

PERSPECTIVES ON PRESSURE INJURY PREVENTION PRACTICES AMONG NURSES: FACTORS AND PRACTICES EXAMINED

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ABSTRACT

Pressure injuries (PIs), also known as pressure ulcers or bedsores, are prevalent in healthcare settings and pose significant challenges due to their impact on patient health outcomes and healthcare expenditures. Nurses, in their role as primary caregivers, are pivotal in preventing PIs through the application of evidence-based practices. This review article synthesizes current research to explore the multifaceted perspectives, influencing factors, and established practices related to PI prevention among nurses. Key factors influencing PI prevention practices among nurses encompass several domains. Firstly, nurses' knowledge and education on PI prevention guidelines and strategies significantly influence their ability to implement effective preventive measures. Ongoing education and training programs are essential for enhancing nurses' proficiency and adherence to best practices. Secondly, the workplace environment plays a critical role, with factors such as staffing levels, workload, and availability of resources impacting nurses' capacity to provide optimal patient care, including PI prevention. Effective documentation and communication among healthcare team members are vital for ensuring comprehensive assessment, planning, and implementation of PI prevention strategies. Looking forward, future directions in PI prevention among nurses emphasize the importance of innovative technologies, interdisciplinary collaboration, and the development of standardized protocols. Advanced technologies such as pressure mapping systems and wound assessment tools hold promise in enhancing early detection and intervention for PI prevention. Interdisciplinary teamwork involving nurses, physicians, therapists, and wound care specialists can foster a coordinated approach to PI prevention and management. Standardized protocols and guidelines tailored to different healthcare settings are essential in promoting consistent and effective PI prevention practices. Understanding nurses' perspectives on PI prevention is fundamental to improving patient outcomes and promoting a culture of patient safety in healthcare environments. By addressing knowledge gaps, enhancing resources, and fostering collaborative efforts, healthcare organizations can effectively reduce the incidence and severity of PIs, thereby improving overall patient care quality and reducing healthcare costs associated with PI management. This review underscores the critical role of nurses in PI prevention, highlights key factors influencing prevention practices, identifies current evidence-based strategies, discusses existing challenges, and outlines future directions for advancing PI prevention efforts in healthcare settings.

Keywords: Pressure injuries, Nurses, Prevention practices, Evidence-based, Factors Healthcare settings, Perspectives.

INTRODUCTION

Pressure injuries (PIs), also known as pressure ulcers or bedsores, are debilitating conditions characterized by localized damage to the skin and underlying tissue. They result from prolonged pressure, often in combination with shear forces, leading to tissue ischemia, necrosis, and potential ulceration. PIs typically develop over bony prominences such as the sacrum, heels, elbows, and back of the head, where pressure restricts blood flow to the affected area, impairing tissue viability. The impact of PIs on patients is profound, contributing to pain and discomfort, prolonging hospital stays, increasing healthcare costs, and in severe cases, contributing to mortality. Prevention of PIs is therefore paramount in healthcare settings, not only to improve patient outcomes but also to reduce economic burdens on healthcare systems. Nurses occupy a pivotal role in PI prevention due to their direct and continuous patient care responsibilities. They are at the forefront of implementing evidence-based practices aimed at reducing the incidence of PIs. These practices include proactive measures such as regular skin assessments, appropriate positioning and repositioning of patients, meticulous skin care to maintain skin integrity, management of moisture, and the use of support surfaces to alleviate pressure on vulnerable areas. The significance of nurses in PI prevention cannot be overstated. Their role extends beyond the application of preventive measures to encompass patient education, interdisciplinary collaboration with healthcare teams, and advocacy for optimal patient care practices. Nurses' adherence to standardized guidelines and protocols is crucial in ensuring consistency and effectiveness in PI prevention efforts across different healthcare settings. This review aims to explore the multifaceted perspectives of nurses regarding PI prevention practices. It will delve into the factors influencing their practices, including their knowledge base, educational preparation, the impact of the healthcare environment, challenges encountered in daily practice, and the utilization of evidence-based strategies. By synthesizing current research and perspectives, this review seeks to provide insights into how nurses can enhance their roles in PI prevention, thereby improving patient outcomes and fostering a culture of safety in healthcare environments.

FACTORS INFLUENCING PRESSURE INJURY PREVENTION PRACTICES

KNOWLEDGE AND EDUCATION: Knowledge and Education play a crucial role in influencing nurses' ability to effectively implement pressure injury (PI) prevention strategies. Nurses must possess a solid understanding of PI prevention guidelines and evidence-based

practices to deliver optimal patient care and mitigate risks associated with PIs. Comprehensive knowledge of PI prevention begins with understanding the underlying causes, risk factors, and preventive measures associated with these injuries. Nurses who are well-versed in these aspects can conduct thorough risk assessments, identify vulnerable patients, and initiate appropriate preventive interventions promptly. This knowledge is particularly critical in healthcare settings where patients may be immobilized, elderly, or have underlying health conditions predisposing them to PI development. Ongoing education and training programs are instrumental in updating nurses' knowledge and skills in PI prevention. These programs ensure that nurses remain current with evolving best practices and guidelines endorsed by organizations such as the National Pressure Injury Advisory Panel (NPIAP) and the European Pressure Ulcer Advisory Panel (EPUAP). Training sessions may cover topics ranging from the importance of regular skin assessments to the proper use of support surfaces and advanced wound care techniques. Studies consistently highlight the positive impact of continuing education on nurses' ability to implement effective PI prevention strategies. Nurses who participate in regular training sessions demonstrate higher levels of knowledge retention and are more likely to adhere to evidence-based guidelines. This adherence is crucial in reducing PI incidence and severity, thereby improving patient outcomes and quality of life.

WORKPLACE ENVIRONMENT: The workplace environment within healthcare settings exerts a profound influence on nurses' capacity to deliver effective patient care, especially in the realm of pressure injury (PI) prevention. Several critical factors, including staffing levels, workload pressures, and the availability of resources, collectively shape the ability of nurses to implement and maintain comprehensive PI prevention strategies.

Staffing Levels: Staffing levels refer to the ratio of nurses to patients within a healthcare facility. Adequate staffing is essential for ensuring that nurses can allocate sufficient time and attention to each patient's care needs, including PI prevention. High nurse-to-patient ratios, often exacerbated by nursing shortages or budget constraints, can strain the healthcare workforce. When nurses are responsible for a larger number of patients, they may face challenges in conducting timely and thorough skin assessments, adhering to repositioning schedules, and providing necessary wound care interventions. Inadequate staffing can lead to rushed assessments, missed opportunities for preventive measures, and compromised patient safety, thereby increasing the risk of PI development among vulnerable individuals.

Workload Pressures: Workload pressures encompass the volume and complexity of tasks that nurses are required to perform during their shifts. Nurses juggle diverse responsibilities, from direct patient care and medication administration to documentation and communication with multidisciplinary teams. Heavy workloads can overwhelm nurses, leaving insufficient time for comprehensive PI prevention activities. Nurses may struggle to maintain consistent adherence to preventive measures such as turning and repositioning patients, conducting regular skin assessments, and implementing appropriate skin care protocols. Moreover, workload pressures can contribute to fatigue and burnout among nursing staff, potentially compromising their ability to deliver high-quality care and uphold patient safety standards.

Available Resources: Access to adequate resources is crucial for effective PI prevention. This includes essential supplies, equipment, and support surfaces designed to reduce pressure and shear forces on patients' skin. Pressure-relieving mattresses, cushions, and advanced wound care products are integral to mitigating the risk of PI development. Insufficient availability, maintenance, or funding for these resources can severely limit nurses' ability to implement evidence-based prevention strategies. Additionally, access to ongoing education, training programs, and clinical guidelines specific to PI prevention is essential for equipping nurses with the knowledge and skills necessary to deliver optimal care.

Impact on PI Prevention Efforts: The interplay of staffing levels, workload pressures, and resource availability significantly influences PI prevention efforts within healthcare environments. When these factors are not adequately addressed, nurses may encounter barriers that hinder their ability to consistently implement preventive protocols. This can lead to variability in care quality and outcomes, potentially resulting in increased rates of PI incidence and severity among patients. Suboptimal PI prevention practices not only compromise patient well-being but also contribute to heightened healthcare costs associated with extended hospital stays, additional treatments, and potential legal implications.

Addressing Workplace Challenges: To enhance PI prevention efforts and improve patient outcomes, healthcare organizations must prioritize initiatives aimed at addressing workplace challenges effectively. This includes implementing staffing models that consider patient acuity levels and workload demands to ensure appropriate nurse-to-patient ratios. Streamlining administrative tasks and providing adequate support for documentation can alleviate workload pressures on nursing staff. Moreover, ensuring sufficient allocation of resources for PI prevention, including regular maintenance and updates of equipment and supplies, is essential.

DOCUMENTATION AND COMMUNICATION: Accurate documentation and clear communication are foundational aspects of effective pressure injury (PI) prevention within healthcare settings. These practices ensure that healthcare teams can systematically assess, plan, and implement preventive strategies tailored to individual patient needs. Here’s an elaboration on their critical roles:

Accurate Documentation:

Accurate documentation involves recording comprehensive information related to PI risk assessments, preventive measures implemented, and patient-specific factors influencing vulnerability to PIs. This documentation serves multiple crucial purposes:

1. **Risk Assessment:** Nurses conduct regular assessments to identify patients at risk of developing PIs based on factors such as immobility, sensory deficits, nutritional status, and comorbidities. Documenting these assessments allows healthcare providers to track changes in patients' risk levels over time and adjust preventive strategies accordingly.
2. **Preventive Measures:** Documenting the preventive measures taken, such as repositioning schedules, use of pressure-relieving devices, skincare protocols, and nutritional interventions, ensures consistency in care delivery. It provides a clear record of interventions aimed at reducing pressure and shear forces on vulnerable areas of the skin.
3. **Patient-Specific Factors:** Each patient presents unique factors that contribute to their susceptibility to PIs. Documenting these factors—such as the presence of medical devices, history of previous PIs, medications affecting skin integrity, and specific anatomical considerations—guides personalized care planning and intervention strategies. Accurate documentation not only supports individualized care but also facilitates communication among healthcare team members, ensuring continuity and coherence in patient management.

Clear Communication:

Clear communication among healthcare team members is essential for ensuring that PI prevention protocols are consistently implemented and coordinated across disciplines. Key aspects include:

1. **Interdisciplinary Collaboration:** Effective PI prevention requires collaboration among nurses, physicians, wound care specialists, physical therapists, and other healthcare professionals. Clear communication channels enable these teams to share pertinent patient information, discuss treatment plans, and coordinate care seamlessly.
2. **Handoffs and Transitions of Care:** During shift changes, patient transfers, or referrals to different departments, clear communication ensures that essential information about PI risk

status, ongoing preventive measures, and specific patient needs is conveyed accurately. This continuity minimizes the risk of gaps in care that could compromise patient safety.

3. Education and Training: Communication plays a vital role in disseminating knowledge about PI prevention guidelines, protocols, and best practices among healthcare team members. Regular updates and educational sessions promote a shared understanding of expectations and responsibilities in preventing PIs.

4. Monitoring and Evaluation: Clear communication facilitates ongoing monitoring of patient progress, evaluation of the effectiveness of preventive interventions, and timely adjustments to care plans as needed. This iterative process ensures that interventions are responsive to changes in patients' conditions and evolving risk factors.

Accurate documentation of PI risk assessments, preventive measures, and patient-specific factors provides a comprehensive foundation for individualized care planning and continuity of care. Clear communication among healthcare team members supports interdisciplinary collaboration, enhances patient safety, and promotes adherence to standardized prevention protocols. These practices are essential in mitigating the incidence and severity of PIs, improving patient outcomes, and fostering a culture of patient-centered care within healthcare environments.

PATIENT FACTORS: Individual patient characteristics play a pivotal role in determining the risk of developing pressure injuries (PIs) within healthcare settings. Factors such as mobility limitations, nutritional status, and comorbidities significantly influence the vulnerability of patients to PIs. Nurses are tasked with conducting thorough risk assessments and customizing preventive strategies to address the specific needs of each patient. Here's an in-depth elaboration on these aspects:

Mobility Limitations: Mobility limitations, such as bedridden status, wheelchair dependence, or restricted ambulation, increase the risk of PIs due to prolonged pressure on specific areas of the body. Immobile patients may experience reduced blood flow and tissue perfusion, making them more susceptible to tissue damage and skin breakdown. Nurses assess the degree of immobility and formulate preventive measures such as regular repositioning schedules, use of pressure-relieving devices like specialized mattresses or cushions, and therapeutic exercises to promote circulation and tissue integrity.

Nutritional Status: Nutritional status plays a critical role in skin health and wound healing. Patients with inadequate nutrition, dehydration, or malnutrition have compromised skin

integrity, impairing its ability to withstand pressure and shear forces. Nurses evaluate nutritional intake, monitor weight changes, and collaborate with dietitians to develop personalized nutrition plans. Adequate protein intake, hydration, and supplementation of essential vitamins and minerals are emphasized to support tissue repair and prevent PI development.

Comorbidities: Patients with underlying health conditions, such as diabetes, peripheral vascular disease, spinal cord injury, or neurologic disorders affecting sensation or mobility, are at heightened risk for PIs. These conditions contribute to impaired circulation, sensory deficits, or reduced tissue tolerance to pressure. Nurses conduct comprehensive assessments to identify relevant comorbidities and their impact on PI risk. They integrate management strategies, including medication management, specialized wound care, and adjustments in positioning or support surfaces, to mitigate risk factors and optimize patient outcomes.

Comprehensive Risk Assessments: Nurses employ standardized tools and guidelines to perform systematic PI risk assessments for all patients upon admission and throughout their hospitalization. These assessments consider not only physical factors but also psychosocial factors that may affect adherence to prevention strategies. Assessment parameters typically include skin condition, moisture levels, activity level, nutritional status, presence of medical devices, and cognitive status. By identifying individual risk factors, nurses can prioritize preventive interventions and monitor changes in patient status over time.

Tailored Prevention Strategies: Based on risk assessment findings, nurses develop individualized care plans that outline specific preventive measures tailored to each patient's needs. Strategies may include:

- Implementing a regular turning and repositioning schedule to relieve pressure on vulnerable areas.
- Applying moisture barriers and appropriate skincare products to maintain skin integrity and prevent moisture-associated skin damage.
- Educating patients and caregivers on proper positioning techniques, self-monitoring of skin condition, and early detection of PI signs.
- Collaborating with interdisciplinary teams to address underlying health conditions and optimize overall care management.

EVIDENCE-BASED PREVENTION PRACTICES

Skin Assessment and Monitoring: Regular and thorough skin assessments are essential components of pressure injury (PI) prevention in healthcare settings. Nurses conduct systematic evaluations using standardized assessment tools to detect early signs of tissue damage or PI development. These assessments typically involve inspecting high-risk areas such as the sacrum, heels, elbows, and back of the head for any changes in skin integrity, including discoloration, erythema, blanching, or skin breakdown. Documentation of assessment findings is crucial for tracking skin health status, identifying at-risk patients, and initiating timely preventive interventions.

Positioning and Repositioning: Proper positioning and regular repositioning of patients play a critical role in PI prevention. Nurses develop individualized turning schedules based on patient mobility, medical condition, and risk assessment results. The goal is to alleviate pressure on vulnerable areas by redistributing weight and reducing prolonged tissue compression. Techniques may include lateral rotation, 30-degree tilt, and use of supportive devices such as pillows, wedges, or specialty beds. These measures aim to minimize friction and shear forces that contribute to tissue damage, particularly in immobile or bedridden patients.

Skin Care and Moisture Management: Effective skin care and moisture management strategies are essential in maintaining skin integrity and preventing PI development. Nurses promote skin health through gentle cleansing using pH-balanced cleansers, moisturizing with emollients or barrier creams to hydrate and protect the skin barrier, and avoiding prolonged exposure to moisture or friction. Patient-specific considerations such as incontinence, perspiration, or wound drainage require tailored approaches to prevent moisture-associated skin damage. Education of patients and caregivers on proper skin care practices reinforces preventive measures and empowers individuals to recognize early signs of skin compromise.

Support Surfaces: The selection and use of appropriate support surfaces are critical in reducing pressure and shear forces on patients' skin. Nurses assess individual patient needs based on risk factors, mobility status, and medical conditions to determine the most suitable support surface. Options include specialized pressure-relieving mattresses, overlays, alternating pressure pads, and cushions designed to distribute weight evenly and promote tissue perfusion. Proper fitting, adjustment, and maintenance of support surfaces ensure optimal effectiveness in preventing PI development.

Integration of Strategies: Effective PI prevention requires an integrated approach that

combines regular skin assessments, proper positioning and repositioning, meticulous skin care and moisture management, and the use of supportive devices. Nurses collaborate with multidisciplinary teams to develop comprehensive care plans that address individual patient needs and promote consistent adherence to preventive protocols. Continuous monitoring and evaluation of outcomes allow for adjustments in care strategies to optimize patient safety and skin integrity.

A proactive approach to PI prevention through skin assessment, positioning strategies, skin care practices, and support surface selection is essential in healthcare settings. Nurses' expertise in implementing evidence-based interventions not only reduces the incidence of PIs but also enhances overall patient comfort, promotes wound healing, and improves healthcare outcomes. By prioritizing preventive measures, healthcare providers contribute to maintaining high standards of patient care and safety across diverse clinical environments.

CHALLENGES AND BARRIERS

Time Constraints: Time constraints represent a significant challenge for nurses in implementing comprehensive pressure injury (PI) prevention measures. Heavy workloads and demanding patient care responsibilities often limit the time available for nurses to dedicate to preventive interventions such as regular repositioning and thorough skin assessments.

1. Heavy Workload: Nurses frequently face packed schedules and a multitude of tasks that must be completed within a limited timeframe. The need to prioritize urgent patient care needs, administer medications, attend to physician orders, and address emergent situations can leave little room for consistent implementation of PI prevention protocols. As a result, scheduled activities like turning and repositioning patients to relieve pressure on vulnerable areas may be delayed or abbreviated.

2. Time Management Challenges: Efficient time management becomes crucial as nurses strive to balance direct patient care duties with documentation requirements, interdisciplinary communication, and patient education. Limited time for thorough assessments and preventive interventions can compromise the effectiveness of PI prevention efforts, potentially increasing the risk of skin breakdown and PI development in at-risk patients.

Resource Limitations: Resource limitations present another obstacle to effective PI prevention practices within healthcare settings. These constraints may encompass inadequate staffing levels, limited access to specialized equipment, and insufficient training opportunities for

nursing staff.

1. **Staffing Challenges:** Understaffing or high nurse-to-patient ratios can strain nursing resources and impact the quality and frequency of patient care interventions. Nurses may find themselves responsible for a larger number of patients, reducing the amount of time available for individualized care and preventive measures. This can lead to gaps in surveillance, delayed responses to patient needs, and increased vulnerability to PIs among hospitalized individuals.
2. **Access to Equipment:** Availability and maintenance of specialized pressure-relieving devices, such as alternating pressure mattresses, foam overlays, and heel protectors, are essential for effective PI prevention. Limited access to these resources due to budget constraints or equipment shortages may restrict nurses' ability to implement evidence-based strategies aimed at reducing pressure and shear forces on patients' skin. Inadequate equipment can compromise the efficacy of preventive measures and hinder efforts to maintain skin integrity in high-risk populations.
3. **Training and Education:** Comprehensive training and ongoing education are critical for equipping nurses with the knowledge and skills necessary to implement PI prevention guidelines effectively. Insufficient training opportunities on the latest evidence-based practices, wound care techniques, and preventive interventions may contribute to variability in care delivery and adherence to established guidelines. Addressing these gaps through targeted educational initiatives can empower nurses to enhance their proficiency in PI prevention and promote standardized care practices across healthcare settings.

Adherence to Guidelines: Variability in adherence to evidence-based guidelines among healthcare providers poses challenges in standardizing PI prevention practices across different healthcare settings. Despite established protocols and recommendations from organizations such as the National Pressure Injury Advisory Panel (NPIAP) and the European Pressure Ulcer Advisory Panel (EPUAP), adherence levels among nursing staff can vary significantly.

1. **Barriers to Adherence:** Factors contributing to inconsistent adherence to guidelines include differences in clinical judgment, individual interpretations of protocols, competing priorities in patient care, and varying levels of knowledge and experience among healthcare providers. Lack of awareness or familiarity with updated guidelines may also influence adherence rates and the implementation of best practices in PI prevention.
2. **Promoting Consistency:** Addressing variability in guideline adherence requires systematic approaches such as standardized protocols, continuous quality improvement initiatives, and regular audits to monitor compliance and outcomes. By promoting a culture of adherence to

evidence-based practices through education, training, and performance feedback, healthcare organizations can enhance consistency in PI prevention efforts and improve patient outcomes across care settings.

Addressing challenges related to time constraints, resource limitations, and adherence to guidelines is essential for optimizing pressure injury prevention practices in healthcare environments. By prioritizing adequate staffing levels, ensuring access to necessary equipment and training, and promoting standardized care protocols, healthcare organizations can support nurses in delivering high-quality, evidence-based care that reduces the incidence and severity of PIs and enhances patient safety and well-being.

FUTURE DIRECTIONS

Further research is crucial to advancing pressure injury (PI) prevention practices, particularly in exploring innovative technologies, interventions, interdisciplinary collaboration, and standardized protocols. These areas represent opportunities to improve patient outcomes and mitigate the challenges faced within healthcare systems.

Innovative Technologies and Interventions: Advancements in technology offer promising avenues for enhancing PI prevention. Research is needed to evaluate the effectiveness of innovative devices such as pressure mapping systems, smart beds, and wearable sensors in early detection and intervention of pressure-related tissue damage. These technologies provide real-time data on pressure distribution and tissue perfusion, enabling nurses to adjust care interventions promptly and tailor preventive strategies based on individual patient needs. Additionally, studies exploring the integration of artificial intelligence (AI) algorithms for predictive analytics and risk stratification can further optimize preventive care approaches.

Interdisciplinary Collaboration: Effective PI prevention requires collaborative efforts among healthcare professionals from diverse disciplines, including nurses, physicians, wound care specialists, physical therapists, dietitians, and occupational therapists. Interdisciplinary collaboration facilitates comprehensive patient assessments, holistic care planning, and coordinated implementation of preventive measures. Research should focus on enhancing communication channels, teamwork dynamics, and shared decision-making processes among interdisciplinary teams to foster a cohesive approach to PI prevention across care settings.

Standardized Protocols: The development and implementation of standardized protocols are essential for promoting consistent adherence to evidence-based guidelines in PI prevention. Research initiatives should investigate the impact of standardized care pathways, protocols, and

quality improvement initiatives on reducing PI incidence and improving patient outcomes. Emphasis should be placed on evaluating the scalability, feasibility, and effectiveness of standardized protocols across diverse healthcare environments and patient populations. Comparative studies can also assess variations in outcomes associated with different protocols to identify best practices and inform guideline revisions.

Addressing Healthcare System Challenges: System-level challenges, such as staffing shortages, resource allocation constraints, and competing priorities, significantly impact nurses' ability to implement effective PI prevention strategies. Research efforts should explore strategies for optimizing healthcare system infrastructure, including workforce planning models, staffing ratios, and resource allocation frameworks. Studies examining the economic impact of PI prevention interventions and cost-effectiveness analyses of innovative technologies can provide valuable insights for healthcare administrators and policymakers in allocating resources strategically.

Advancing PI prevention practices requires a multifaceted research agenda encompassing technological innovation, interdisciplinary collaboration, standardized protocols, and systemic improvements within healthcare systems. By investing in research initiatives that address these key areas, healthcare stakeholders can enhance patient safety, improve quality of care, and reduce healthcare costs associated with PI management. Ultimately, supporting nurses in their efforts to prevent PIs effectively requires a comprehensive approach that integrates evidence-based practices with innovative solutions and collaborative teamwork across the healthcare continuum.

SUMMARY

Nurses play a pivotal role in PI prevention due to their direct and continuous patient care responsibilities. They implement evidence-based practices such as regular skin assessments, appropriate patient positioning and repositioning, meticulous skincare routines, moisture management strategies, and the use of support surfaces to mitigate pressure on vulnerable areas. These preventive measures are essential as PIs can cause significant patient discomfort, prolong hospital stays, increase healthcare costs, and, in severe cases, lead to mortality. Effective PI prevention begins with nurses' knowledge and education. Continual learning ensures that nurses remain updated on the latest guidelines and best practices endorsed by organizations such as the National Pressure Injury Advisory Panel (NPIAP) and the European Pressure Ulcer Advisory Panel (EPUAP). Ongoing education equips nurses to conduct thorough risk assessments,

identify at-risk patients, and implement timely preventive interventions. Studies consistently highlight the positive impact of continuing education on nurses' ability to adhere to evidence-based guidelines, ultimately reducing PI incidence and severity. Nurses' multifaceted perspectives on PI prevention underscore their critical role in mitigating PI-related complications. By fostering a supportive environment that values education, resources, and evidence-based practices, healthcare organizations can empower nurses to enhance patient safety, improve care quality, and reduce the burden of PIs on both patients and healthcare systems. Continued research and advocacy for optimal healthcare policies are essential in advancing PI prevention efforts and reinforcing nurses' pivotal role in promoting a culture of safety and excellence in patient care.

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