## CHECKLIST to support the multidisciplinary assessment and management of pressure injury for people with SCI

This checklist is intended for use with the [SCI PI Toolkit](https://www.aci.health.nsw.gov.au/networks/spinal-cord-injury/resources) found on the Agency for Clinical Innovation website. It provides a summary of actions based on best practice guidelines that should be considered in the assessment and management of pressure injuries for people with SCI. Additional information and resources can be found in the toolkit. Not all actions will be applicable to all clients and situations.

### Assessment of Ongoing Pressure Injury Risk

<table>
<thead>
<tr>
<th>Assessment of Ongoing Pressure Injury Risk</th>
<th>Tool / Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Pressure injury risk assessment completed</td>
<td>• Waterlow Pressure Ulcer Scale</td>
</tr>
<tr>
<td>□ Level of risk identified</td>
<td>• Braden Scale</td>
</tr>
<tr>
<td></td>
<td>• SCI PI Toolkit: PI risk assessment in SCI - Risk stratification</td>
</tr>
</tbody>
</table>

### Red Flags

**Persistent Autonomic Dysreflexia (AD)**

- Screening for persistent AD
- AD identified and treated

- [Autonomic Dysreflexia Treatment Algorithm](#)

**Sepsis**

- Screening for sepsis
- Sepsis identified and treated

- [Sepsis Pathway - Clinical Excellence Commission](#)

**Severe malnutrition**

- Screening for severe malnutrition
- Referral made to dietitian for comprehensive nutritional assessment
- Relevant investigations completed
- Referral made to the tertiary Spinal Cord Injury service

- [Malnutrition Screening Tool (MST)](#)
- [Spinal Nutrition Screening Tool (SNST)](#)
- [Mini Nutritional Assessment (MNA)](#)
- [Healthy Eating for Adults Factsheet. ACI 2014](#)

**Multiple pressure injuries**

- Screening for multiple pressure injuries
- Assessment of each wound completed
- Relevant investigations completed
- Referral made to dietitian
- Referral made to the tertiary Spinal Cord Injury service

**Deep wound infection**

- Screening for deep wound infection and possible presence of biofilm
- Investigations for osteomyelitis completed
- Contact with / referral made to the tertiary Spinal Cord Injury service

### Assessment of Wound and Cause and Contributing Factors

<table>
<thead>
<tr>
<th>Assessment of Wound and Cause and Contributing Factors</th>
<th>Tool / Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Comprehensive wound assessment completed</td>
<td>• SCI PI Toolkit: SAMPLE Wound and Contributing Factors Assessment Form</td>
</tr>
<tr>
<td>□ Cause and contributing factors identified</td>
<td></td>
</tr>
<tr>
<td>□ Plan for regular monitoring in place</td>
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</tbody>
</table>

**Wound assessment**

- Location of wound(s) identified
- Possible cause and contributing factors related to wound location identified with the person

- [SCI PI Toolkit: Wound assessment - Location](#)

- Stage of wound determined
- For stage 3, 4, deep tissue and unstageable PIs, a referral has been made to the tertiary Spinal Cord Injury service


- Size of the wound measured and documented
- The position of the person when wound measurements taken is documented

- All other descriptors documented

- Signs of superficial and deep wound infection identified

- Validated tool used to evaluate healing
- Photograph taken in accordance with guidelines

- [Pressure Ulcer Scale for Healing (PUSH)](#)
- [Bates-Jensen Wound Assessment Tool (BWAT)](#)
- [Photographic Wound Assessment Tool (PWAT)](#)

- Screening for adequate community resources to support wound healing
### SCI-specific and other medical conditions contributing to PI and healing

- SCI-specific and other medical conditions identified, assessed and investigated including:
  - Level and extent of SCI impairment
  - Previous Pressure Injury
  - Time since injury
  - Acute illness
  - Ageing
  - Autonomic Dysreflexia
  - Bladder and bowel dysfunction
  - Cognitive Impairment
  - Heterotopic Ossification
  - Leg fracture
  - Pain
  - Poor Nutrition
  - Psychological / Mental Health Disorder
  - Respiratory complications
  - Shoulder / upper limb pain and injury
  - Spasticity and contracture
  - Smoking

- The ACI SCI Pain Navigator

### Nutrition

- Nutritional screen completed
- Comprehensive nutritional assessment completed:
  - Anthropometric measures
  - Physical examination
  - Biochemistry
  - Clinical signs and symptoms
  - Dietary intake
  - Estimated nutrition requirements

- Malnutrition Screening Tool (MST)
- Spinal Nutrition Screening Tool (SNST)
- Mini Nutritional Assessment (MNA)
- Healthy Eating for Adults Factsheet. ACI 2014

### Mechanical factors

- Pressure, friction and shear forces across a 24-hour period identified
- Early referral made to occupational therapist (OT)
- Comprehensive 24-hour assessment completed by OT including:
  - Mobility and weight shifting
  - Positioning and mobility in bed
  - Transfers
  - Support surfaces
  - Activity

- The Pressure Management Assessment Tool (PMAT) designed by Jennifer Birt
- ACI (2014) Occupational Therapy Interventions for Adults with Spinal Cord Injury

### Psychological disorders

- Screening for depression
- Screening for substance use
- Screening for other psychological and mental health disorder

- Brief Psychosocial Clinical Assessment Tool

### Psychosocial and lifestyle factors

- Screening for factors including:
  - Limited social support or living alone
  - Inadequate personal care and/or domestic assistance
  - Caregiver fatigue
  - Financial concerns (Including access to quality equipment, repairs, provision of services)
  - Unsustainable work or family commitments

- Identified:
  - Lifestyle priorities
  - Competing interests, roles and responsibilities
  - Coping and problem solving strategies

- ACI SSCIS Emotional wellbeing toolkit: a clinician’s guide to working with spinal cord injury
- The ACI SCI Pain Navigator

### Psychosocial impact of PI

- A strategy in place to regularly assess the psychosocial impact of a pressure injury

### Self management skills

- Self management support needs addressed
- Level of self-management determined

- Skin Management Needs Assessment Checklist
- Flinders Model of Chronic Condition Self Management
- Principle 1: Self Management p.27 The SSCIS Model of Care for Prevention and Integrated Management of Pressure Injuries in People with Spinal Cord Injury and Spina Bifida
## Management of Wound and Cause and Contributing Factors

<table>
<thead>
<tr>
<th>Wound management</th>
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<tbody>
<tr>
<td>Wound cleansing regime and dressing selected based on outcome of comprehensive wound assessment, bacterial bioburden and the goals of the person with the pressure injury</td>
<td></td>
<td>Consortium of Spinal Cord Medicine Table: Type of dressings</td>
</tr>
<tr>
<td>Sharp debridement done, when indicated</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan for ongoing wound assessment in place</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| SCI-specific and other medical conditions |  |  |
| SCI-specific and other medical conditions addressed  |  |  |
| Referral made to medical specialist when indicated  |  |  |

| Nutrition |  |  |
| Nutrition optimised and malnutrition addressed including:  |  |  |
| - Early nutritional support  |  | Healthy Eating for Adults Factsheet. ACI 2014  |
| - Strategies to facilitate access to nutritional supplements  |  |  |
| - Calculation of SCI-specific calorie, protein and fluid intake  |  |  |
| - Consideration of Arginine, supplements and enteral feeding in accordance with precautions and contraindication  |  |  |

| Mechanical factors over the 24 hour period |  |  |
| Strategy in place to offload / remove pressure from the wound  |  |  |
| Bed positioning plan to offload the wound and protect other at-risk areas devised  |  |  |
| Mattress upgrade considered  |  |  |
| Priority equipment to support optimal pressure management in place  |  |  |
| Monitoring for complications of bed rest  |  |  |
| Gradual return to sitting plan implemented when appropriate  |  |  |
| Wheelchair positioning and support surfaces optimised through early seating assessment  |  |  |
| Pressure redistribution strategies are effective  |  |  |
| All other support surfaces optimised  |  |  |

| Psychosocial and lifestyle factors/Impact of a PI |  |  |
| Essential practical, social and psychological supports  |  |  |
| Possible barriers to successful wound healing identified and managed  |  |  |

| Self Management |  |  |
| Resources supporting self management provided  |  |  |
| Development of a personal action plan facilitated  |  |  |
| Strategy to support the person to make changes to minimise ongoing PI risks  |  |  |
| Referral for case management considered  |  |  |

| Surgical Options |  |  |
| Referral made to the tertiary SCI service  |  |  |
| The person is able to demonstrate post-operative requirements (e.g. bed rest, bed positioning) and has addressed the PI cause and contributing factors  |  | SCI PI Toolkit: SAMPLE Wound and Contributing Factors Assessment Form  |
| Prior to admission, equipment, care and other management strategies are in place for discharge  |  |  |

| Maintenance and non-healable wounds |  |  |
| Referral made to the tertiary SCI service  |  |  |
| Maintenance wound management plan in place  |  |  |
| Monitor for red flags and subtle signs of deterioration  |  |  |
### Referral

<table>
<thead>
<tr>
<th>Referrals made to:</th>
<th>Key Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Nurse Practitioner/ Clinical Nurse Consultant/ Specialist in local health district</td>
<td>• NSW SSCIS Pathway for Management of PI in SCI</td>
</tr>
</tbody>
</table>
| □ SCI-specific services  
  E.g. Spinal Outreach Service (SOS), Rural Coordinator Spinal Outreach Service, Assistive Technology and Seating, Prince of Wales Spinal Seating Clinic, Hunter SCI Service, Paraquad NSW.  
  □ Tertiary SCI services (NSW):  
  o Royal North Shore Hospital Spinal Plastics Service  
  o Prince of Wales Spinal Pressure Care Clinic  
  □ Paediatric Rehabilitation Service (for children with SCI or SB < 18 years of age)  
  □ Spina Bifida Adult Resource Team (SBART) (> 18 years of age). | • ACI SCI Referral Directory  
• Paediatric Rehabilitation Service  
• Spina Bifida Adult Resource Team (SBART)  
• Royal North Shore Hospital Spinal Plastics Service  
• Prince of Wales Spinal Pressure Care Clinic |

### Key Actions

- □ Priority referral made to **multidisciplinary** team including community nurse (and clinical nurse consultant/ specialist / practitioner) and general practitioner
- □ Assessment and **individualised** management plan made in **collaboration** with the person and **communicated** to carers, care providers and the multidisciplinary team with consent from the person
- □ Strategy in place for regular **reassessment** and **evaluation** of management plan to prevent chronic wounds and complications of bed rest