



Versatech 1100



Revolutionary Bariatric Bed

medstrom⁺
Improved Patient Outcomes

Clinical challenges

Challenges:



Over 1 million hospital admissions where obesity was a factor.¹



A back injury sustained whilst supporting a plus-size patient to transfer resulted in £109,000 of damages according to NHS Resolution.³



Almost three quarters of people aged 45-74 in England are overweight or obese.²



People living with obesity also suffer weight-related stigma and prejudice.⁴



NHS Resolution was notified of 4,733 claims relating to manual handling in the past decade, costing a total of £57.1m.³



"Overweight, obese and morbidly obese people have a right to safe, dignified care, and caregivers have a right to a safe working environment".⁴

One platform with maximum versatility

Reduce deconditioning

Maintain patient autonomy

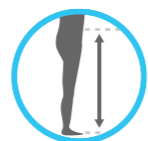


A versatile addition to the range

Medstrom works closely with multi-disciplinary teams and truly understands the challenges that occur when caring for plus-sized patients. At the same time, we are firm advocates that patient dignity and equality must be persevered, regardless of patient size and shape.

Clinically led and focused on individual patient needs, Medstrom strives to help clinicians select the right bariatric equipment at the right time. Overall, optimising patient outcomes and care objectives.

With an established range of bariatric equipment, including two known and widely used bed frames, Medstrom is delighted to exclusively introduce the Versatech 1100 bariatric bed to its growing portfolio, significantly adding to the solutions available.



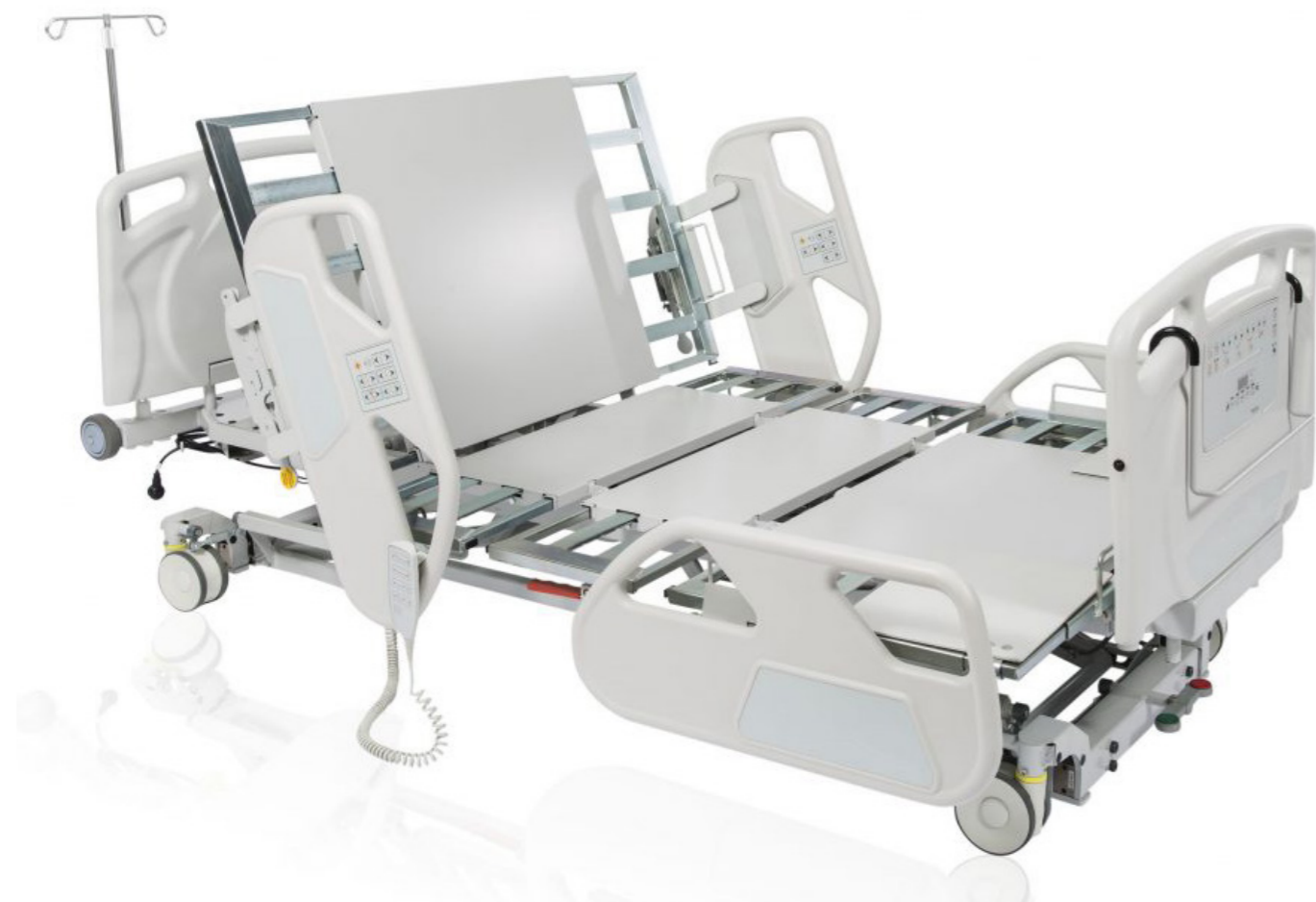
Ultra-low height with ultra-high safe working load



Extendable by width in five positions



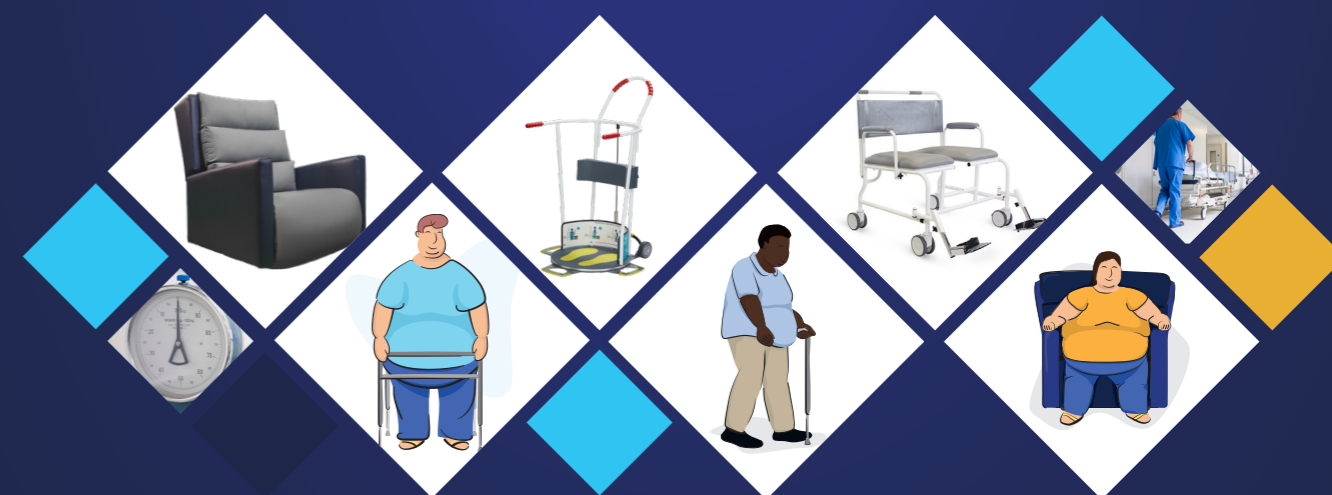
High specification including Class III weighing scales and exit alarms



Bariatric Equipment Rental



From beds and mattresses to a range of accessories, contact Medstrom for that one solution to all your plus-size patient needs.



1 Stop Shop
Supplier
Phone Call

 **medstrom select**
Defining Dignity for Plus-Sized Patients

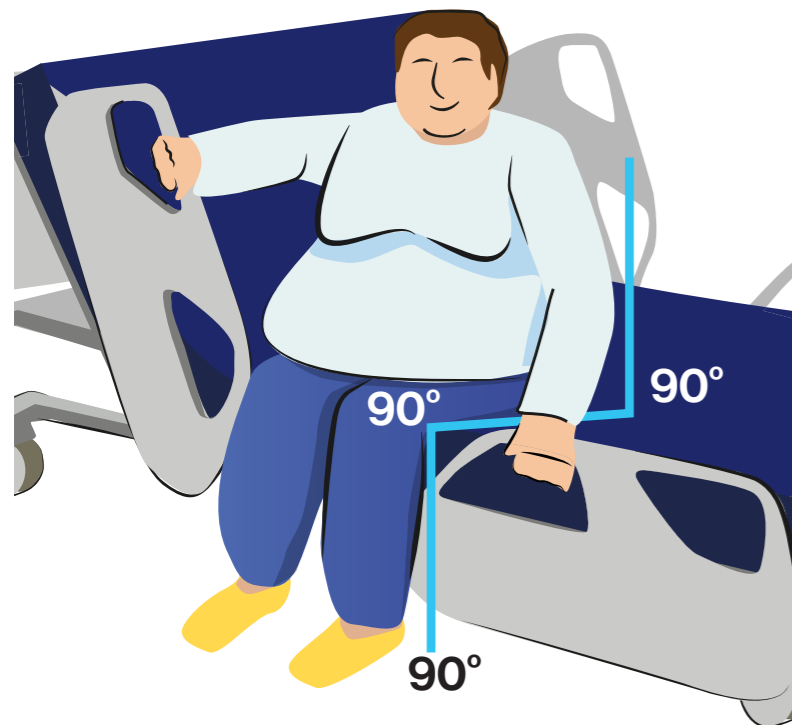
Safe Mobilisation and Falls Prevention:

Evidence supports the safest height for a patient to egress from is their popliteal height⁵ with feet flat on the floor, and heels, knees and thighs all at a 90° angle. Correspondingly, data highlights there is a higher prevalence of obesity in women in comparison to men.⁶

This increases the likelihood that clinicians are managing patients of shorter stature who may struggle to achieve a “feet on floor” position from a standard bariatric bed.

Studies also suggest that obesity is associated with a 25 – 31% higher risk of falling in comparison to non-obese counterparts.⁷ Should an injury occur from a fall, studies suggest there is nearly a two-fold increase in the odds for developing cardiopulmonary complications or infections.⁸

The Versatech 1100 achieves an ultra-low height of 21cm, providing a height range to accommodate even the shortest of patients, resulting in safe mobilisation at all times. The ultra-low height reduces the risk of injury from a fall whereby the lower the height, the lesser the impact.



Patient Autonomy:

No caregiver wants a patient to feel they are a burden or undeserving of care. Feelings of shame and embarrassment may result in a plus-size patient declining care or even worse, refusing to mobilise at the fear of harming a caregiver. This can lead to patient deconditioning, exacerbating the challenges when managing plus-size patients and creating a vicious cycle of poor outcomes.

The Versatech 1100 encourages patient autonomy with the ultra-low height and ultra-high safe working load of 499kg.

This, coupled with the ergonomic split side rails, provides a stable and secure platform for plus-size patients to feel confident and safe. In turn, this empowers patient independence, resulting in improved outcomes for both the patient and caregivers.

“Plus-size patients can feel self-conscious when staff are struggling to provide care. This can result in feelings of humiliation.”⁹

Defining Dignity:

The Versatech 1100 has been designed to resemble a standard med surg bed, eliminating unwanted stigma and maintaining a dignified experience for plus-size patients.

This detracts attention from the plus-size patient within a ward environment, and may result in a higher compliance from the patient towards their care.

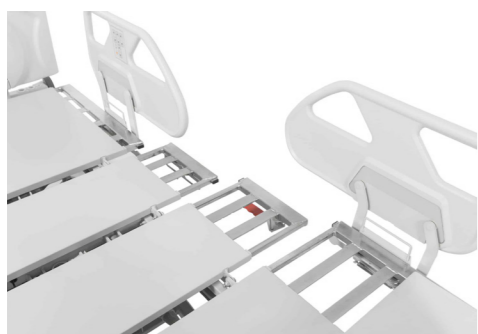


Optimum Caregiver Safety

The risks associated with managing plus-size patients have been widely documented. When moving and handling plus-size patients, standard manual handling practices often can't be applied.

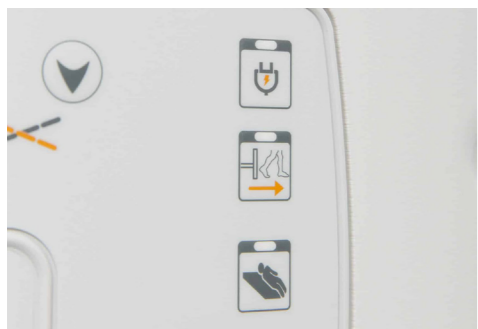
For example, the patient's weight may be unevenly distributed, asymmetrical and cannot be held close to the caregiver.¹⁰ Fear of injuries when moving plus-size patients is also a major concern of nurses and may affect an organisation's ability to attract and retain staff.¹¹ Accessing appropriate equipment can undoubtedly support staff to feel confident and reduce the risk of manual handling injury.

The Versatech 1100 has various design features that are of benefit for the caregiver:



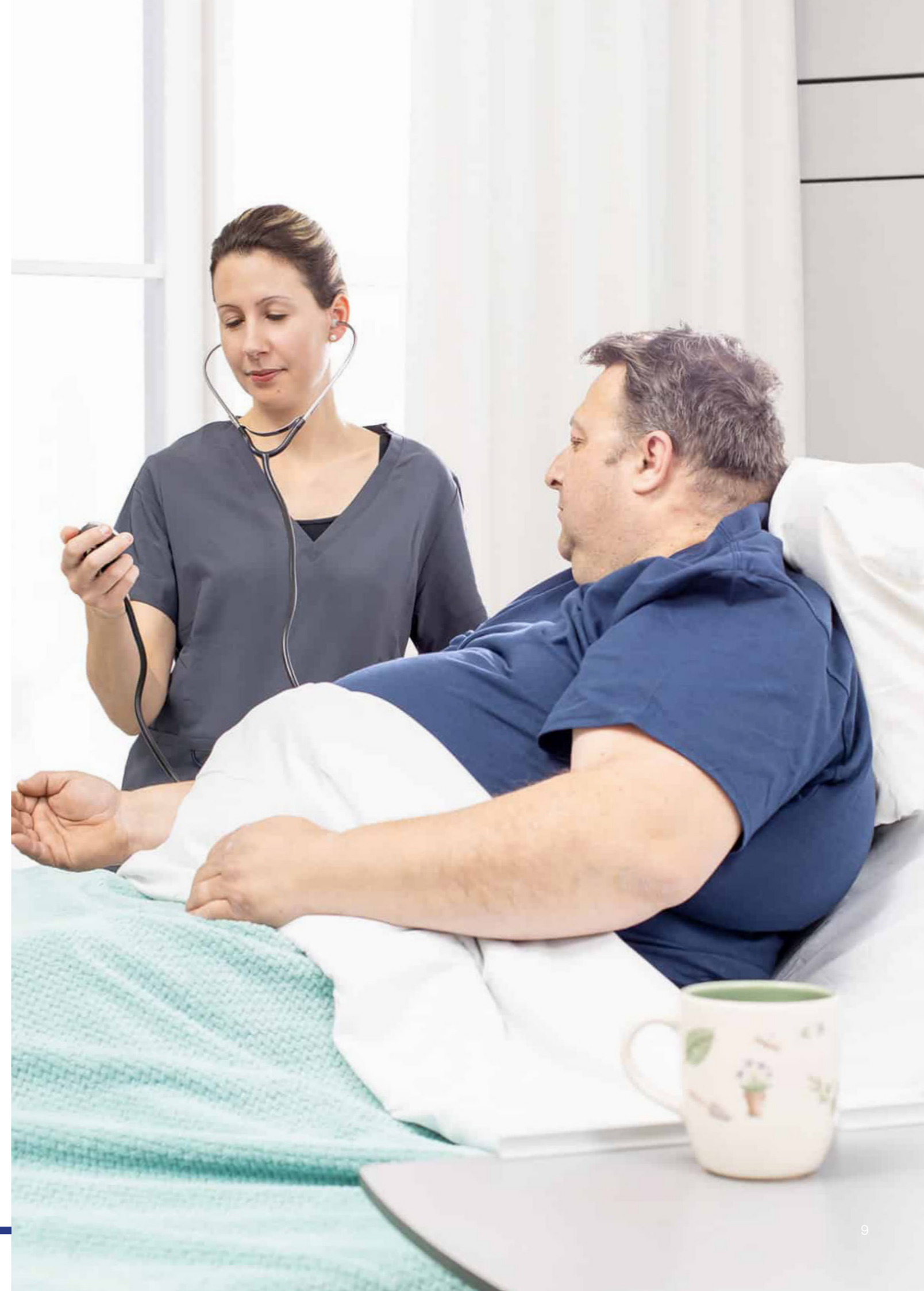
Width adjustable:

One-button width adjustment from 91cm to 134cm provides ultimate versatility to accommodate different patient morphologies. Caregivers can also use the expandable width to get closer to the patient, reducing the stretching and bending. Plus, the variable width aids access to side rooms, doorways, lifts etc, overall delivering convenience and enhancing nursing/portering efficiencies.

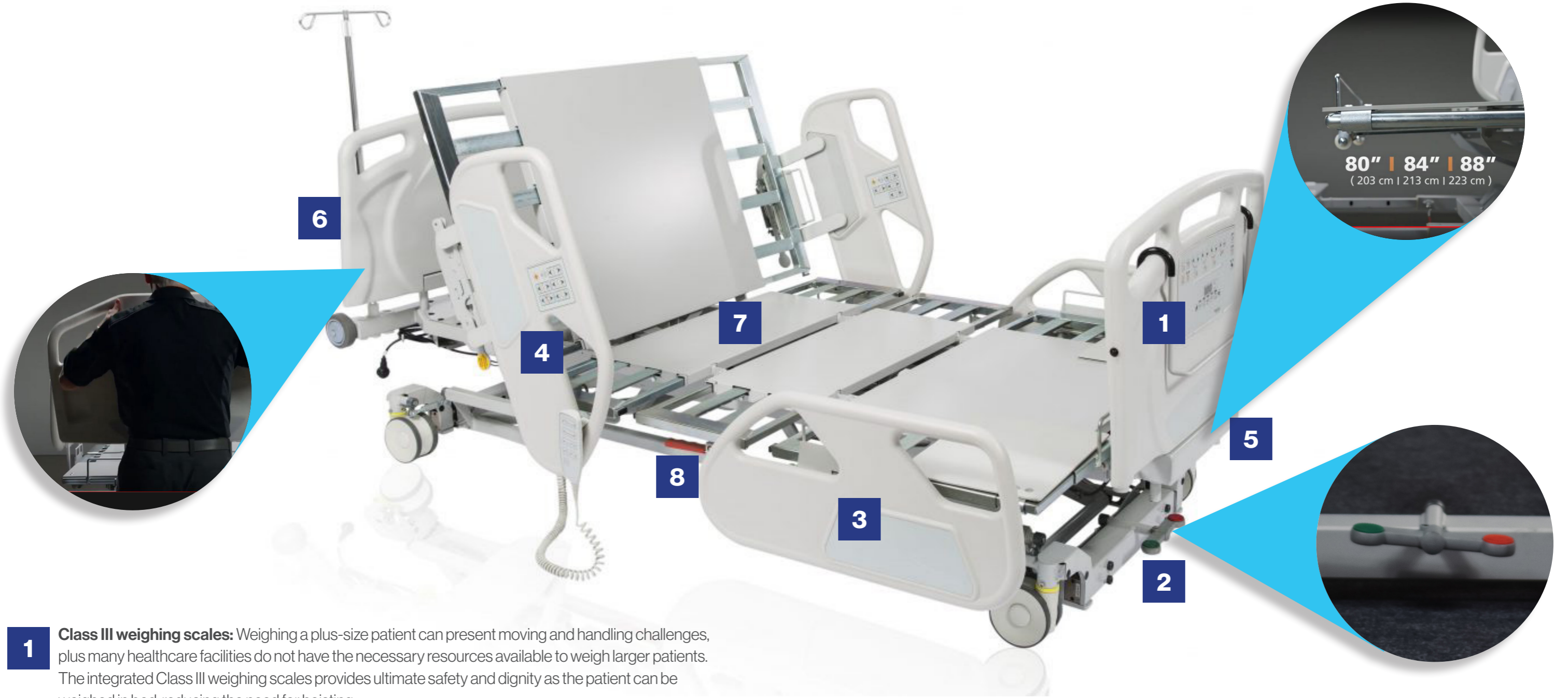


Bed exit alerts:

The Versatech 1100 comes equipped as standard with two alarms; one for complete exit and one for patient movement. This can assist caregivers with being proactive with patient handling and deters any unexpected or dangerous manoeuvres that may increase risk of staff injury.



The Versatech 1100 comes with many **additional features and benefits built-in as standard.**



1 Class III weighing scales: Weighing a plus-size patient can present moving and handling challenges, plus many healthcare facilities do not have the necessary resources available to weigh larger patients. The integrated Class III weighing scales provides ultimate safety and dignity as the patient can be weighed in bed, reducing the need for hoisting.

2 Central brake: Easily accessible, the Versatech 1100 has a brake, steer and free movement option to provide simple transport and manoeuvrability.

3 Four independent split side rails: Ergonomically designed to provide patients with a stable aid, the split side rails can be independently adjusted in two different positions dependent on caregiver access or patient egress.

4 Accessible controls: The Versatech 1100 comes with a roaming handset, side rail controls and a caregiver control panel as standard. This gives the caregiver full access to all clinical functions such as Trendelenburg, full chair position and bed exit alarms, including the option to lock-out any function. The patient has access to their own limited controls, such as height adjustment and auto contour, which significantly improves patient independence and autonomy.

5 Integral length adjustment

6 Removable head and footboard

7 Support surface flexibility: Browse Medstrom's range of support surfaces that are compatible with the Versatech 1100 from semi-dynamic, dynamic, TurnAssist and fluid immersion simulation. Medstrom can offer the most extensive range of bariatric support surfaces on the market to drive selecting a mattress based on the patient's clinical status.

8 CPR

Technical Specification			
Minimum height:	21.6cm	Maximum height:	81.3cm
Safe working load:	500kg	Bed weight:	240kg
Minimum overall bed dimensions:	102cm (W) x 237cm (L)	Minimum overall bed dimensions:	132cm (W) x 257cm (L)
Sleep deck dimension width adjustments:	89cm, 97cm, 104cm, 119cm	Sleep deck dimension length adjustments:	203cm, 213cm, 223cm
Back rest angle:	65°	Trendelenburg positions:	+ 12° / - 12°
Thigh rest angle:	34°	CPR:	Electric and manual

References:

- NHS digital (2019). Statistics on Obesity, Physical Activity and Diet - NHS Digital. [online] NHS Digital. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-obesity-physical-activity-and-diet>.
- Baker, C. (2019). Obesity Statistics. commonslibrary.parliament.uk, [online] 3336. Available at: <https://commonslibrary.parliament.uk/research-briefings/sn03336/#:~:text=The%20Health%20Survey%20for%20England>.
- NHS Resolution (2020). Available at: https://resolution.nhs.uk/wp-content/uploads/2020/10/Did-you-know_Manual-Handling.pdf.
- Local Government Association (2020). Available at: https://www.local.gov.uk/sites/default/files/documents/1.112%20Social%20care%20and%20obesity_06.pdf.
- Martindale, D. (2021). Calculating bed height for hospital patients using popliteal measurement. Nursing Times; 117: 10.
- Baker, C. (2023). Obesity Statistics. commonslibrary.parliament.uk, [online] 1(3336). Available at: <https://commonslibrary.parliament.uk/research-briefings/sn03336/>.
- Mitchell, R.J., Lord, S.R., Harvey, L.A. and Close, J.C.T. (2014). Associations between obesity and overweight and fall risk, health status and quality of life in older people. Australian and New Zealand Journal of Public Health, 38(1), pp.13–18. doi:<https://doi.org/10.1111/1753-6405.12152>.
- Chuang, J.-F., Rau, C.-S., Liu, H.-T., Wu, S.-C., Chen, Y.-C., Hsu, S.-Y., Hsieh, H.-Y. and Hsieh, C.-H. (2016). Obese patients who fall have less injury severity but a longer hospital stay than normal-weight patients. World Journal of Emergency Surgery, 11(1). doi:<https://doi.org/10.1186/s13017-015-0059-9>.
- Gillespie, T. and Lane, S. (2018). Moving the Bariatric Patient. Critical Care Nursing Quarterly, 41(3), pp.297–301. doi:<https://doi.org/10.1097/cnq.0000000000000209>.
- McClean, K., Cross, M. and Reed, S. (2021). Risks to Healthcare Organizations and Staff Who Manage Obese (Bariatric) Patients and Use of Obesity Data to Mitigate Risks: A Literature Review. Journal of Multidisciplinary Healthcare, Volume 14, pp.577–588. doi:<https://doi.org/10.2147/jmdh.s289676>.
- Walden, C.M., Bankard, S.B., Cayer, B., Floyd, W.B., Garrison, H.G., Hickey, T., Holfer, L.D., Rotondo, M.F. and Pories, W.J. (2013). Mobilization of the obese patient and prevention of injury. Annals of surgery, [online] 258(4), pp.646–650. doi:<https://doi.org/10.1097/SLA.0b013e3182a5039f>.

UK

Tel: 0845 371 1717

Email: info@medstrom.co.uk

www.medstrom.com

Ireland

Tel: 01 686 9487

Email: info@medstrom.ie

www.medstrom.ie