

Support me



Five things you should know about support surfaces

1 Pressure is a major factor in the development of pressure ulcers. Tissue damage may also occur when a patient slips down a bed during repositioning or slumps in a chair.

2 Pressure ulcer equipment has two main functions – to redistribute pressure and to provide comfort.

3 No patient at risk of pressure ulceration should be nursed on anything less than a high density foam mattress.

4 Patients are at greater risk of pressure damage when seated than they are when lying in a bed.

5 When selecting a support surface consider pressure ulcer risk, weight and size of the patient and ease of use. You should also be aware of manual handling and patient safety issues.



GREEN

No pressure damage/ low risk: Patients should be regularly assessed and a suitable support surface provided if they develop early signs of pressure damage.



AMBER

High risk of pressure ulceration: Patients should be placed on a suitable support surface and re-assessed regularly.



RED

Signs of pressure damage/deterioration: Patients should be reassessed and changed to a higher specification support surface. Continue to change patient's position.

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How to support patients effectively

1 Use a suitable support surface

- Reassess daily.
- Understand how to use equipment – do not exceed weight limit.
- Check regularly to make sure the equipment is functioning correctly.

2 Protect areas at risk of pressure damage (eg sacrum and heels)

- Heels must always be floated.
- Keep skin clean and dry but well hydrated.

3 Tell others what you are doing

- Document turns/changes of position. These may be performed more frequently if skin remains red or becomes broken.

Continue to move patients frequently whatever the type of support surface used and make sure bedclothes and clothing are smooth under the patient when repositioning. Ensure the patient knows WHY they are being repositioned – they may do it for themselves.



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