

Policy: Wound Management Policy for Nursing Homes and Residential Care Facilities

Originating Branch: Continuing Care

Approval Date: March 19, 2019 **Effective Date:** Effective on approval

Approved By: _____ original signed by Denise Perret, Deputy Minister _____
Denise Perret, Deputy Minister Health and Wellness

Version #:1

1. POLICY STATEMENT

- 1.1. The purpose of this policy is to set directives for nursing home and residential care facility providers regarding wound management for nursing home and residential care facility residents.
- 1.2 This policy will help to ensure the best possible health outcomes for nursing home and residential care facility residents.

2. DEFINITIONS

For the purpose of this policy, the following definitions apply:

- 2.1. **Licensee:** The owner/operator, administrator, board of directors, or service provider to whom a license has been issued by the Department of Health and Wellness to operate a nursing home or residential care facility in Nova Scotia.
- 2.2. **Nursing Home:** A building or place or part of a building or place, including Homes for the Aged, in which accommodation and skilled nursing care are provided to residents in accordance with the *Homes for Special Care Act, Section 2(1)(j)*.
- 2.3. **Pressure Injury:** Localized damage to the skin and/or underlying soft tissue usually over a bony prominence or related to a medical or other device. Pressure injuries can present as intact skin or an open ulcer and may be painful. The injury occurs as a result of intense and/or prolonged pressure or pressure in combination with shear. The tolerance of soft

tissue for pressure and shear may also be affected by microclimate, nutrition, perfusion, co-morbidities, and the condition of the soft tissue.¹

- 2.4. **Residential Care Facility:** A building or place, or part of a building or place, where supervisory or personal care is provided to three or more persons.
- 2.5. **Resident-Centred:** An approach in which residents are viewed as whole persons; it is not merely about delivering services where the resident is located. Resident-centred care involves advocacy, empowerment, and respecting the resident's autonomy, voice, self-determination and participation in decision-making.
- 2.6. **Specialized Equipment:** Medical equipment or devices that are used to facilitate and promote resident independence and to improve quality care.
- 2.7. **Substitute Decision Maker:** The delegate or statutory decision-maker with the legal authority to make personal care decisions on behalf of residents pursuant to the *Personal Directives Act*.
- 2.8. **Wound:** An injury to the body that typically involves laceration or breaking of a membrane (such as the skin), and usually damage to underlying tissues (Merriam-Webster Dictionary). Includes pressure injuries.
- 2.9. **Wounds Canada (Canadian Association of Wound Care):** A non-profit organization dedicated to the advancement of wound prevention and management in Canada.

3. POLICY OBJECTIVES

- 3.1. All nursing homes and residential care facilities licensed by the Department of Health and Wellness will have a Wound Management Policy that incorporates leading practices that address the prevention and management of wounds.
- 3.2. Overall incidents of wounds, such as pressures injuries, in nursing homes and residential care facilities, will be reduced and effectively managed through prevention and management measures.

4. APPLICATION

¹ National Pressure Ulcer Advisory Panel, Washington, DC, April 13, 2016 <http://www.npuap.org/national-pressure-ulcer-advisory-panel-npuap-announces-a-change-in-terminology-from-pressure-ulcer-to-pressure-injury-and-updates-the-stages-of-pressure-injury/>

- 4.1. This policy applies to all nursing homes and residential care facilities in Nova Scotia that are licensed by the Department of Health and Wellness.

5. POLICY DIRECTIVES

- 5.1. All licensees must ensure:

- 5.1.1. A Wound Management Policy, that reflects leading best practices (e.g. Wounds Canada) to direct staff in the prevention and management of wounds, is developed and followed;
- 5.1.2. Staff are educated regarding the nursing home or residential care facility's Wound Management Policy, and current leading practices for effective wound prevention and management;
- 5.1.3. Residents' access to specialized health care services is facilitated, according to their individualized wound care needs;
- 5.1.4. Accurate wound management documentation is maintained on an ongoing basis to support resident care, ongoing quality improvement, and for reporting to the Department of Health and Wellness, as required; and
- 5.1.5. Specialized equipment for the prevention and/or management of wounds (e.g. specialized mattresses) is accessed for residents as required.

- 5.2. **Nursing home licensees** must also ensure:

- 5.2.1. A stand-alone Wound Care Committee is implemented, or that wound care issues/practices are included as a standing agenda item on another appropriate committee (i.e. Quality Committee).

The committee shall be interdisciplinary, ensuring wound prevention and management is regularly reviewed and revised to reflect leading practices and provincial direction, and identify trends for quality improvement (section 6.2.16, *Long-Term Care Program Requirements: Nursing Homes and Residential Care Facilities*).

- 5.2.2. Residents have a skin integrity assessment completed **within 24 hours** of admission to the home, and on an ongoing basis in accordance with the residents' individual needs (section 6.1.5(b), *Long-Term Care Program Requirements: Nursing Homes and Residential Care Facilities*).

- 5.3. **Residential care facility licensees** must also ensure:

- 5.3.1. A process is in place (e.g., a committee) to review wound care issues/practices to ensure wound prevention and management is regularly reviewed and revised to reflect leading practices and provincial direction, and identify trends for quality improvement (section 6.2.17, *Long-Term Care Program Requirements: Nursing Homes and Residential Care Facilities*).
- 5.3.2. Collection of residents' current information regarding skin integrity is completed **within 24 hours** of admission to the facility, and on an ongoing basis in accordance with the residents' individual needs (section 6.1.9, *Long-Term Care Program Requirements: Nursing Homes and Residential Care Facilities*).
- 5.4. A nursing home or residential care facility Wound Management Policy must be:
 - 5.4.1. Resident-centred;
 - 5.4.2. Based on current leading practices and expertise in the field of wound prevention and management (e.g. Wounds Canada);
 - 5.4.3. Maintained and updated, as applicable; and
 - 5.4.4. Aligned with this policy and the Department of Health and Wellness' *Long-Term Care Program Requirements: Nursing Homes and Residential Care Facilities*.
- 5.5. The nursing home or residential care facility's Wound Management Policy must include, at a minimum, the following components:
 - 5.5.1. Initial and ongoing assessments by an appropriate health care professional that identify the changing needs of residents, including skin integrity and risk assessments as per leading prevention and management practices;
 - 5.5.2. Documentation standards, on the assessment, measurement, progression and condition of the wound, and treatment plan;
 - 5.5.3. Practices for monitoring residents' wounds and reporting this information as per sections 5.2.1 and 5.3.1 of this policy;
 - 5.5.4. Staff roles and responsibilities to provide clear direction and to support accountability;
 - 5.5.5. Ongoing education requirements for staff, including but not limited to RN, LPN, CCA, OT/PT, physician, and dietician, to support them in their role(s);

5.5.6. Education on wound prevention and management for residents, and/or their substitute decision makers as appropriate, provided in a manner that best meets the needs of the resident; and

5.5.7. A process for discussing pressure injury prevention, wound care decision making and care planning with the resident, and/or their substitute decision maker as appropriate.

6. POLICY GUIDELINES

6.1. Not Applicable

7. ACCOUNTABILITY

7.1 Nursing home and residential care facility licensees are responsible for demonstrating adherence to this policy.

7.2 For the purpose of the administration of this policy, accountability is delegated to the Deputy Minister of Health and Wellness.

7.3 The Senior Executive Director, Continuing Care Branch, or their delegate, is responsible for on-going monitoring and enforcement of this policy.

8. MONITORING / OUTCOME MEASUREMENT

8.1 The implementation, performance, and effectiveness of this policy will be monitored by the Senior Executive Director, Continuing Care Branch, or their delegate.

9. REPORTS

9.1 Nursing home and residential care facility providers will report all required information regarding wounds and the management of wounds to the Department of Health and Wellness as per the frequency and manner determined by the Department of Health and Wellness (see Appendix A: Pressure Injury Prevention and Management Monthly Report).

9.2 Reports received by the Department of Health and Wellness may be used for monitoring adherence to this policy, identifying trends and future requirements, and determining the effectiveness of this policy.

10. REFERENCES

10.1 [Department of Health and Wellness' Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities \(2019\)](#)

- 10.2 [Department of Health and Wellness' Long Term Care Policy Manual: Specialized Equipment Program](#)
- 10.3 [Merriam-Webster Dictionary](#)
- 10.4 [National Pressure Ulcer Advisory Panel](#)
- 10.5 [Wounds Canada](#)

11. APPENDICES

- 11.1 Appendix A: Pressure Injury Prevention and Management Monthly Report

12. INQUIRIES

- 12.1 Director, Liaison and Service Support
Continuing Care Branch
Nova Scotia Department of Health and Wellness
PO Box 488
Halifax, Nova Scotia B3J 2R8
Phone: (902) 424-6985; Fax: (902) 424-0558

Appendix A: Pressure Injury Prevention and Management Monthly Report

Please complete this pressure injury prevention and management monthly report and submit via <http://surveys.gov.ns.ca/TakeSurvey.aspx?SurveyID=71119mlk>

This is for pressure injury data only and no other wounds are to be reported through this survey. To ensure consistency, data is to be collected at the long-term care facility on the **last day of the month**. The information will be compiled and sent to DHW.

DHW will publicly report facility, zone and provincial pressure injury information on a quarterly basis. Facilities with less than five beds will not be included in public reporting.

Prevalence* Data: Prevalence describes the number or percentage of people having a pressure injury while in your facility at a single point in time. This includes pressure injuries present on admission as well as those that developed while in the facility.

1. Please select the Zone for your facility:
 - a. Zone 1 - Western Zone 2 - Northern Zone 3 - Eastern Zone 4 - Central
2. Please select the month being reported:
 - a. January February March April May June
 - b. July August September October November December
3. What is the total number of residents identified with stage 2 to 4, unstageable, and deep tissue pressure injuries at the time of this report?
4. What is the total number of stage 2 pressure injuries?
5. What is the total number of stage 3 pressure injuries?
6. What is the total number of stage 4 pressure injuries?
7. What is the total number of unstageable pressure injuries?
8. What is the total number deep tissue pressure injuries?
9. How many residents are in your facility (at time of this report)?
10. How many residents were admitted this month?
11. Of the residents admitted this month, how many were admitted with a pressure injury (stage 2-4, deep tissue or unstageable)?
 - a. Of these residents, how many residents were admitted from home?
 - b. Of these residents, how many residents were admitted from hospital?
 - c. Of these residents, how many residents were admitted from another long-term care facility?

*Definitions adapted from source:

<https://www.ahrq.gov/professionals/systems/hospital/pressureinjurytoolkit/putool5.html>