Skin Integrity Care Plan Example

Focus / Problems	Goal	Interventions
Resident is at risk for impaired skin integrity related to impaired mobility, incontinence of urine and stool, less than adequate nutritional intake as evidenced by BMI <19 and low prealbumin.	Resident will remain free of pressure ulcers/injury through next review.	• Assist with bed mobility, turning and repositioning • Assess skin weekly • Pressure reduction cushion to wheelchair • Pressure reduction mattress to bed • Float heels when in bed • Cleanse patient following incontinent episodes • Apply house barrier cream • Monitor and document food and fluid intake • Administer supplements as ordered • Refer to dietitian
Focus / Problems	**Goal**	**Interventions**
Resident has an alteration in skin integrity as evidenced by pressure injury to sacrum related to resident declined assistance to reposition in bed, prefers to lay on back with head of bed chronically elevated, often declines assistance with incontinence care.	Wound will not worsen through next review.	• Educate resident about importance of re-positioning to offload pressure • Continue to offer to assist with repositioning • Apply treatment as ordered • Educate resident about risks of refusing assistance with incontinence care • Assess wound weekly • Low air loss mattress to bed • Air cushion to wheelchair • Report worsening of wound to MD • Monitor and document food and fluid intake • Administer supplements as ordered • Refer to dietitian • Refer to therapy for positioning devices to offload pressure and incorporate resident preferences

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