



Case Study

Using the VENDLET V5S to reduce carers from 5 to 2

The Client: Enfield Health & Social Care

The Solution: VENDLET V5S

Case Study at a glance

In this situation, the patient lived in sheltered accommodation and was bed-bound. Turning Mary to carry out care tasks required 5 carers due to deteriorating health and the pain caused by turning. The VENDLET enabled the number of carers required to be reduced from 5 down to 2, significantly reducing the cost of the care package whilst improving the quality and comfort of Mary's care.

Social and environmental background

Mary* is a 50-year-old lady who lives in a one-bedroom ground floor flat in sheltered accommodation managed by North London Home Care. Mary has been bedbound for over a year now, and all her care is provided at her bed. Mary has no family or friends who visit, call or support her in any way. Her social worker and manager from the scheme assist her with her finances, shopping, doctors' appointments and as needed. She has a package of care that consists of two carers four times a day to provide all meals, personal care and medication.

** name changed for privacy*

Medical history

Mary has a medical history of osteoarthritis, hypertension, enlarged heart, depression, IBS, diabetes (tablet controlled), obesity (approx.. 28 stone), lymphedema and bilateral oedema. Mary is alert and orientated; she can follow instructions and participate in discussions. A Capacity Assessment has been completed by her social worker: Mary has the capacity to make her own - wise or unwise - decisions, and to decline treatment.

Reason for the referral

Mary has been bedridden for over a year. However, due to her general health deterioration, her participation in repositioning herself and turning on her sides has been reduced in the past few weeks, and carers are struggling to provide the necessary care. The home manager has reported that her staff are unable to sustain Mary's care package as she requires more care than the package can offer.

Functional assessment / repositioning / turning on her sides

Mary is unable to mobilise and/or transfer as she has been bedridden for the past year, and she is having difficulties positioning herself in bed. Mary lies in a supine position at all times. She claims that when she was an inpatient at North Middlesex Hospital, nurses attempted to position her sideways - supporting her position with pillows and wedges - but she was unable to tolerate that position for more than a couple of minutes due to the extreme pain.

On assessment, Mary was able to turn on her sides with some assistance. She was able to hold onto the bed lever whilst the carers provided personal care. Turning on her right side was easier for her, although due to the pain, she screamed every time the carers assisted her in turning on



her left side.

Personal Care assessment

Mary is highly dependent on carers for all activities of daily living. The carers provide strip washes at her bed. Providing care on her front is easy for Mary and the carers. However, turning her on her right side is difficult, and turning on her left side is worse due to her pain and her not being able to assist the carers with the turning. In order to reduce the length of time and the number of times that carers have to turn her on her sides, the OT recommended the provision of a bed system (4 ways Wendylett) and a wedge to facilitate repositioning her up in bed and holding her sideways for the carers to provide the personal care, and to change the pads.

By having the bed system in place, tilting back the bed and positioning the wedges on the footboard, Mary was able to push down slightly, and two carers could then assist her in bringing her up in the bed. This worked perfectly and was safe and less painful for Mary. However, as Mary's mobility deteriorated rapidly, and her pain levels increased after a couple of weeks, the care agency contacted the OT again to advise that they needed 4 to 5 carers to provide the necessary care for Mary as she is no longer able to participate in repositioning herself in bed. Due to her weight (approximately 28 stone) Mary was sinking on her bottom and although she was able to turn onto her sides with 4 carers and the 5th one providing the care and changing the pads was feasible, assisting her up to the bed was very unsafe for the carers.

Problems identified/OT recommendations

1. Inability to position herself in bed
2. Inability to sit out on a chair
3. Reporting high levels of pain
4. Carers have difficulty in providing care and changing her pads
5. Non-compliance with medication most of the time

July 2020

Goal: For Mary to sit out in her armchair for a couple of hours per day. For the carers to provide a turning system which will enable them to provide personal care, assist with repositioning and changing pads safely with two carers.

In order to achieve these goals: OT has provided a bed system (Wendylett 4 ways) to facilitate personal care and repositioning her in bed.

Completed a joint visit regarding the feasibility of the installation of a gantry hoist. Mary allowed us to take the measurements, and she stated that she didn't want any equipment or changes to the bedroom to happen too soon, because she needed a couple of weeks to process the changes. However, after a couple of weeks, her mobility deteriorated, her pain levels increased, and carers struggled to provide the care.

August 2020

Goal: For the carers to reduce the number of carers again down to two, if possible. To provide different bed system equipment. To meet Mary's health needs safely.

In order to achieve these goals: the bed system (4 ways Wendylett system and wedges) provided three weeks ago is no longer meeting Mary's needs. Again, she required the support of four to five carers to provide the care and to turn Mary onto her side to change pads and bed linen.

Nursing home or sheltered accommodation?

We had a long debate as to whether Mary should continue to be supported in sheltered



accommodation where she has been living for the past 5 years, or whether she should be moved into a nursing home. Although her care needs could be met in this property with different equipment, it was agreed that, as Mary was non-compliant with taking her medication when the district nurses visited her, and then kept calling the scheme manager as she was in so much pain, it was deemed that Mary would benefit from being in a nursing home where the nurses are on site.

September 2020

Goal: for Mary to be moved from the sheltered accommodation to the nursing home. To provide training for all staff to be able to use the VENDLET V5S Turning System. To complete a Care Plan to send to the nursing home.

Recommended three carers to meet Mary's personal care needs for the first four weeks until the staff are familiar and confident in using the new bed system (Vendlet system).

Moved Mary into the nursing home, as agreed, as her medical needs could not be met in sheltered accommodation.

Conclusions

It was agreed and approved that The VENDLET turning system enabled the reduction of the number of carers from 5 to 3, and then down to just 2 - whilst increasing both the safety of the carers and Mary's comfort.

[Click here to find out more about the VENDLET V5S Patient Turning System](#)