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| **Pressure redistributing equipment: A guide for community clinicians** |

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| **Key Points to consider before choosing equipment:**   * If your patient needs equipment it is the prescribers responsibility (that means you) to ensure that you understand how pressure relieving equipment works. * You need to ensure correct equipment is prescribed by using a full clinical assessment and your clinical judgement to decide which piece of equipment is suitable and effective for your patient (this is in your code of conduct if you are a nurse). * Do not fear if you need support and assistance -read on- this guide has been done so you are aware what pressure relieving equipment is available and if this does not help then contact Oxfordshire Tissue Viability service (OCTVS) and we will be happy to help. * The quickest way to contact us is by email – [tissueviability@oxfordhealth.nhs.uk](mailto:tissueviability@oxfordhealth.nhs.uk) Please put in the title of the email if the equipment is same day or next day and urgent. * If you need an equipment referral form please download it from our website- [www.oxfordhealth.nhs,uk/tissue-viability](http://www.oxfordhealth.nhs,uk/tissue-viability) * Some patients have very complex needs and may require bespoke equipment. This will take longer to acquire, so you should put an interim plan in place whist waiting. * Order bespoke equipment on the equipment referral form and a Tissue viability nurse will contact you to discuss the patient’s needs. * It is the prescriber’s responsibility to ensure that equipment has been delivered. If the patient is changing teams or services, you can hand the responsibility to the admitting team but this must be documented. * You need to ensure that patients are made aware that the equipment is on loan to them and must look after it. Popping it with cigarettes and letting their pets use it as a chew toy is not acceptable. This also applies to when they have finished with it. They also have a responsibility (or their family) to contact the equipment management company to arrange collection. * Please ensure that patients are made aware that repositioning is still necessary once they have equipment. A repositioning regime should be negotiated with the patient and communicated across other services involved in their care. * **For those selecting equipment for community use, there are some products that require ordering/ authorisation from tissue viability. An equipment request form will need completing before the equipment is issued. You can send your equipment form by fax 01865 261757 or email us on the above email.** |

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| **Mattresses** |

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| **Premier Glide** | **Considerations** |
|  | * Can be used for a patient with up to category 2 pressure damage. * This is not just a standard piece of foam * It has castellated foam (cut foam to disperse pressure). Its Glide system allows the mattress to fully conform to the bed frame and therefore optimises the properties of a profiling bed.  The Top surface of the Glide remains under the patient throughout the profiling of an electric bed reducing shear and friction forces, most particularly on the heel areas  Mattress does not require turning or handling. * The stability and reduced height of the mattress can aid independent transfers. * Can be used without a profiling bed as long as base of bed is sufficient for the mattress * **STOP:** Do you really need a repose topper on this mattress? It is probably sufficient on its own.   Measurement  Height -152mm(15.2cm)  Length 1970mm(197cm)  Width 880mm(88cm)  Ma client weight 247.6kg (39stone) |
| **Carefree Overlay** |  |
|  | * This is for high risk and category 1 and 2 pressure damage. * This is an overlay so needs to be **on top** of a base mattress. * This will not be needed if you have a Softform premier glide as a base mattress. * This is to be considered on top of the patients own mattress as long as the base is the same size or slightly bigger. * This will increase the height so might case a risk to independent transferring. * Comes in a single and a double overlay.   **Measurements**  **Single overlay**  Height -5cm  Width -86cm  Depth(length)-137cm  Max patient weight -21 stone (133kg)  **Double overlay**  Height – 5cm  Width -137cm  Length 198cm  Max patient weight -21 stone (133kg) |
| **Viscotech community mattress (Bariatric foam mattress)** | **This equipment needs to be ordered/ authorised by tissue viability** |
|  | * For high risk ,pressure damage category 1&2 * For use on four foot wide beds * Cover has welded seams * bariatric patients up to 40 stone * step up option is the Sileo dynamic mattress   Measurements  Height 15cm  Width 122cm  Length -197 cm |
| **Repose mattress topper** |  |
|  | * A premier Glide   (maxi glide) should be considered first   * But if-   + patient is ‘marking’   + Patient is finding too difficult to turn themselves.   + The glide is too hard/ firm   then step up to repose topper   * This will increase height and reduce stability for patient transfers. * Patients can use this on top of their own mattress has a stretchy strap at the top * Can be secured to a double bed but needs an able person to do this.   **Measurement**  Height -7cm  Width -77cm  Depth (length )-178cm  Max client weight – 21 stone 8lb (139kg) |
| **Premier active** | **This needs to be ordered/ authorised by Tissue viability** |
| Invacare Softform Premier Active | * This is used for up to category 2 pressure damage. * This is a dynamic (powered) mattress encased in foam. * Good for patients who cannot move themselves at all / left for 12 hours overnight with no care. * End of life patients. * Those patients with low body weight. * Those patients who need a stable surface to transfer with. * Step up from this mattress would be a full dynamic –Talley Quattro * Contact TV if support is required when prescribing this mattress   **Measurement**  Height- 15cm  Width-88cm  Depth(length)- 197cm  Max client weight -39stone (247.6kg) |
| **Talley Quattro** | **This needs to be ordered / authorised by tissue viability** |
|  | * For patients who are in bed for long periods of time. * Patients with category 3 or 4 pressure damage. * Patients who cannot move their position without assistance. * Patients with pressure damage and have no care input overnight and cannot move their own position * Not stable for independent discharges without risk assessment * Can be uncomfortable for those patients who have low body weight. * Some patient may feel thismattress is too hard. If so, there is a soft setting on the pump.   **Measurement**  Height- 18cm  Width- 88cm  Depth(length)-195cm  Max patient weight –31stone (200kg) |
| **Sileo Bariatric dynamic mattress** | This n **Needs to be ordered/ authorised by tissue viability** |
|  | * Dynamic mattress with alternating cycle * For patients who are in bed for long periods of time and/ or have category 3 or 4 pressure damage. * Has 20 cells * Washable cover * Risk assess patients who want to independently transfer whilst on this mattress – risk of falling * Can be used with the bariatric bed frame (Drive bed). * Can be put on patients own bed as long as the base is of a sufficient size     **Measurements**  Height 25cm  Width 100cm  Length 200cm  Max patient weight 70 stone (450kg) |

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| **Cushion’s** |

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| **Note: The community equipment service does not provide cushions for wheelchairs. This is because putting a cushion in a wheelchair will change the ergonomics of the sitting posture which needs to be assessed and managed by the Oxfordshire wheelchair service.** |

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| **Essentials cushion** | **Consideration** |
|  | **A foam cushion**   * Used for low risk patients * Do Not use this with patients who have pressure damage * Use for patients who can move their position and get up independently or may have insufficient padding on seating at home. * Comes with a washable cover * Cushions should last for two years but should be check regularly for cover damage foam staining , foam degradation and bottoming out   **Measurements**  Height- 7.5cm  Width -43 cm  Depth – 43cm  Max client weight – 17 stone (108Kg) |
| **flow form ultra 90** |  |
|  | **Foam and gel cushion.**   * Can be used up to category 1-2 pressure damage * Has a gel square inside the foam which aids greater immersion when a patient is sitting on it. * Has a two way stretch cover * This can be used for when patients need greater stability than a repose cushion. * This cushion should be used on patients that have the ability to move their position with or without assistance.   Measurements  Height – 9cm  Width- 43cm  Depth- 43cm  Max client weight 20 stone - |
| **Repose cushion** |  |
| media | **A Static air cushion**   * This cushion works by air displacement. When the patient moves, the air in the cells moves, aiding immersion to provide patient to surface contact and spread. * This cushion can be used on patients with up to category 2 pressure damage. * This cushion is very good for using in shallow seat wells due to its low profile. * The delivery tube doubles as the pump. * Ensure the pump is kept somewhere safe and is not thrown away. * Consider not using this cushion if the patient has cats or dogs as the cushion will puncture.   **Measurements**  Height – 7cm  Width-43cm  Depth-43cm  Max client weight -139kg |
| **Roho cushion** |  |
|  | **A Static air cushion**   * Works on immersion and flotation of the patient within the cushion. * Used with patients who have pressure damage up to and including category 4, or patients who are at high risk, who sit for long periods of time without care or refuse to move.   Two versions of this cushion -  Roho Quattro   * Which has a valve at the  **front ( when placed in the chair valve should be at the front )** * This cushion aids postural support by being divided into 4 sections which support postural alignment. This is then locked off with the valve at the front.   Single valve Roho   * Used to manage high risk patients with or without pressure damage. * Do not use Roho cushions on riser recliner chairs with patients who independently transfer.   **Measurements**  **Quattro and single**  Height –10cm  Width-43cm or 45cm  Depth- 43cm or 45cm  Max patient weight – no weight limit  **Bariatric**  Height 10cm  Width -27cm  Depth -20cm  Max patient weight – no limit |
| **Starlock cushion** | **Needs to be ordered/ authorised by tissue viability** |
| 4225 | **Static air cushion**  **For pressure damage**   * This cushion can be used on up to and including category 4 pressure damage. * This cushion is used to offload the area underneath the pressure damage by locking off the cells. * This cushion is used to offload specific areas of pressure damage as you can lock the cells off. * This cushion can also aid realignment of posture * Cushion is 10cm deep but patient immerses into the cushion. * The clinician must be competent at setting this cushion up. * If discharging out into the community you must ensure the team the patient is being discharged to have sufficient skills to set this cushion up. * The equipment management company are not allowed to set this cushion up as it requires patient contact. * These cushions are not safe to leave in riser recliners for patients who independently transfer. * Contact Tissue viability for advice   **Measurements**  Height – 10cm  Width- 43cm or 45cm  Depth- 43cm or 45 cm  (Either 45cm x45cm or 43cm x43 cm)  Max client weight – no weight limit  The limit is the hip width of your patient |
| **Dynamic cushion** | **Needs to be ordered / authorised by tissue viability** |
|  | **Alternating air cushion**   * For patients with pressure damage up to and including category 4. * This is a dynamic air cushion that has 6 cells which has a 2 cell alternating cycle of 9 minutes. * Comes with a 2 way stretch cover. * This has an electric pump which will need to be plugged in. * Patient s need to have good core stability as they sit on the top of this cushion. * Seat well of chair needs to be deep enough to have a 10cm cushion and good arm support. * There needs to be a plug socket next to the chair . * Do not prescribe this if household is at risk of frequent power cuts (this needs to be risk assessed). * This equipment will need to be checked by Millbrook once a year.   **Measurements**  Height – 10cm  Width-44cm  Depth(length)- 44cm  Max client weight -19stone(121kg) |
| **Repose boot foot protectors** | **Static air** |
|  | * These are air filled boots which is filled using the tubular canister that they arrive in. * These boots need to be checked regularly to ensure they remain inflated and that the heel is still placed in the offloading space * These boots have an area under the heel which totally offloads the heel. The boot supports the leg up to the knee and has a midline channel which reduces the pressure onto the Achilles’ Tendon. * These boots have to be taken off for the patient to stand and transfer. * To keep boots on in bed you can consider using yellow line stockinette over the top. This should be washed and reused. * They should not be put in a pillowcase as it causes a   Hammock effect under the heel which will prevent offloading.   * These boot should be worn in conjunction with pressure relieving mattresses * Patients who have extreme foot deformities ,external hip and knee rotation may not be suitable for this boot –contact Tissue viability for advice |
| **Heelift boots** | **Needs to be ordered/ authorised by tissue viability** |
|  | * These are single use foam boots * They are delivered as singles please state how many you need e.g. 1 or 2 * They come with an extra block of foam to align the foot. * This boot is mainly use for pressure damage to the ankle as the foam can be cut to aid offloading of the ankle (A HCP needs to do this) * These can only be ordered if patient does not get on with the repose boot (you will need to give a rationale to Tissue Viability to be able to order this )or they have pressure damage to the ankle * These boots should be worn in conjunction with pressure relieving mattresses   **Measurements**  **Standard**  Calf measurement 20.3-35.6cm  Weight -51-114kg  **Bariatric**  Calf measurement 30.5cm- 58.4cm  Weight 100kg-272kg |