

Supporting pressure ulcer prevention and pressure-relieving therapy. Relieving vulnerable or already damaged tissue is a central element of wound care. Changing body position is intended to reduce sustained loading of individual areas. Where a pressure ulcer exists, the position must be selected so that the affected area is not subjected to further pressure wherever possible. Turn All® can support implementation of this aim in practice; whether sufficient relief is actually achieved at the wound site must be checked on the patient. [1] We therefore particularly value the possibility of using this technical support specifically in the care of people at high risk of pressure ulcers or with existing pressure ulceration.

Lateral support for assisted, comfortable positioning. A noteworthy design feature is the support system on the side opposite the main lifting area. According to the manufacturer, the slight counter-lift is intended to reduce the sensation of sliding away from the raised side and to lower the risk of shear forces. [2] From a wound care perspective, we consider this function particularly useful, as controlled, supported positioning is very important for repositioning that protects skin and tissue. The lateral support may also promote a subjective sense of security. How comfortable the movement feels to each patient must be assessed individually.

Reduced physical strain on nursing professionals. A major benefit for staff is that suitable repositioning movements, specified by qualified personnel, can be carried out automatically. This can reduce recurring manual repositioning tasks. Levabo explicitly describes the reduction in manual handling as a function of the system. [2] For us, this reduction in physical effort is an important everyday nursing benefit. Particularly where patients require consistently high levels of assistance, suitable technical aids can help reduce strenuous tasks. Necessary manual adjustments, transfers and individually tailored pressure-relief measures remain part of patient care.

More time and better planning in daily nursing care. In our practical experience, automating repeated repositioning makes it easier to organise care. Not every technically achievable change of position needs to be organised as a fully manual repositioning task. This may free up time and allow nursing attention to be directed more specifically towards skin checks, wound treatment, communication and other individually required interventions. In out-of-hospital ventilation and intensive care, this organisational benefit is particularly important because many care tasks have to be coordinated in parallel. We see this as contributing to more predictable daily care and better use of existing professional expertise.

Potential for more efficient use of resources. Given the shortage of qualified nursing staff, this relief also has an economic dimension. When suitable recurring tasks are supported by technology, existing staffing resources can be deployed more purposefully. We see meaningful potential to reduce pressure on staffing and financial resources. However, the overall economic benefit depends on duration of use, purchase or rental costs, maintenance, training and the remaining level of care required. Based on our experience, a specific net saving cannot be quantified without appropriate data collection. What matters to us is making qualified nursing time available where observation, professional judgement and personal attention are needed.

Encouraging movement where some mobility remains. We also see an interesting opportunity for patients with residual mobility. A change in body position can offer an occasion to make use of remaining movement abilities and encourage active participation. Where the patient's condition allows, nursing staff can combine repositioning with prompts to perform small independent movements. In our view, Turn All® can thus be integrated into an activating care approach. The movement generated by the technology is initially a passive change of position; improvement in independent mobility occurs only through the patient's actual active participation.

Useful support within an individually planned intensive care programme. In out-of-hospital ventilation and intensive care, automated support must be closely coordinated with individual care. Particular considerations include tolerance of position changes and the secure placement and sufficient slack of ventilator tubing, tracheostomy tubes, feeding tubes and other lines and drains. During movement, medical devices must neither cause traction nor create additional pressure points. [3] We regard the system as especially valuable when used within such professionally planned care, with the patient's responses guiding any further settings and use.

Professional nursing observation and assessment remain fully necessary. The system carries out the selected movement patterns; responsibility for indication, settings, monitoring and adjustments remains with the treatment team. Skin and wound condition, pain, comfort and the actual pressure relief achieved must be assessed regularly. Additional measures, such as targeted heel offloading, may still be necessary. [1, 4] If the patient's condition changes or pressure relief is insufficient, the approach must be adapted. In our view, this ongoing professional supervision is part of proper use and helps ensure that the technology's advantages are used appropriately for each patient.

After two years of practical evaluation, we see Turn All® as a valuable enhancement to our wound management. We are particularly impressed by its support for regular repositioning, its lateral support and the reduced burden on the nursing team. For suitable patients at high risk of pressure ulcers or with existing pressure ulceration, we explicitly assess its use within an individually adapted care plan positively. Its particular value to us lies in making consistent positioning easier in daily care while creating more room for the demanding tasks of professional nursing.

Professional references

- [1] NPIAP, EPUAP and PPPIA. Repositioning and Mobilization. In: The International Guideline, Fourth Edition, online chapter published 24 August 2026. <https://www.internationalguideline.com/repositioning>
- [2] Levabo. Turn All® 3C. Manufacturer brochure, version dated 9 December 2021. Description of design and intended benefits; not independent evidence of effectiveness. <https://www.levabo.com/wp-content/uploads/2022/01/Turn-All-3C-Flyer-EN-2022-Web.pdf>
- [3] International Guideline. Device Related Pressure Injuries. <https://www.internationalguideline.com/drpi>
- [4] International Guideline. Preventing Heel Pressure Injuries. <https://www.internationalguideline.com/heels>

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A large, stylized handwritten signature in blue ink, written over the contact information and extending across the bottom of the letter.

Mit freundlichen Grüßen
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