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Title: We See Ourselves as Part of the Health Care Team: Involving Patients and Their Caregivers in the Prevention of Hospital-Acquired Pressure Injuries

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Abstract

Hospital-acquired pressure injuries are among the preventable complications in healthcare settings. Patients and their caregivers should be encouraged to actively participate in the prevention and treatment of these ulcers and follow evidence-based guidelines to improve health care outcomes and safety of the patient. This requires that health care professionals support the education of preventive measures.

Keywords: Health care team, Patient participation, Family caregivers, Prevention, Pressure injuries

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Highlights

- Healthcare professionals frequently encounter challenges in preventing hospital-acquired pressure injuries.
- The focus has now shifted to involving patients and their caregivers in the treatment of these ulcers, as well as following evidence-based guidelines to enhance health care outcomes.
- Evidence-based guidelines with a focus on health care outcomes, treatment adherence, and patient safety play an important role in engaging patients and their caregivers in the prevention and treatment of pressure injuries.

Plain Language Summary

This editorial highlights the challenge for health care professionals in teaching preventive measures for hospital-acquired pressure injuries and emphasizes the importance of involving patients and their caregivers in following evidence-based guidelines to improve clinical outcomes.

Dear Editor,

Pressure injuries are the most common adverse effect of shear and pressure in the hospital. Pressure ulcers usually occur on a bony prominence in hospitals and pose a risk to patient safety. These injuries indicate poor health care quality. Pressure injuries are a major burden especially for older people, immobile patients with neurological deficits or severe acute illness and their caregivers. They diminish the social, psychological, financial, and physical aspects of quality of life (Rutherford et al. 2018).

Since hospital-acquired pressure injuries are generally avoidable, hospitals and healthcare providers have focused on reducing their incidence. Most of the risk factors for pressure injuries cannot be easily corrected in a short period of time. In addition, the nursing shortage is an issue that leads to a reduction in the duration of patient care (Rosenberg, 2019), and as a result, an increase in the likelihood of pressure ulcers. Current guidelines for the care of pressure injuries provide recommendations for clinical practice, some of which have been shown to effectively reduce the incidence of the problem. Early detection of patients at risk is a key step towards prevention. On the other hand, interventions can be expensive, time-consuming, and may not be effective if patients and their caregivers are not engaged in preventive care programs (Gaspar et al. 2021).

Pressure injuries have a detrimental effect on an individual's physical, psychological, social, and financial well-being. Empowering family caregivers is essential to prevent wounds, improve care outcomes, promote treatment adherence, and implement evidence-based practice guidelines in health care settings (Antony et al. 2022). Patients and their caregivers can participate in solving patient safety problems by actively sharing their feelings, providing information, and following the instructions of the healthcare team. Empowering patients to address their health issues and their participation in treatment decisions, as well as adherence to defined treatment plans, improves treatment outcomes. Before involving patients and their caregivers, a needs assessment should be conducted to clearly define their role in the process (Righi et al. 2020).

Despite the understanding that patient participation in care can be an effective strategy for preventing pressure injuries, and most patients prefer to play an active role in this process, barriers have been identified that make it difficult for them to participate in the prevention and care of these wounds. However, in the latest international practice guidelines, patients and their caregivers are encouraged to play an active role in the prevention and treatment of

pressure injuries. This includes self-directed learning, as well as working with the healthcare team to make informed, evidence-based decisions (García-Sánchez et al. 2019).

Conclusion

It has been shown that patient participation in hospital-acquired pressure injury treatment and care programs improves health care outcomes, treatment adherence, and positively increases patient safety in health care settings. Ensuring that the patients understand their condition and their need for preventive approaches, and assessing their motivation, resources, and ability to act in concordance with the care plan is essential in facilitating therapeutic activities. The clinical professionals should aid in training the patients and their relatives to prevent any skin breakdown in high risk cases. Therefore, the patients and their caregivers should participate in decisions associated with planning, implementation, and evaluation of their treatment process as their legal rights and health professionals should strive for this goal.

Ethical Considerations: The paper is based only on the authors' reflections and does not include hospital data.

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