

Medical Grade Sheepskin Practitioner Resource

In response to clinical evidence supporting the effectiveness of medical grade sheepskin for the prevention of pressure injury, SWEP added this item to our quotable picklist in October 2019. These items are funded from the consumer's pressure care subsidy. You will now be able to find this item available under the quotable pick list under Seating – T1.11 & Bedding – B2.7

AT Practitioners will need to ensure that items requested are in fact medical grade sheepskin, and this detail will need to be clearly indicated on quotes provided. SWEP will only fund sheepskins that are dark green in colour and have the standards stamp or tag to indicate they are compliant with the high-temperature AS4480.1 medical grade sheepskin standard.

Clinical reasoning and risk assessment

As with all pressure care strategies, medical grade sheepskin is not a one size fits all solution. There are multiple factors to be considered about the consumer and the environment where the sheepskin is to be used. SWEP would like to stress that it views medical grade sheepskin as most appropriate for use in situations where a low pressure injury risk has been identified. It is rarely, if ever, appropriate for open wounds or situations assessed as being moderate or high pressure injury risk.

Prior to requesting a medical grade sheepskin item, SWEP expects AT practitioners to complete a thorough pressure care risk assessment. This could involve using a scale such as the Braden or Waterlow assessment tool. You will also need to assess:

- the size and weight of the consumer
- mobility of the consumer and activities that need to be done while using the sheepskin,
- location, number and severity of existing pressure ulcers,
- anticipated progression or change to pressure injury risk,
- support available to position and/or maintain the sheepskin,
- how the sheepskin interacts with other items used by the consumer,
- what factors are contributing to the pressure care risk and whether sheepskin is appropriate for addressing them, and
- any other item/s that may be more suitable.

To reflect the higher level of clinical decision making that is required to ensure that medical grade sheepskin is being used appropriately, these items have been rated as Amber. As with all applications through SWEP, if consumer attributes are significant and complex the overall rating of the application may be increased to red.

Evidence supporting this addition

A Cochrane Systematic Review (2015) concluded that “medical grade sheepskins are associated with a decrease in pressure ulcer development” (reference 1). A number of randomised clinical trials have showed decreased rates of pressure ulcers through use of a medical grade sheepskin mattress overlay (references 2, 3 and 4).

The 2014 Clinical Practice Guidelines for Prevention and Treatment of Pressure Ulcers (reference 5) state that pressure, shear, heat, and moisture are significant contributing factors for tissue breakdown. A report by the *Medicines and Healthcare Products Regulatory Agency (MHRA)* showed medical grade sheepskin to perform favourably to address these factors (reference 6).

References

- (1) McInnes, E., Jammali-Blasi, A., Bell-Syer, S., Dumville, J., Middleton, V. & Cullum, N. (2015). Support surfaces for pressure ulcer prevention. Cochrane Database of Systematic Reviews 2015(9) Issue 9. DOI: 10.1002/14651858.CD001735.pub5.
- (2) Jolley, D., Wright, R., McGowan, S., Hickey, M., Campbell, D., Sinclair, R. & Montgomery, K. (2004). Preventing pressure ulcers with the Australian Medical Sheepskin: an open-label randomised controlled trial. *Med J Aust* 180(7) ,324-327.
- (3) McGowan, S.; Montgomery, K.C.; Jolley, D.J.; Wright, R (2000). The role of sheepskins in preventing pressure ulcers in elderly orthopaedic patients Primary Intention: The Australian Journal of Wound Management 8(4), 1-8.
- (4) Mistiaen P1, Achterberg W, Ament A, Halfens R, Huizinga J, Montgomery K, Post H, Spreeuwenberg P, Francke AL. (2010). The effectiveness of the Australian Medical Sheepskin for the prevention of pressure ulcers in somatic nursing home patients: a prospective multicenter randomized-controlled trial. *Wound Repair Regen* 18(6), 572-579.
- (5) National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers: Clinical Practice Guideline. Emily Haesler (Ed.). Cambridge Media: Osborne Park, Western Australia; 2014.
- (6) Bain, D.; Ferguson-Pell, M.; Nicholson, G. (2004). Pressure reducing overlays. MHRA Evaluation Reports MHRA 04101-0).