



Additional Education Requirements & Competencies

Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed

Indications for Use of this Document:

- This document is used in partnership with the online course in Learning Hub *Additional Education Requirements Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed*, to support Licensed Practical Nurses (LPNs) who are required and supported to probe, cleanse, irrigate, pack or dress a wound with a non-visible wound bed as a part of their unit specific practice.

British Columbia Nursing Practice Level

- LPNs must:
 1. Be knowledgeable of their Health Authority/Agency policies and standards of practice,
 2. Successfully complete additional education^{1,3},
 3. Follow decision support tools¹, and
 4. Follow a client specific wound treatment plan.
- Each LPN is responsible and accountable to maintain their competency and repeat the additional education as required.

Pre-requisites for Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed education:

- Completed Basic Wound Care education as defined by the Health Authority/ Agency.
- Completed the following courses on Learning Hub from the Wound Management for Nurses – Provincial Curriculum (Online):
 - Chapter 2a: How Wounds Heal
 - Chapter 2b: Wound Assessment
 - Chapter 2c: Wound Cleansing
 - Chapter 2d: Wound Packing
- Read the provincial decision support tools (guidelines and procedures) related to probing, cleansing, irrigating, packing and dressing wounds with a non-visible wound bed:
 - Guideline: Wound Management for Adults & Children
 - Procedure: Wound Cleansing
 - Procedure: Wound Packing
 - Documentation Guideline: Wound Assessment and Treatment Flow Sheet (WATFS)
- Review any related Health Authority / Agency policies, procedures, guidelines or practice standards.

Learning Plan

The learning plan in this document will assist the learner in acquiring the knowledge and skills to care for wounds with a non-visible wound bed and includes:

- Reviewing the appropriate decision support tools to obtain the theory and build on entry-level competencies.
- Completing the competency checklist to demonstrate the acquired knowledge, and skills for competency for probing, cleansing, irrigating, packing and dressing wounds by:
 - Verbalizing the theory related to practice.
 - Obtaining clinical experience.
 - Demonstrating skills.
- Demonstrating knowledge competency by completing a competency quiz on Learning Hub.
- Completing any additional competency validation requirements of your Health Authority / Agency.

Definitions:

Additional Education Requirements (AERs) - Structured education (e.g., a workshop, course or program of study) designed so that nurses can attain the competencies required to carry out a specific activity as part of nursing practice. Additional education builds on the entry-level competencies of the nurse, identifies the competencies expected of the nurse, includes both knowledge and skill to practice and includes an objective evaluation of the nurses' competency by a nursing mentor¹.

Competency - The integration and application of knowledge, skills and judgment required for safe and appropriate performance in an individual's practice¹.

Non-visible wound bed – A wound bed that cannot be clearly visualized due to the presence of undermining, sinus tracts or tunnels.

Nursing Mentor - A Clinical Nurse Educator, Nurse Specialized in Wound, Ostomy & Continence (NSWOC), Wound Clinician or delegated nurse competent in the skill being demonstrated.

Sinus/tunnel – A channel that extends from any part of the wound and tracks into deeper tissue.²

Undermining – A destruction of tissue that occurs underneath the intact skin of the wound perimeter.²

References:

1. British Columbia College of Nurses & Midwives (2023). *Scope of practice for licensed practical nurses*. <https://www.bccnm.ca/LPN/ScopePractice/Pages/Default.aspx>.
2. BC Provincial Nursing Skin and Wound Committee. (2011). *Documentation Guideline: Wound Assessment and Treatment Flow Sheet*. Retrieved from <https://www.clwk.ca/get-resource/wound-assessment-documentation-guide-portrait/>.

Document Creation/Review

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| Learning Plan | | |
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| LPN – Care of Wounds with a Non-Visible Wound Bed | | |
| Learning Activity | Resources | Date Done |
| Pre-requisite: <ul style="list-style-type: none"> Complete the 4 basic wound bed management learning modules on Learning Hub located in the Wound Management for Nurses – Provincial Curriculum (Online). | <ul style="list-style-type: none"> Chapter 2a: How Wounds Heal Chapter 2b: Wound Assessment Chapter 2c: Wound Cleansing Chapter 2d: Wound Packing | |
| Pre-requisite: <ul style="list-style-type: none"> Read the provincial decision support tools (guidelines and procedures) related to probing, cleansing, irrigating, packing and dressing wounds with a non-visible wound bed. | <ul style="list-style-type: none"> Guideline: Wound Management for Adults & Children Procedure: Wound Cleansing Procedure: Wound Packing Documentation Guideline: Wound Assessment & Treatment Flow Sheet (WATFS) | |
| Pre-requisite: <ul style="list-style-type: none"> Complete any other basic wound care education as identified by your HA/Agency. | Discuss with your Clinical Educator/Nurse Mentor. | |
| Review any additional HA / Agency specific policies, procedures, guidelines or practice standards for probing, cleansing, irrigating, packing and dressing wounds with a non-visible wound bed. | Discuss with your Clinical Educator/Nurse Mentor. | |
| Complete the competency quiz in the Learning Hub course <i>Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed</i> competency quiz in Learning Hub. Note: A score of 100% is required for course completion. | <ul style="list-style-type: none"> Chapter 2e. Additional Education Requirements: Licensed Practical Nurses - Care of Wounds with a Non-Visible Wound Bed | |
| Complete the <i>Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed Competency Checklists</i> , including: <ul style="list-style-type: none"> Verbalization of theory Simulated clinical experience, if available, for probing, cleansing, irrigating, packing and dressing wounds with a non-visible wound bed with the support of a nursing mentor competent in this skill. Demonstration of skill to show the nurse's competency related to the care of wounds with a non-visible wound bed. <ul style="list-style-type: none"> The number of successful demonstrations required will be mutually determined through a collaborative discussion with the Nursing Mentor. | <ul style="list-style-type: none"> See page 4 of the document This can be done using props or wound models with the supplies and equipment available at your site. | |
| Complete the Competency Confirmation in the Learning Hub course <i>Licensed Practical Nurses – Care of Wounds with a Non-Visible Wound Bed</i> . | <ul style="list-style-type: none"> Chapter 2e. Additional Education Requirements: Licensed Practical Nurses - Care of Wounds with a Non-Visible Wound Bed | |
| Complete any additional competency validation requirements of your Health Authority / Agency. | | |

**Competency Checklist
LPN – Care of Wounds with a Non-Visible Wound Bed**

| Competency | Date Met | Mentor's Initials |
|--|----------|-------------------|
| Knowledge | | |
| 1. Describes the indications, precautions, and contraindications for care of a non-visible wound bed. | | |
| 2. Describes the correct methods of assessment and management of wounds with known and unknown endpoints. | | |
| 3. Describes the purposes for wound packing/filling. | | |
| 4. Describes the wounds that should not be irrigated. | | |
| 5. Describe situations which requires communication to an NSWOC/Wound Clinician or Physician/NP | | |
| Skill for assessment (demonstrations can be done either at the 'bedside' or in simulation) | | |
| 1. Assembles required equipment and supplies as per wound treatment plan. | | |
| 2. Sets up dressing tray using appropriate aseptic technique. | | |
| 3. If required, dons personal protective equipment. | | |
| 4. Performs hand hygiene appropriately throughout the procedure. | | |
| 5. Positions client appropriately for procedure. | | |
| 6. Removes cover dressing and wound filler/packing appropriately. | | |
| 7. Probes undermining, sinus/tunnels areas to determine length and direction of wound. | | |
| 8. Identifies whether undermining, sinus/ tunnel have a known or unknown endpoint and follows appropriate procedure. | | |
| Skills if able to probe to end of wound: | | |
| 1. Cleanses non-visible wound bed appropriately using wound irrigation tip or catheter device. | | |
| 2. Ensures that all irrigation fluid is removed. | | |
| 3. Cleanses the wound bed appropriately. | | |
| 4. Cleanses the peri-wound skin appropriately. | | |
| 5. Performs wound assessment appropriately. | | |
| 6. Packs wound, undermining, sinus/tunnel appropriately. | | |
| 7. Applies appropriate dressing. | | |
| Skills if unable to probe to end of wound: If opportunity does not exist to demonstrate this skill, have learner explain procedure to be followed. | | |
| 1. Cleanses only the visible part of the wound bed. Does not irrigate the undermining, sinuses/tunnels. | | |
| 2. Cleanses the peri-wound skin appropriately. | | |
| 3. Performs wound assessment appropriately. | | |
| 4. Applies appropriate dressing to visible portion of the wound. | | |
| 5. Notifies Physician/NP re: inability to probe to the end of the undermining, sinus/tunnel. | | |

Nurse

Print Name _____ Signature _____ Date: _____

Nurse Mentor

Print Name _____ Signature _____ Initials _____

Learning Plan for Unmet Skills: