

Process for providing Pressure Care Equipment

On first identifying a pressure ulcer (category / stage 1,2,3 or, 4) liaise with Pressure Clinic Staff.



Do not continue to mobilise until pressure mark has faded completely unless contra indicated by Pressure Clinic Staff / Community Liaison / Consultant / Tissue Viability Nurses

Provision of appropriate equipment to provide pressure relief.

This will be pressure relieving equipment from the Open commercial market (Medical Sheepskin / Gel Ovation pad) or made by Medical Engineering (CM30 foam padding).



Remobilise with cushion or padding. Feedback received from Patient, Case conference, Whiteboard MTG from multi disciplinary staff.
Review – if appropriate



If not adequate, consider custom built / higher pressure relief materials. This will be pressure relieving equipment that is made by an established manufacturer or Medical Engineering

Do not continue to mobilise if skin deteriorates and inform Pressure Clinic Staff



Pressure Clinic Staff to liaise with Wheelchair Services if the equipment is felt to be a long term need (provision on discharge).

If the equipment required is integral to the wheelchair (for example, - a padded armrest, as opposed to a pressure cushion for the arm rest) – queries for this need to be directed towards the Wheelchair Technician in the Therapy Department.