A Guide for Static Mattress Homecare Use and Care
A GUIDE TO CORRECT STATIC MATTRESS USE

Morton & Perry recommend that mattresses should be used and maintained in accordance with the following guidelines

1. Instructions For Use

- Check if the mattress is a replacement or an overlay
  - If it is a replacement mattress it should be placed directly on to the bed frame
  - If it is a mattress overlay it should be placed on top of the existing mattress
- Mattresses are delivered in plastic covers for protection; these covers must be fully removed before use
- When being used for the first time allow 1 hour before placing the patient on the mattress (depending on the room temperature)
- With the exception of bed sheets avoid using any additional covers/padding between the patient and the support surface, as this may affect its pressure reducing qualities

2. Mattress Damage Prevention

General Use

Take extra care not to puncture the cover as this will allow fluid ingress to contaminate the foam core. To prevent the cover from being punctured and/or damaged:

- Do not place sharp objects such as hypodermic needles, scalpels, etc, on the mattress,
- Avoid wearing petruding jewellery i.e. rings with large stones,
- Take extra care when using medical equipment such as monitors, drip stands, side rails, transfer boards, etc
3. Mattress Cleaning And Care

Mattresses are fully encased in a protective waterproof, multi stretch PU cover to help prevent fluid ingress from damaging the foam core. The mattress cover should be cleaned regularly in accordance with your organisations’ disinfection protocol.

Morton and Perry recommend the following cleaning procedures for mattress covers only:

General Cleaning

Before cleaning, mattress covers should be completely removed; the foam core should not be cleaned. If the foam core is contaminated in any way, the mattress should be removed from use immediately.

Using a single use wipe, clean the mattress cover with a solution of neutral detergent and hot water. Rinse thoroughly with clean water and a damp single use wipe. Make sure the cover is completely dried before re-fitting to the mattress.

Disinfecting the cover

If the cover is heavily soiled or has been exposed to bodily fluids such as blood, it will require a more thorough cleaning procedure:

Wipe the cover using a single use wipe and a 0.1% Chlorine Solution (1,000ppm). If required a 1% Chlorine Solution (10,000ppm) can be used. Rinse thoroughly with clean water and a damp single use wipe. Make sure the cover is completely dried before re-fitting to the mattress.

Laundring

Where required all mattress covers can be removed and laundered as follows:

| Pre wash | 80°C + 15 minutes |
| Main wash | 80°C + 15 minutes |

This should be followed by a cold rinse and extraction.

Drying

Mattress covers should be hung from a line or bar and drip dried in a clean indoor environment. Covers must be completely dried before re-fitting to the mattress.
4. Mattress Inspection Recommendations

Mattresses should be checked regularly to ensure they remain ‘fit for purpose’, clinically effective and pose no risk of infection to either the patient or the carer.

Morton and Perry recommend that a thorough inspection of both the interior (foam core) and exterior (cover) of the mattress is carried out weekly, or each time a new patient is placed on the mattress. Visual checks should be carried out daily to identify any significant signs if damage or infection risk.

How to check a mattress

Condition of the foam and cover - what to look for

Daily/weekly checks:

1. Check for any signs of staining

2. Check for any signs of tearing and/or punctures

3. Check all the seams for signs of splitting

4. Check the zip(s) for any signs of damage

5. Unzip, and inspect the cover internally for any signs of fluid ingress/staining

6. Ensure that the cover is suitable for the type of mattress in use

7. Check the foam core for any signs of fluid ingress/staining

If any signs of contamination are identified on the cover, the mattress should be withdrawn from use immediately until the cover is replaced.

If the foam and the cover are both showing signs of contamination the mattress should be removed from use immediately and the entire mattress should be replaced. Failure to do so will pose significant risk of infection to both the patient and the carer.

NOTE: the top, bottom and all four sides of the mattress must be checked
Condition of the foam - Mount Vernon Test

The Mount Vernon Test should be performed at least once monthly to ensure the foam has not bottomed out and the mattress is still delivering adequate support and pressure reduction for the patient.

How to perform the Mount Vernon Test

1. Make sure the mattress is level with your trochanter (hip bone) and the cover is in place.

2. Stand at the side of the bed and link your hands to form a fist (Fig.1)

3. Keeping your elbows straight, lean forward and push the fist into the mattress along the seven points indicated below (Fig.2):

   ![Fig.1](image1.png)

   ![Fig.2](image2.png)

If the base of the bed can be felt at any point then the mattress has bottomed out and should be removed from use immediately. **Failure to do so will pose significant risk of pressure damage to the patient.**