

<p style="text-align: center;">[HEALTH SERVICE LOGO]</p> <p>SITE:</p> <p>SPINAL CORD INJURY [SAMPLE] GRADUAL RETURN TO SITTING PLAN</p>	<p>FAMILY NAME: MRN:</p> <p>GIVEN NAME: MALE/FEMALE</p> <p>DOB:/...../.....</p> <p>ADDRESS:.....</p> <p>.....</p> <p>LOCATION:.....</p>
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This is a SAMPLE plan only. It does NOT replace a seating management plan or protocol provided by a specialist spinal cord injury service.

This checklist is intended for use with the SCI PI Toolkit found on the Agency for Clinical Innovation website [<https://www.aci.health.nsw.gov.au/networks/spinal-cord-injury/resources>] and guidance from a multidisciplinary team of health professionals.

CHECKLIST (Prior to sitting)

- ☐ Comprehensive nursing or medical **assessment** of the skin is completed to determine if it is ready to sit on. Skin integrity, wound history and specific risk factors are considered in determining how long the wound should be healed prior to sitting on it.
- ☐ Short periods (30 – 60 minutes) of **lying** on the affected area in bed on an appropriate mattress have been completed.
- ☐ **Seating assessment** or re-assessment (of wheelchair and commode/toilet/shower equipment) completed and recommendations implemented.
- ☐ Safe **transfers** and effective **weight-shifting** strategies determined.
- ☐ Consider the use of an updated **Positioning Plan** completed with client and carers.
- ☐ Client and carers demonstrate knowledge of skin checking and have been instructed to check skin before and after sitting. **Daily Skin Check Guide** provided. To monitor their own skin, the person may choose to take photos/video on their own phone/ camera.
- ☐ All contributing factors addressed, equipment reviewed and pressure management optimised. The **Wound and Contributing Factors Assessment Form** may be used to do this.
- ☐ The plan is made in collaboration with the client and carers with respect to the amount of **assistance** that can be provided at home to implement the plan effectively.

EQUIPMENT AND REPOSITIONING PLAN	COMMENTS
Wheelchair and cushion type Manual w/c; power-assist w/c; power w/c with tilt/without tilt; Cushion manufacturer and model	
Toilet and showering equipment Commode (low/high back; custom seat with right/left/front/rear opening/cut out); Padded toilet seat; Padded transfer bench; Padded shower chair	
Transfer technique and equipment Hoist type, sling type, slide board	
Weight shifting technique and frequency when sitting in wheelchair (2 minutes every 15-20 minutes is recommended) 30-45° tilt in space; leaning forward; lean to side; other	

Bed and mattress type Electric high/low with adjustable head raise, knee break; Alternating air mattress replacement/ overlay; Low air loss replacement/overlay; Foam include manufacturer and model.		
Other Manual handling strategies		
SKIN CHECK DESCRIPTORS AND ACTIONS		
Descriptor*	Definition	Action to be taken
Nil redness	Healthy pink skin	1. Continue with plan
Visible skin redness - Blanching	Any skin redness that becomes white when pressure is briefly applied using a finger and returns to red when pressure is relieved.	1. Remove/ offload pressure from the area and re-assess skin in 30 - 60 minutes or prior to sitting again. 2. Review factors that may have contributed to the red mark. 3. Continue sitting plan if no redness Additional actions: _____ _____
Visible skin redness - Non-blanching	Any skin redness that does not change colour when pressure is briefly applied using a finger. This indicates that blood flow has been impaired during sitting.	1. Document this as a Stage 1 Pressure Injury. 2. Remove/ offload pressure from the area 3. Review factors that may have contributed to the red mark. 4. Re-assess skin prior to sitting again. Do not resume sitting until skin redness resolves. 5. After redness has resolved, refer back to previous day's sitting time and monitor closely. Additional actions: _____ _____
Hardening	Tissue around or under the area is hard when palpated.	1. Indurated tissue may be a sign of an underlying problem - therefore suspend sitting plan until investigated. 2. Medical and/or Nursing assessment of factors that may have contributed to hardened area and review of sitting plan. Additional actions: _____ _____
Broken Skin	Visible break in the skin	1. Complete a Wound Assessment. 2. Remove/ offload pressure from the area. 3. Review factors that may have contributed to the red mark. 4. Suspend sitting plan. 5. Complete a Wound and Contributing Factors Assessment. 6. Resume sitting plan at "Day 1" once cleared to sit by Nurse / Doctor. Additional actions: _____ _____
Other	Examples include, change of colour, bruising, dryness, rash, blisters.....	1. Suspend sitting plan until investigated. 2. Medical and/or Nursing assessment of factors that may have contributed to hardened area and review of sitting plan. Additional actions: _____ _____
<small>*Descriptors and the following plan format is based on Royal North Shore Hospital Spinal Cord Injury Unit Spinal Plastics Seating Management Plan and information from the National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel and Pan Pacific Pressure Injury Alliance (2014). Prevention and Treatment of Pressure Ulcers: Clinical Practice Guideline. Emily Haesler (Ed.) Cambridge Media: Perth, Australia</small>		

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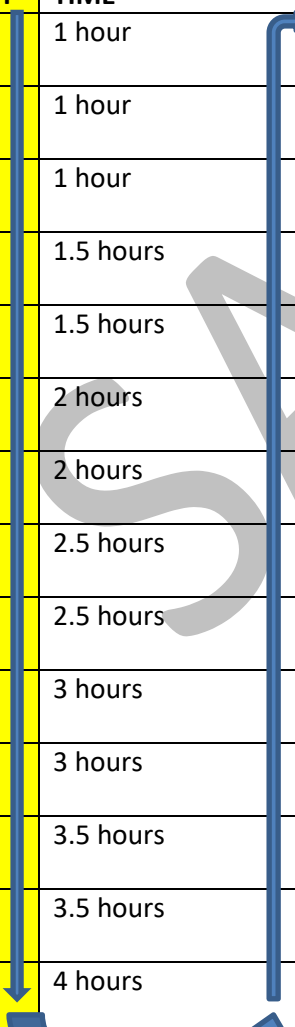
EXAMPLE Gradual Return to Sitting Plan (Based on Prince of Wales Hospital Spinal Pressure Care Clinic Sitting Protocol)

The purpose of a gradual return to sitting plan is to incrementally increase pressure on the affected area by increasing the duration of the pressure, introducing additional movements or equipment one at a time and assessing the impact of each change.

This is an EXAMPLE only. A gradual return to sitting plan should be individualised, negotiated with the client and based on a multidisciplinary assessment of skin integrity, wound history, pressure management equipment options, weight-shifting strategies, means of transferring, assistance available, self management skills and available resources.

- Assess seating on the **commode** once sitting for 4 hours (if not already using the commode). Limit time spent on commode to 30-45 minutes if possible (long term).
- Consider downgrading **mattress** (if required) once repositioning is no longer required on existing mattress. Remember to reinstate repositioning when trialling subsequent mattresses.
- Consider upgrading **transfers** (if required) once re-conditioned and risk of friction and shear is minimal.
- **Avoid activities** that add pressure or friction for example additional transfers, wheeling up or down gutter/steps or carrying children on lap.

DAY	TIME	DAY	TIME
1	1 hour	15	4 hours Plus commode assessment
2	1 hour	16	4 hours Plus commode
3	1 hour	17	4.5 hours Plus commode
4	1.5 hours	18	4.5 hours Plus commode
5	1.5 hours	19	5 hours Plus commode
6	2 hours	20	5 hours Plus commode
7	2 hours	21	5.5 hours Plus commode
8	2.5 hours	22	5.5 hours Plus commode
9	2.5 hours	23	6 hours: Break up into 2 x 3hrs Plus commode
10	3 hours	24	6 hours: Break up into 2 x 3hrs Plus commode
11	3 hours	25	6.5 hours: Break up into 2 x 3hrs/3.5 hrs Plus commode
12	3.5 hours	26	6.5 hours: Break up into 2 x 3hrs/3.5 hrs Plus commode
13	3.5 hours	27	7 hours: Break up into 2 x 3.5 hrs Plus commode
14	4 hours	28	7 hours: Break up into 2 x 3.5 hrs Plus commode



SAMPLE