

HAPI Panel of Experts Topic of the Month – September 2019

Engaging Patients and Families in Pressure Injury Prevention

Introduction

A powerful tool in the prevention of pressure injuries is an informed, engaged patient and family. A variety of teaching tools and techniques can help improve patient and family knowledge. Engagement in prevention strategies can be more challenging, particularly if the patient is resistant to turning. However, thoughtful messaging and creative problem-solving can often bring a positive result.

Teaching Patients and Families about Pressure Injury Risk

Handouts

A written handout or brochure can be helpful in teaching patients and families about pressure injuries and their risk factors. The following documents may be printed and shared.

- *Take the Pressure Off*, by the Association for the Advancement of Wound Care ([English](#), [Spanish](#))
- *Preventing Pressure Ulcers*, by MedlinePlus ([English](#), [Spanish](#))
- *It's Time to Take the Pressure Off*, by Health Quality Innovators

Some organizations create their own patient teaching handouts:

- [Preventing Pressure Ulcers](#), by a coalition of organizations in the state of New York
- [Preventing Pressure Sores](#), by Ohio State University Wexner Medical Center
- [Bedsores \(pressure ulcers\)](#) by Mayo Clinic ([Spanish version](#))

Videos

Sometimes a patient or family member may prefer to view an educational video. The following videos can be viewed on a computer or smart phone.

- [The 5 Key Messages to Prevent Pressure Ulcers](#) by Shropshire Community (3.42 minutes)
- [Preventing Pressure Ulcers](#) by Smartshare Health (2.43 minutes)

TEACHING TIPS¹

- Keep it simple
- Cover one concept at a time
- Do not interrupt or rush
- Maintain eye contact
- Use hand gestures
- Keep a positive tone
- Use photos, illustrations, and/or demonstrations
- Involve family and friends

Assessing Patient and Family Understanding

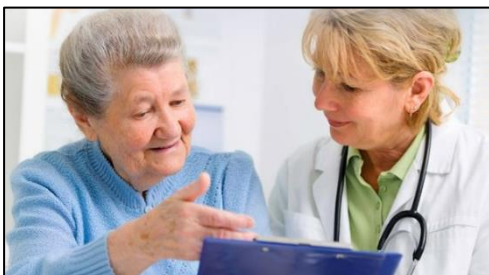
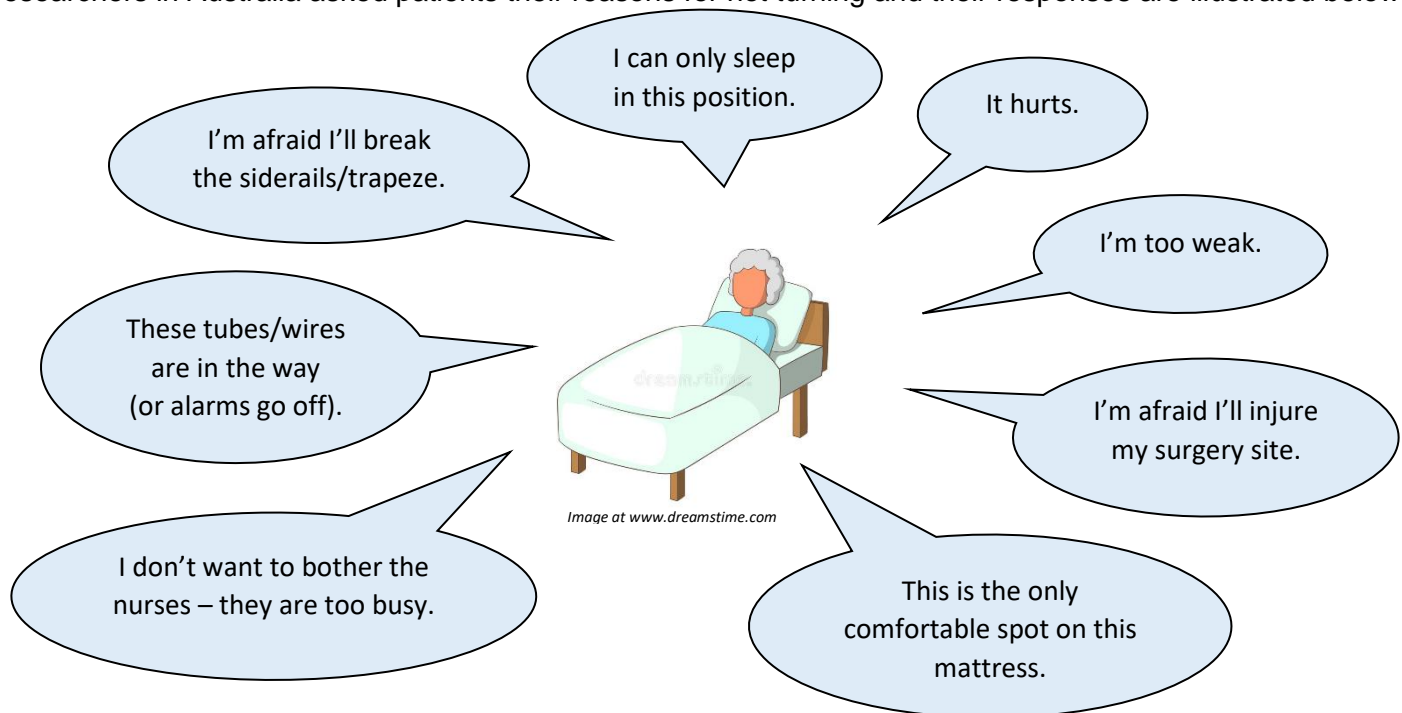


Image from thewellnessnetwork.net

A critical part of teaching is to assess understanding. Teach Back is one strategy that healthcare professionals can use to make sure the patient and family comprehend what is being taught. Ask the patient to tell you in their own words the information you've just shared with them. Ask how they would tell their spouse what you've just shared, or say that you want to be sure you didn't forget anything and ask if they would describe what you've covered. Correct any areas of misunderstanding. Document the teaching. Reinforce as needed.

Engaging the “Non-Compliant” Patient

Even after being educated, some patients and families do not engage in pressure injury prevention strategies, for example, not turning or repositioning independently and/or refusing staff assistance with turns. Nurse researchers in Australia asked patients their reasons for not turning and their responses are illustrated below².



Nancy Collins, dietician and wound care expert, states that getting to the root cause of a patient's refusal to turn can help caregivers identify solutions³. She goes on to offer the following additional suggestions:

- Show empathy.
- Don't dictate.
- Try for small steps.
- Educate about the facts.
- Act nicely.
- Involve the patient in developing a plan.

Advice for working with reluctant patients and families is also provided by Margaret Heale, wound care consultant from Vermont⁴. Avoid asking, “May I turn you now?” or “Is it alright to reposition you?”. Instead say, “It is time for you to be repositioned. Can I help you with the urinal first/get you something to drink first?” She recommends creating a repositioning plan with the patient and care team, then reminding the patient of the plan if there is a refusal to turn and utilizing a chain of command as needed to ensure turning or to adjust the plan.

1. NHS Midlands and East. How to engage with staff and patients. Available at <http://nhs.stopthepressure.co.uk/How-To-Guides/howtogreatskinengagefinal.pdf>.
2. McInnes, E., Chaboyer, W., Murray, E., Allen, T., and Jones, P. (2014). The role of patients in pressure injury prevention: a survey of acute care patients. *BioMed Central Nursing*, 13(41). Available at www.biomedcentral.com/1472-6955/13/41.
3. Collins, N. When your patient refuses to be turned and repositioned – and then sues. Available at www.drncollins.com.
4. Heale, M. What to ask to ensure compliance while repositioning patients at-risk of pressure injury. Available at <https://www.woundsource.com/blog/patient-repositioning-strategies-pressure-injury-prevention>.

The HAPI Panel of Experts is a group of wound care and quality professionals who represent hospitals of varying sizes and geographic regions of Tennessee. The Panel convenes monthly to discuss a topic specific to pressure injury prevention and share their practices and recommendations.

Panel of Experts

Jennifer Vandiver, BSN, RN, CWON - West Tennessee Healthcare
Julie Brandt, MSHA, BSN, RN, WOCN - Erlanger Health System
Lauren White, MBA, BSN, RN - Vanderbilt University Medical Center
Sonya Clark, RN, CWOCN - Henry County Medical Center
Suzanne Kuhn, RN, CWS - Delta Medical Center

If you would like to suggest a topic for the Panel to discuss, please email your request to Rhonda Dickman at rdickman@tha.com.