



An investigation of the impact of the Force Sensing Array pressure mapping system on the clinical judgement of occupational therapists

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Abstract:

Objectives: To examine the impact of pressure mapping technology on the clinical decisions of occupational therapists and to examine the role of the Braden Scale in assisting with the selection of pressure-reducing cushions.

Design: Case studies.

Setting: Community.

Subjects: Forty clients.

Interventions: Clients were pressure mapped on their current seating surface and on four pre-selected cushions by the principal researcher. An occupational therapist completed the Braden Scale and a decision tree to assist in recommending a suitable pressure-reducing cushion.

Main outcome measures: Interface pressure maps, Braden Scale, and the cushion recommended, using a decision tree to guide clinical judgement.

Results: Thirty per cent (12) of the 40 cushions recommended were changed when the pressure maps from the Force Sensing Array (FSA) system were viewed. In 70% (26) of cases, the maps supported the cushion recommended. In 25% (10) of the cases, the maps showed that the client's current seating surface was unsuitable. After viewing the pressure maps, a surface other than the client's current surface was recommended in 47% (19) of the cases. There was a lack of agreement between the risk level of the clients as identified by the Braden Scale score, and the risk level of the clients as identified by the occupational therapist using a decision tree and the FSA maps.

Conclusion: Pressure mapping technology has a positive impact on clinical decisions regarding the provision of pressure-reducing cushions. Future research should examine the predictive validity of this

technology. The Braden Scale may underpredict the risk level of the clients.

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