

Care Home Pressure Care Equipment – Pressure cushion and Mattresses

This guidance document is intended to support your decision-making when selecting pressure relieving equipment, helping you provide safe and effective care tailored to each resident's needs.

Care Home Responsibilities for Pressure-Relieving Equipment

In accordance with the Berkshire Care Home Equipment Matrix, care homes are expected to provide basic equipment including pressure-relieving equipment to meet the individual needs of their residents. This includes both pressure relieving cushions and mattresses. If you have not accessed this document, please contact your Local Authority or Care Home Support Team to request a copy.

Encouraging Positional Changes as Part of Pressure Care

In addition to providing pressure-relieving equipment, it is essential to promote regular positional changes. For residents who are independent, encourage self-repositioning as part of their daily routine. For those who are less able or unable to reposition without assistance, ensure that repositioning is included in their care plan and supported by staff.

Positional changes play an important role in reducing the risk of pressure damage and should be considered a key component of effective pressure care.

Residential Care Homes and Pressure-Relieving Equipment Provision

Community Nursing Teams no longer supply pressure-relieving equipment for residents in residential care homes who do not require nursing input - for example, individuals with intact skin and no current need for clinical intervention.

It is the responsibility of the residential care home to ensure that appropriate pressure-relieving equipment is provided in line with the resident's assessed needs.

Guidance for Providing Pressure Relieving Equipment

Before supplying pressure care equipment, it is recommended that care home staff:

- ✓ Refer to your care home's pressure care policy.
- ✓ Review your pressure care risk assessment process.
- ✓ Familiarise yourself with the equipment available through your care home's approved supplier(s).

A thorough **risk assessment** is essential to identify individual needs, examples of different assessments include Purpose-T, Waterlow, Braden, ASSKING, these assessments can help support and justify the selection of specific equipment and support clinical decision-making. Ensure that the assessment is clearly documented, including outcomes, and that care plans are updated accordingly.

Equipment Safety and Compliance

Before issuing pressure relieving equipment to a resident, confirm that it is:

- ✓ In good working condition
- ✓ Fit for its intended purpose
- ✓ Free from visible faults or damage

Damaged or faulty equipment should not be used. If necessary, source suitable alternatives to ensure resident safety.

Ensure that any combination of equipment is appropriate for its intended use. Bed-related equipment must comply with **MHRA standards**, including:

BS EN 60601-2-52:2010+A1:2015 for adult beds

BS EN 50637:2017 for beds used by individuals with atypical anatomy

Correct fitting is critical to ensure safety and effectiveness.

Postural and Transfer Considerations

When introducing pressure care equipment, it is important to assess its impact on:

- ✓ Postural stability
- ✓ Transfers in and out of bed or chair

These factors should be evaluated after installation to ensure the equipment supports safe and effective mobility and positioning.

Ongoing Monitoring

Once in use, pressure care equipment should be **regularly checked** to confirm it remains appropriate and fit for purpose.

Pressure Care Risk Based Mattress Guidance

No Pressure Ulcers Present

Risk Assessment
Score Waterlow/
Purpose T **Orange** 10-
15 (Moderate Risk)

High –density castellated or modular cross-cut foam that sits on a durable solid base. Designed to evenly distribute body weight, reducing pressure points, shear and friction, optimum comfort and stability and support.
Modular Foam



Castellated Foam



Risk Assessment
Score Waterlow/
Purpose T **Red** 15-22
(High Risk)

Static visco-elastic mattress (**memory foam**) sits on a durable solid base. Enables partial immersion



Hybrid mattress with firm sidewalls assist with transfers and provide additional stability.
If resident declines hybrid mattress, consider **high-specification castellated foam mattress** in line with resident's preferences and mental capacity.



Risk Assessment
Score Waterlow/
Purpose T **Red** > 22
(Very High Risk)

Static visco-elastic as described in High-Risk .
Dependent on your risk assessment.
Or
Alternating/low air loss replacement mattress with dual functions on the motor (consider impact on mobility)



Pressure Ulcers Present

Cat 1 Pressure
Damage/DTI
(unbroken)

Cat 1
Static visco-elastic
mattress



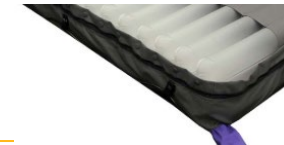
Or
Alternating/low air loss
mattress

(As in Very High Risk
listing)

Cat 2 Or Cat 3
Pressure Damage

Cat 2
Static visco-elastic or
Hybrid mattress or
Alternating/low air loss
replacement mattress

Cat 3
Dual motored deep celled
alternating/low air loss
mattress.



Cat 4 or
unstageable
Pressure Damage

Cat 4 or unstageable
Dual motored deep
celled alternating/low
air loss mattress



Bariatric (plus-size) residents: This guidance may also be applied to bariatric residents. When selecting equipment, consider:

- The **safe working load (SWL)** of the mattress and bed.
- The **combined weight capacity** of all equipment in use.
- The **bed width** required to meet the resident's needs.
- The **load-bearing capacity and structural integrity** of the room and floor where the equipment will be used.

Low weight residents: check the minimal weight -
paediatric products may be required.

Lateral turning devices can be used with any of the mattresses above to help prevent and manage pressure damage. **Care homes should complete a risk assessment** to ensure the equipment is appropriate, considering:

- Effectiveness of pressure offloading.
- Any ongoing repositioning required by care staff.

Pressure Care Risk Based Cushion Guidance

No Pressure Ulcers Present

Risk Assessment Score
Waterlow 10-15/
Purpose-T **AMBER**
(Moderate Risk)

Consider if the Resident needs a pressure cushion if no pressure damage and able to regularly reposition and independently mobilise

Consider

- High Density Foam
- Memory foam
- Gel

Qualities.

- Pressure redistribution
- Good stability
- Some postural support
- Immersion

Risk Assessment Score
Waterlow 15-22
Purpose-T **RED**
(High Risk)

Consider

- Gel/foam/air hybrid

Additional Qualities

- Immersion
- Envelopment
- Shear reduction
- Enhanced pressure redistribution
- Microclimate management
- Enhanced postural support

Risk Assessment Score
Waterlow > 22
Purpose-T **RED**
(Very High Risk)

Consider

- Air-cell/ dynamic air alternating

Additional Qualities

- Microclimate Management
- Offloading
- Maximum pressure redistribution
- Enhanced immersion and envelopment
- Shear reduction
- Moisture and heat management

Pressure Ulcers Present

Cat 1 Pressure
Damage Damage/DTI
(unbroken)

- High Density Foam
- Air-suspended fibres
- Visco elastic (memory foam)
- Chair overlay system

Cat 2 Or Cat 3
Pressure Damage

- High density foam
- Visco Elastic (memory foam)
- Gel cushion
- Air filled smart cushion
- Chair overlay system

Cat 4 or unstageable
Pressure Damage

- Air filled smart air cushion
- Inflated air fill cushion
- Alternating cushion

Key considerations:

- Consider other seating, e.g. wheelchairs.
- Match pressure care products for all surfaces, e.g. bed, seating (risk assess).
- Consider impact of placing a cushion on top of seating and impact of other risks, e.g. pressure to back of thighs.

Consider chairs with options to add cushions or integrated pressure relief see CHST seating guide for details

This guidance can apply to Bariatric (Plus Size) residents. Consider the safe working load of the cushions and the width required for the chair it is being used on.

Pressure Ulcer Identification & Management

Residential Care Homes

If pressure damage is identified in a resident, a referral to the **Community Nursing Team** is required. They will assess the wound, develop an appropriate care plan, and, if necessary for complex wounds refer to the appropriate services.
[Community Nursing Service | Berkshire Healthcare NHS Foundation Trust](#)

Nursing Homes

Category 1 and 2 expected to be managed by the home.

If a resident develops **Category 3 or 4 pressure damage**, or requires specialist wound care input, a referral should be made directly to the **Tissue Viability Nurses (TVNs)**.

[Wound Management Service | Berkshire Healthcare NHS Foundation Trust](#)

Foot Wounds

If the wound is located **below the ankle**, it must **ALWAYS** be referred to **Podiatry**
[Podiatry Service | Berkshire Healthcare NHS Foundation Trust](#)

For additional skin and wound care training please contact your Care Home Support Team for more information.

West Berkshire: westcarehomesupport@berkshire.nhs.uk

East Berkshire: eastberkscahometeam@berkshire.nhs.uk

Care Home Support Team (CHST)
[Care Home Support Team | Berkshire Healthcare](#)
[NHS Foundation Trust](#)