

Australian Primary Health Care Nurses Association

Acknowledgement of Country

We would like to acknowledge the traditional owners of country throughout Australia, and their continuing connection to land, sea and community.

We pay our respects to them, their cultures, and to Elders past and present and emerging.



VICTORIAN INFECTION PREVENTION & CONTROL ADVISORY SERVICE

Phone 03 9956 1046 & Toll Free: 1800 312 968

<https://www.infectionpreventionhelpline.com.au/>



Infection Prevention Helpline

- General practices
- Community Pharmacists
- Aboriginal Community Controlled Health Organisations



PRINCIPLES OF INFECTION PREVENTION & CONTROL (IPC) IN WOUND CARE

CHERYL FRANK



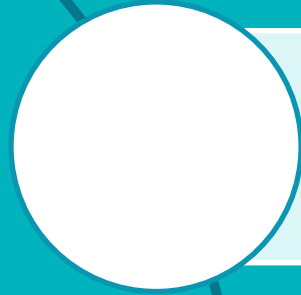
Cheryl joined the Gold Coast Health District in 1996 as a Clinical Nurse Consultant Wound Management

Cheryl also holds a Cert IV in Training and Assessment and has collaborated with APNA to provide education to primary health nurses within general practice throughout Australia.

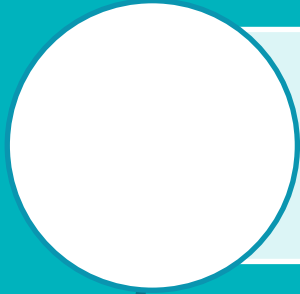
She co-founded a Wound Busters Pilot Chronic Wound Clinic with Dr Stephen Yelland in 2012, and she is currently a Director of Wound Busters Pty Ltd and Debriflo Pty Ltd. In 2014, the Wound Busters Clinic was awarded a runner-up prize at the National Lead Clinicians Forum for its work with the Gold Coast Primary Health Network on a wound management GP nurse and GP education project.



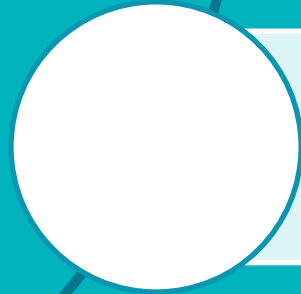
Learning Outcomes



Use evidence-based recommendations of IPC and implement effectively into practice

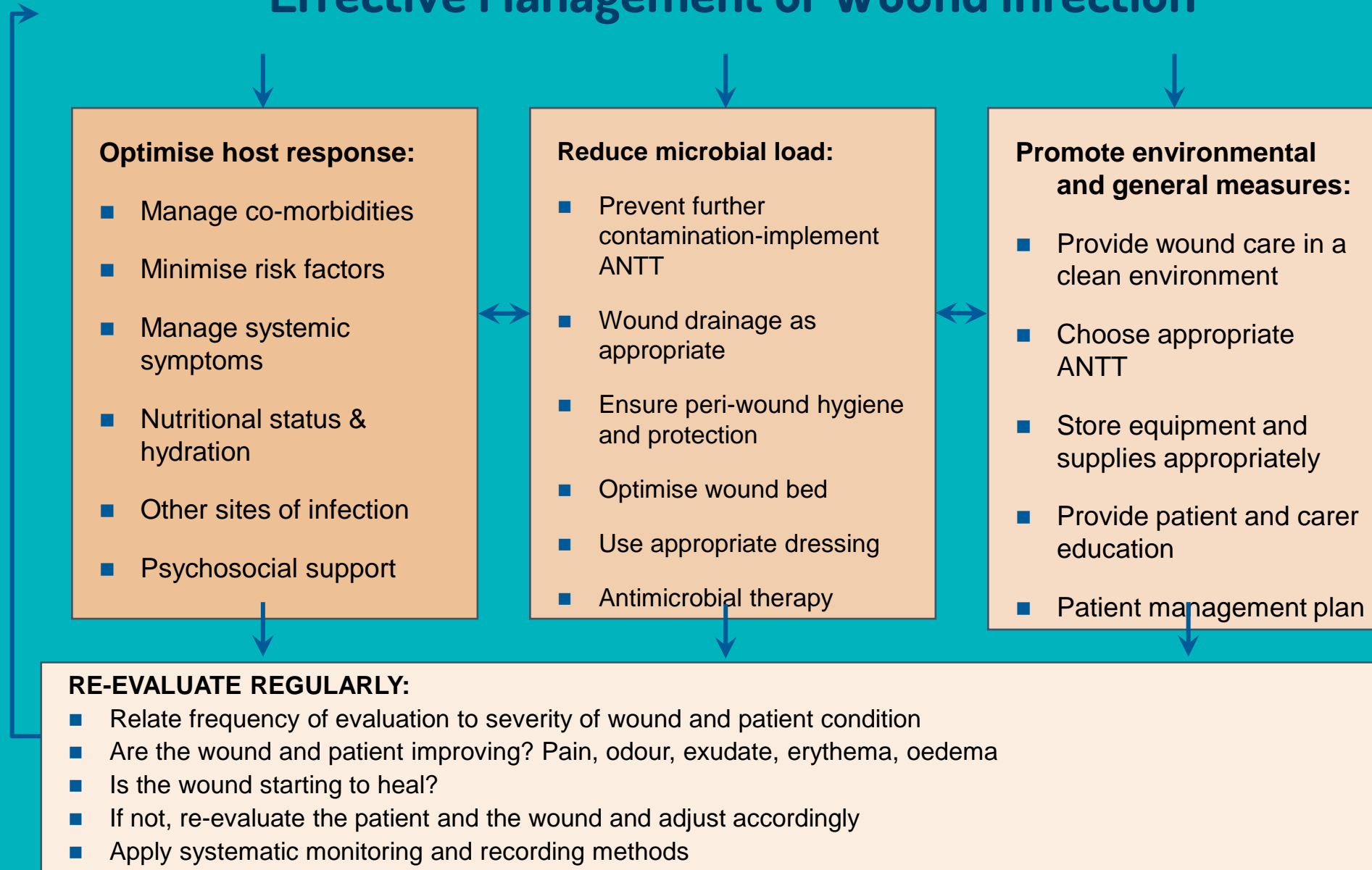


Apply safe practices to reduce wound infection



Understanding the importance of using current educational resources

Effective Management of Wound Infection





Promote environment and
general measures:



Waiting Room:



Clinical
Environment:

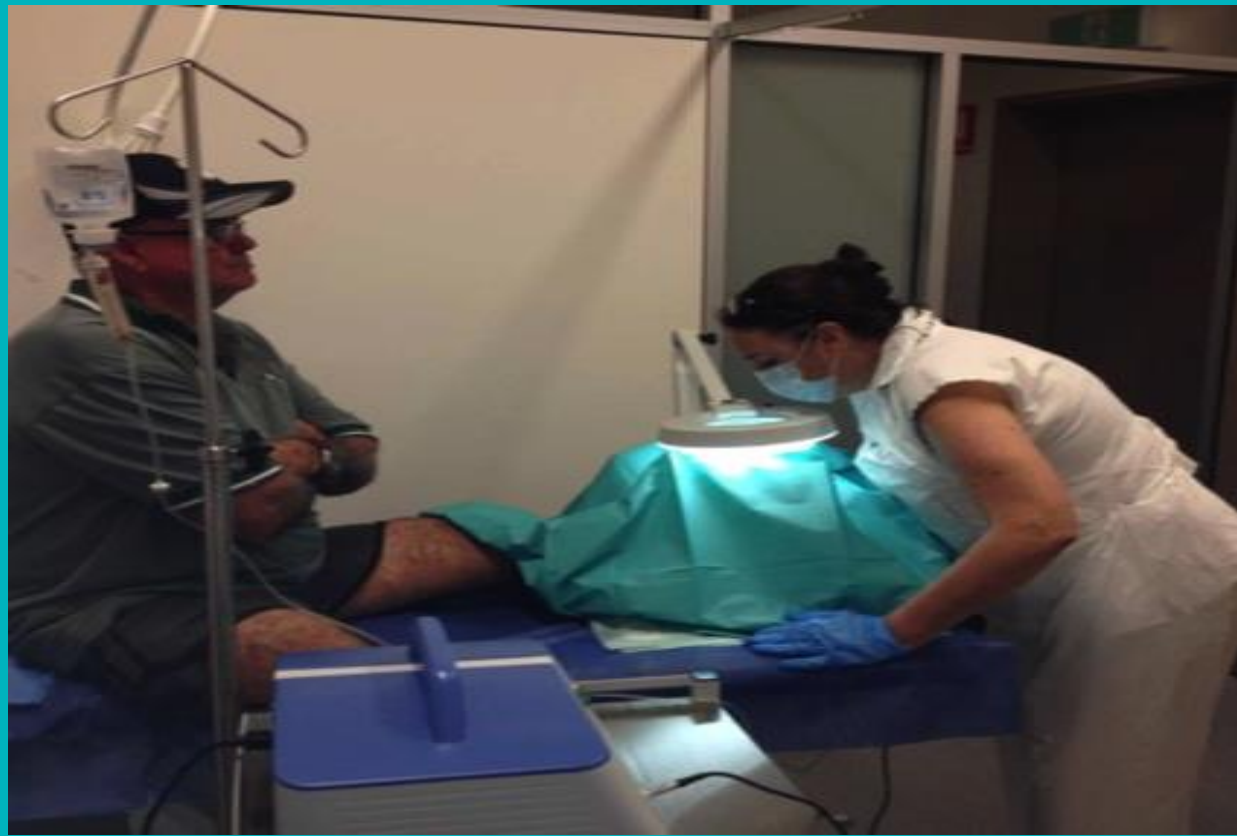
Creating a safe patient environment.

- Clean trolley.
- Empty drawers.
- Clean gloves???
- Curtains – removed and cleaned as per type.
- Sheets removed as per type.





Debridement,
biopsy



Risk mitigation
of
aerosolisation



Optimise host response...

- Optimise individual host response
- Optimise management of co-morbidities.
- Minimise or eliminate risk factors.
- Optimise nutritional status and hydration.
- Assess and manage other anatomical sites of infection.
- Treat systemic symptoms.
- Promote psychosocial support.
- Provide appropriate systemic antimicrobial therapy.
- Ensure the individual is engaged in development of personalised management plan.
- Promote education by the interdisciplinary wound management team.







Biopsy – Quantitative Bacteriology

Pros...

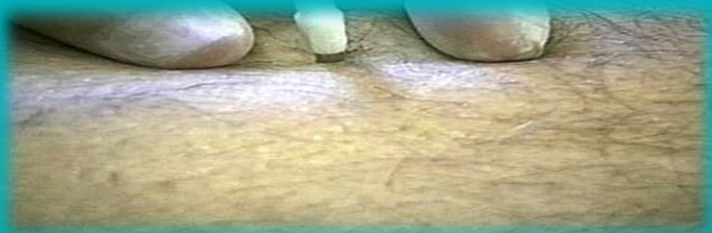
Accurately identifies tissue

Accurately identifies the type and number of organisms in tissue

Practice Point

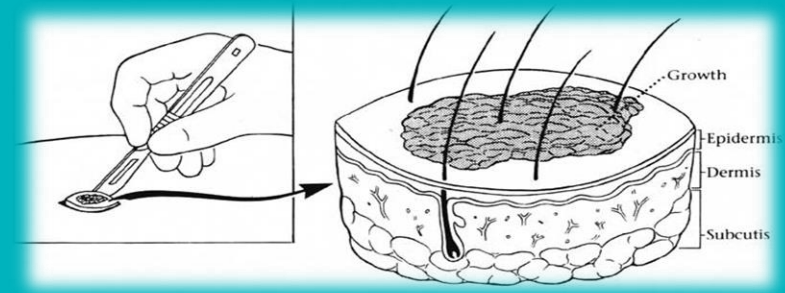
*Ask for histology as well
[put in saline, not formalin]*

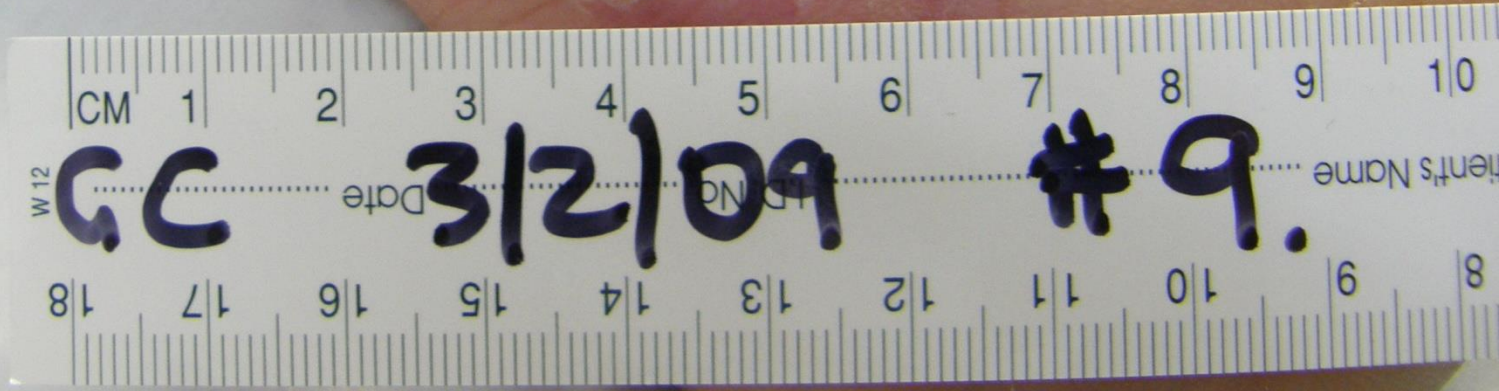
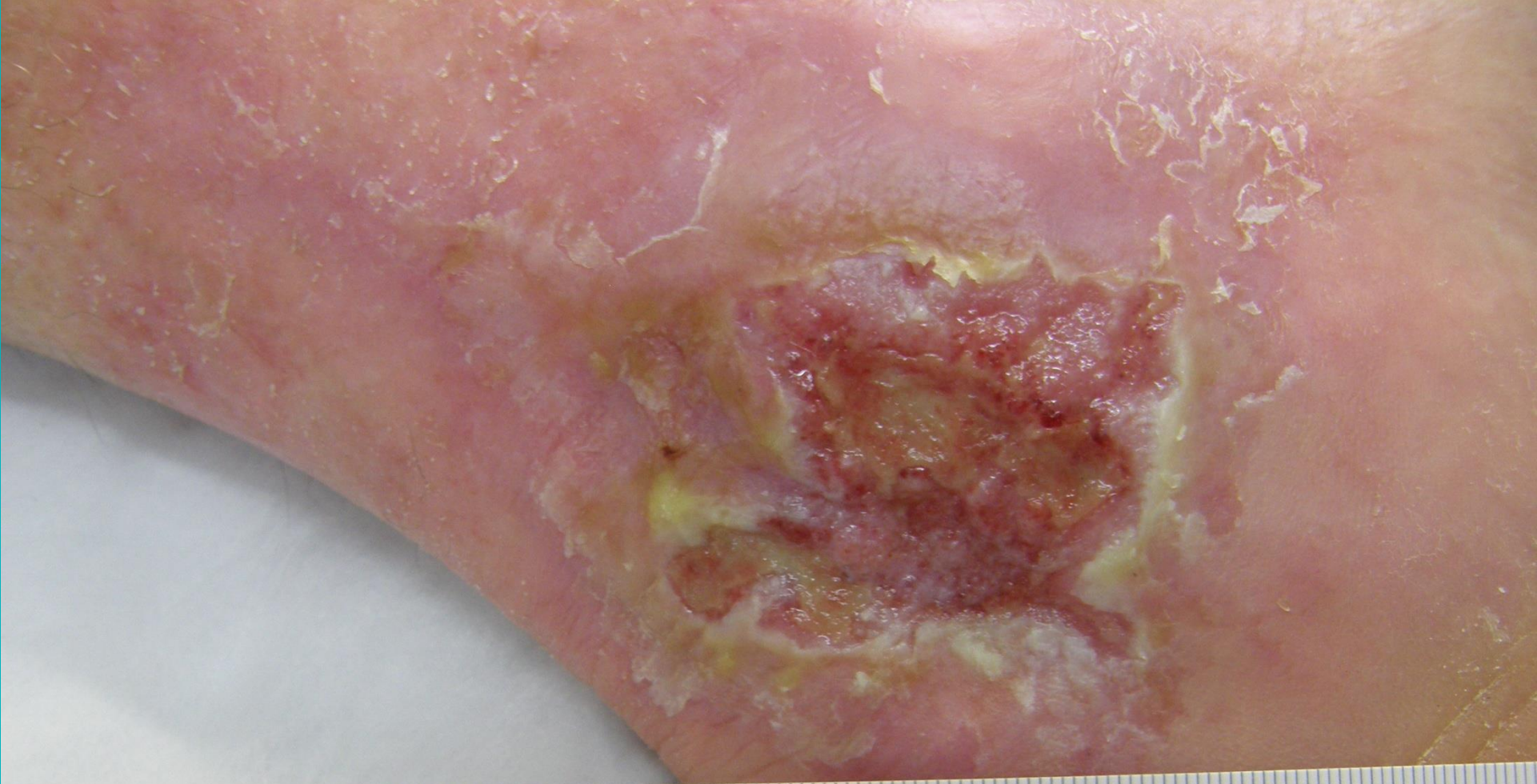
*Reserve for wounds of
uncertain diagnosis or
delayed healing*



Cons...

- Requires technical expertise
- More time consuming
- Restricted to hospitals or doctors rooms
- Increased cost
- Causes pain
- May delay healing but generally regenerates well





Effective management of wound infection:

- Know your patient.
- Add to the care plan.
- Manage contributing factors.
- Allow enough space to conduct the necessary elements of Wound Management.
- Evaluate, collaborate and refer.

1. Evaluation of Ulcer Aetiology

2. Treatment of Underlying Cause

3. Management of the Wound

4. Monitoring and maintenance of healing of Wound



CONTAMINATED WOUNDS can and should be managed with antimicrobial products, prior to antibiotics



Treat the cause, understand the management aim



Application of aseptic technique in wound dressing procedure

Managing open-but-unused wound dressings

Scope: The recommendations in this resource support and are applied in conjunction with the Wounds Australia publication 'Application of aseptic technique in wound dressing procedure: A Consensus Document' 2020. The recommendations are applied within the framework and principles of aseptic technique (e.g. ANTT®). All recommendations are patient specific and sharing of items between patients, including dressing scissors, is not supported (unless specifically stated otherwise by the manufacturer).

Considerations

Care setting suitability

- Use of open-but-unused dressings in acute care inpatient settings is not recommended

Dressing

- Use suitable size for wound, if possible, to avoid using open-but-unused dressings
- An open-but-unused dressing:
 - must be appropriate to cut as per manufacturer
 - must not degrade or be inactivated if stored following opening
 - can be adequately resealed/re-contained in its original packaging

Storage

- Appropriate equipment is available

Service provider support

- Written policy/protocols are in place to support open-but-unused dressings

Patient specific equipment required

- Stainless steel scissors in a packet
- Resealable plastic bags
- Paper tape
- Alcohol or disinfectant wipes
- Permanent pen/marker



- Patient identification labels
- Plastic box with lid
- Dedicated cupboard or area for storage of box



Managing re-use of scissors

- Open packet the minimum amount to extract and replace the scissors



- Scissors must be cleaned prior to and following use

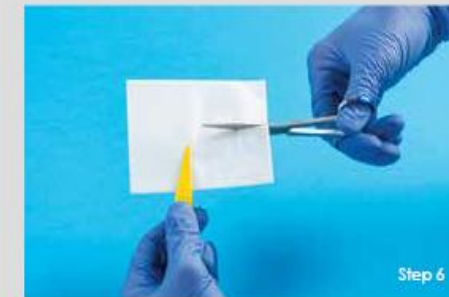


Cutting dressings (option 1: on the aseptic field)

- Open the packet enough to remove the dressing using forceps and place it on the aseptic field



- Cut off the required portion without the scissor handles touching the dressing or the aseptic field



Cutting dressings (on the aseptic field continued)

- Using forceps replace the remaining dressing in the packaging without touching the internal area of the packaging



Cutting dressings (option 2: in the packet)

- Open the packet enough to insert the blades of the scissors
- Cut off the required portion without the scissor handles touching the dressing or inside of the packaging



- Allow the cut portion to fall on the aseptic field



Tubes and bottles (option 1: on the aseptic field)

- Open tube/bottle and dispense required amount onto aseptic field
- No part of the tube/bottle contacts the aseptic field or other equipment
- Use a sterilised implement (eg. spatula, tongue depressor or forcep) to scoop the required amount and apply this to the wound or onto a dressing



Tubes and bottles (option 2: on a sterile implement)

- Open tube/bottle and dispense required amount directly onto a sterile implement, and apply this to the wound
- No part of the tube/bottle contacts the implement



Tubes and bottles (option 3: on the dressing)

- Open tube/bottle and dispense required amount directly onto the dressing, and apply this to the wound
- No part of the tube/bottle contacts the dressing



Storage of open-but-unused dressings

- The open-but-unused dressing is stored in its original packaging
- Turn open end of packet over twice and seal with paper tape, or re-seal tube
- Write date of opening on packet or tube



- Store the secured, original packaging containing the open-but-unused portion of dressing in a clean, resealable plastic bag labelled with the patient identification label



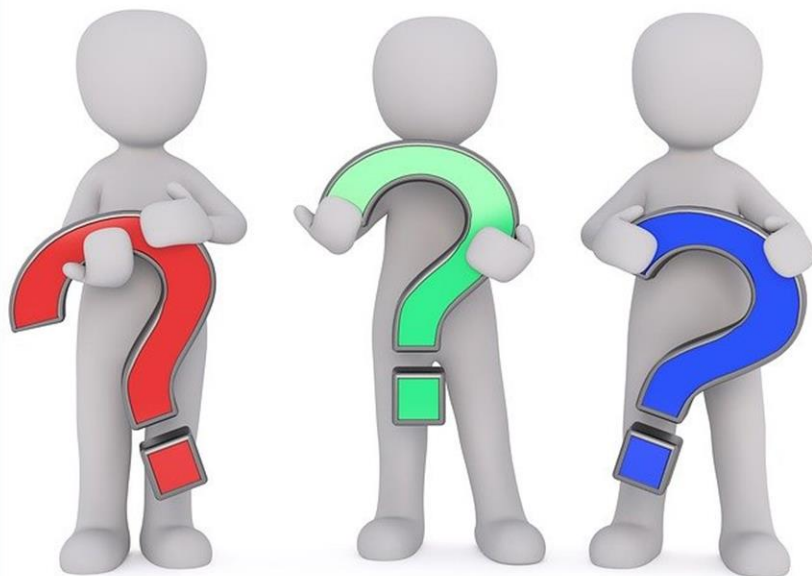
Excerpts from: Wounds Australia Consensus Document Application of Aseptic Technique in Wound Dressing Procedure 2020

Available at: www.woundsaustralia.com.au/publications

These recommendations are a general guide to appropriate clinical practice, to be implemented by qualified health care professionals subject to their clinical judgement of each individual case and consideration of the patient's personal preferences, care setting, service provider policy and procedures and available resources.



- Discard any remaining dressing after four weeks or as indicated by the manufacturer
- Ensure packaging and labels remain intact and replace if soiled or not intact



QUESTIONS???

THANK YOU FOR JOINING US



See you Nov 18th for our next
IPC webinar

Please complete your evaluation

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REFERENCES:

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- http://www.woundhygiene.com/media/5fqkphth/jwc_convatec_wound-hygiene-28pp_14-feb_ca_web-lic.pdf
- https://www.woundsaustralia.com.au/Web/Resources/Publications/Publications_Users_Only/Aseptic_Technique_in_Wound_Dressing_Procedure.aspx
- <https://www.standards.org.au/standards-catalogue/sa-snz/health/he-023/as-slash-nzs--4187-colon-2014>
- https://www.health.gov.au/sites/default/files/documents/2020/12/report-from-the-wound-management-working-group_1.pdf