerable areas of the body.

Special considerations

- An individualized repositioning plan should be clearly documented in the individual's medical notes/care plan.
- The frequency at which repositioning is required should be clearly documented in the medical notes/case notes.
- Frequency of repositioning should consider an individual's level of activity and mobility, ability to reposition independently, skin tolerance, general medical condition, treatment goals, comfort and pain.
- All attending nursing staff should have received manual handling training.
- All attending nursing staff should have received training and education on repositioning techniques, pressure relieving maneuvers and pressure redistributing devices.

Procedure

1. Prior to repositioning, refer to the individual's repositioning plan.
2. If the individualized repositioning plan stipulates the use of pressure redistributing devices, ensure that they are used in accordance with manufacturer's instructions.
3. For an individual who requires assistance to reposition, perform hand hygiene according to the five moments of hand hygiene eg, before and after touching an individual, device or equipment.
4. Explain the procedure to the individual.
5. Seek consent from the individual. Use non-verbal cues prior to commencement of the procedure for individuals with sensory impairment, cognitive impairment and culturally and linguistically diverse individuals to ensure that they are fully aware of the nature of the procedure.

6. Ensure the individual's privacy is maintained.
7. For an unstable critically ill individual, ensure that repositioning uses slow, gradual turns to ensure stabilization of hemodynamic and oxygenation status.
8. For a critically ill individual who is unable to maintain regular repositioning schedules, initiate frequent small shifts in body position.
9. Implement a repositioning reminder strategy to promote adherence to the repositioning regimen.
10. If the individual is able, advise them to sit out of bed in an appropriate chair or wheelchair for small periods of time, as tolerated. Provide assistance, as required.
11. If the individual spends prolonged periods in a seated position, provide them with training on how to perform pressure relieving maneuvers.
12. Provide information on PI prevention strategies to the individual and their family/carers.
13. After repositioning or mobilizing has occurred ensure the individual is comfortable and that their call bell, drink and any other preferred personal items are within reach. Perform hand hygiene and monitor the individual's status for any signs of pain, discomfort or changes in clinical status.
14. Document in medical notes/care plan the new position, time of position change and any other relevant information (eg, skin redness, observations of pain or discomfort, clinical changes).
15. Seek assistance from your supervisor if there are any changes in skin integrity or clinical changes.

Supporting Evidence Summaries

- JBI-ES-248-3-Pressure Injuries Prevention: Repositioning and Mobilizing Strategies

Archived Publications

1. JBI-RP-249-4 (Published at 5 December 2022)
2. JBI-RP-249-3 (Published at 9 November 2022)
3. JBI-RP-249-2 (Published at 28 September 2021)
4. JBI-RP-249-1 (Published at 14 December 2020)

Occupational Health and Safety Considerations



PATIENT EDUCATION
REQUIRED



ATTENTION!
USE STANDARD
PRECAUTIONS



HAND WASHING
REQUIRED AT ALL
TIMES

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For details on the method for development see Munn Z, Lockwood C, Moola S. The development and use of evidence summaries for point of care information systems: A streamlined rapid review approach. *Worldviews Evid Based Nurs.* 2015;12(3):131-8.

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