All patients identified as being at risk (with or without existing pressure injury) should have:

a) Best practice prevention strategies implemented as a priority within two hours of the assessment

b) For inpatients pressure injury prevention strategies reviewed for their effectiveness:
   - At least four-hourly
   - At every patient care intervention
   - At handover
   - On transfer of care episode.

c) Best practice strategies reviewed as a minimum at each community nursing visit.

Prevention strategies

a) Repositioning and/or mobilising routine, including appropriate manual task techniques
b) Education of all patients/personal carers on regular repositioning and pressure relieving strategies
c) Management and monitoring of pain
d) Provision of appropriate products and equipment; support surfaces for beds, trolleys/wheelchairs, chairs, aids, equipment/devices, according to the patient’s risk assessment
e) Reduction of pressure, friction, and/or shear through:
   - Use of active support surfaces/positioning aids during care, including theatre, intensive care and emergency departments
   - Use of dressing products (note dressing products do not reduce pressure)
   - Appropriate hazardous manual task techniques
   - Correct fitting, removal and checking of pressure from devices/orthoses/anti-embolic stockings, casts and other clinical equipment
f) Skin protection and moisture reduction
g) Continence management
h) Adequate nutrition and hydration, including high protein supplements where indicated (with dietitian supervision if available)
i) Referral to health disciplines as clinically indicated for assessment and treatment.

Contra-indications for active support surface

NOTE: In the case of the patient with an unstable spinal or unstable pelvic fracture, the active support surface is contra-indicated. This is regardless of the patient being identified as at risk for the development of pressure injury or if they have an existing pressure injury.

The patient with an unstable spinal or unstable pelvic fracture should stay on the appropriate non-powered mattress and receive regular pressure relief for their condition. Adequate pain relief should be provided.