

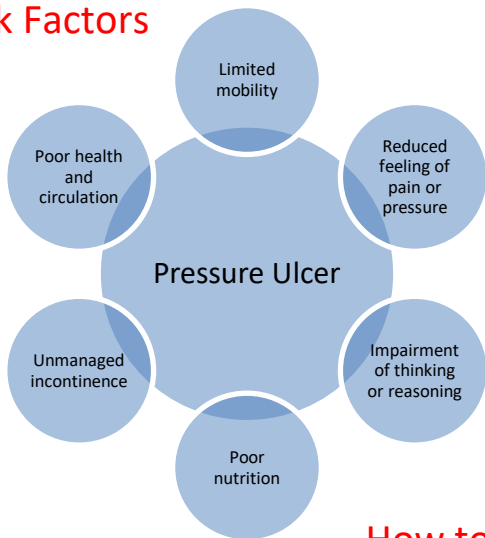
Use of Tilt-in-Space Chairs for Postural Management to Reduce Pressure Ulcer Development in Sitting

Information Sheet for St. Michael's House Users and Carers

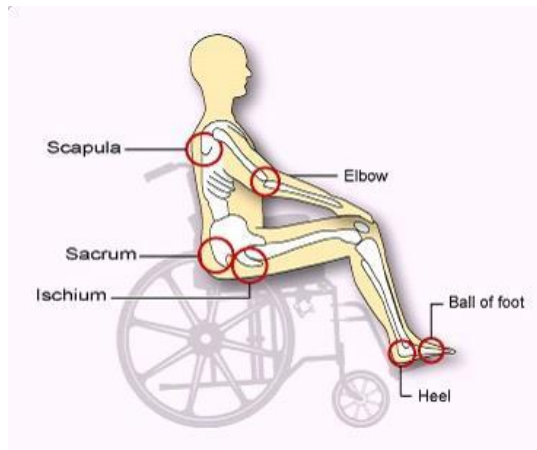
Pressure Ulcer

is a change in the skin, which may present as a change in temperature, consistency, sensation of the skin. The first stage of a pressure ulcer appears as a defined area of persistent redness (non-blanching) in lightly pigmented skin, and usually presents over a bony prominence. **Pressure Ulcer prevention is everyone's responsibility.**

Risk Factors



Risk Areas



How to Provide Pressure Relief

<p>Reposition all individuals with or at risk of pressure injuries to provide optimal offloading of all bony prominences and to redistribute pressure</p> <p>Adhere to good positioning principles as shown by occupational therapist to prevent sliding and shear forces</p> <p>Ensure pelvic belts are tight to secure hip position in the chair.</p>	
<p>Tilt is the orientation of the seat to back angle. Its angle orientation to the ground can be changes to redistribute pressure.</p> <p>Tilt of 25-65 degrees can provide adequate pressure relief. The larger the tilt, the more pressure off load takes place.</p> <p>Tilt of less than 15 degrees does not provide adequate pressure relief.</p>	
<p>Frequency depends on personal risk factors and may need to be as often as every 15 mins and minimum every 2 hours for at least 3 minutes.</p>	
<p>Cross check the above advice with SLT recommendations for feeding position, PT regarding chest management for any contraindications and discuss with MDT.</p>	

Adapted from: Model Systems Knowledge Translation Centre (2009); Stephens, M., and Bartley, C. (2017) Understanding the risk of pressure ulcers and sitting in adults: What does it mean to me and my carers? Seating guidelines for people, carers and health and social care professionals; EUPAP Guidelines (2019)