



Additional Education Requirements/Competencies

Negative Pressure Wound Therapy Level One: Monitor & Manage

Indications for Use of this Document:

For Negative Pressure Wound Therapy (NPWT) there are two levels of competency:

- **NPWT Level One: Monitor & Manage** is for all nurses responsible for the monitoring/management of patients/clients/residents who are receiving NPWT. Use this document for the pre-requisites, lesson plan and competency checklist.
- **NPWT Level Two: Dressing Application** is for nurses responsible for the NPWT dressing application/reapplication (currently under development).

British Columbia Nursing Practice Level – NPWT:

- Registered Nurses (RNs), Registered Psychiatric Nurses (RPNs), and Licenced Practical Nurses (LPNs), as part of their unit-specific Negative Pressure Wound Therapy (NPWT) practice and in accordance with the British Columbia College of Nursing Professionals scope of practice for their specific designation, must:
 - Have a Health Authority/agency policy in place to support NPWT practice.
 - Have successfully completed Additional Education: NPWT Monitor & Manage.
 - Have client specific orders from a Physician/Nurse Practitioner (NP)/Nurse Specialized in Wound Ostomy Continence (NSWOC)/Wound Clinician.
 - Follow the established NPWT decision support tool guideline.
 - For LPNs: an established NPWT wound treatment plan in place.
- Each nurse is responsible and accountable to maintain their NPWT competency.

Pre-requisites for NPWT Monitor & Manage education:

- Completed Basic Wound Care education as defined by the Health Authority/ Agency.
- Removal of a NPWT dressing for a wound with undermining/sinus tract/tunnel requires competency in wound cleansing/wound packing of wounds with a visible and non-visible wound.

Lesson Plan:

The plan consists of learning activities to assist in knowledge acquisition and skill development in how to monitor & manage both reusable and disposable NPWT devices.

Competency Checklist:

A checklist consists of both verbalization of theory and demonstration of skill to show the nurse's competency related to the monitoring/managing of NPWT.

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.

Negative Pressure Wound Therapy - An advanced wound therapy that delivers either continuous or intermittent/ dynamic negative sub-atmospheric pressure (mmHg) to the wound, incision or graft.

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

References:

1. British Columbia College of Nursing Professionals. (2019). *Nursing standards for RNs and NPs*. Retrieved from https://www.bccnp.ca/Standards/RN_NP/StandardResources/RN_ScopeofPractice.pdf on March 24th 2020.
2. British Columbia College of Nursing Professionals (BCCNP). (2018). *Scope of practice for licensed practical nurses*. https://www.bccnp.ca/Standards/LPN/StandardResources/LPN_ScopeOfPractice.pdf on March 24th 2020.

Document Creation/Review

Created By:	British Columbia Provincial Nursing Skin & Wound Committee and NSWOCs/Wound Clinicians from across all Health Authorities.
Publication Date	May 2020
Revision Date(s)	June 2020, September 2020
Review Dates(s)	

**NPWT Level One: Monitor & Manage
Additional Education Requirements/Competencies**

Learning Plan

Learning Activity	Resources	Date Done
Completed Basic Wound Care education for wound cleansing/packing of visible and non-visible wound bed as per HA/Agency.		
Gain an understanding of the general theory of NPWT, specific Health Care Professional responsibilities, as well as: <ul style="list-style-type: none"> • How to manage adverse events. • How to prepare a Troubleshooting Supplies. • Requirements for transition/discharge. 	Read/review the NPWT provincial Decision Support Tool: Guideline: Negative Pressure Wound Therapy for Adults & Children.	
Determine which NPWT devices are used within your practice area.	Discussion with your Clinical Educator/Nurse Mentor.	
For those devices most commonly used on your unit/site learn: <ul style="list-style-type: none"> • What are the safety considerations. • How to manage the alerts/alarms. • How to change the canister (if applicable). 	Access the specific provincial NPWT device-specific Procedures and read these sections (see the procedure's Bookmark section): <ul style="list-style-type: none"> • Procedure: NPWT Reusable - Ulta4/ActiVAC Dressing Application • Procedure: NPWT Disposable - VACVia Dressing Application • Procedure: NPWT Disposable - Prevena Peel & Place Dressing Application • Procedure: NPWT Disposable - Prevena Customizable Dressing Application • Procedure: NPWT Disposable - SNAP Dressing Application • Procedure: NPWT Disposable - PICO7 Dressing Application 	
Review any additional HA / Agency specific policies, procedures, guidelines or practice standards for NPWT.	Discuss with your Clinical Educator/Nurse Mentor.	
Complete the e-learning module: NPWT Monitor & Manage (approximately 30mins).	The Learning Module is found on the: <ul style="list-style-type: none"> • PHSA Learning Hub • IHA I-Learn • Yukon Learning System 	
Complete the NPWT Monitor& Manage Module Quiz (100% needed to successfully complete course).	The Quiz is found on the above learning sites.	
Demonstrate, for your Nursing Mentor, a Safety/Monitor Check.		
Document, for your Nursing Mentor, your Safety/Monitor Check on the Safety/Monitor Checklist Flow Sheet.		
Demonstrate a canister change for the device used most frequently on your unit.		
Demonstrate how to manage alerts/alarms for the device used most frequently on your unit.		
Review the Client Health Education Resources for NPWT devices pertinent to your unit/site.	Check your HA's Patient Education website.	
Complete, with your Nursing Mentor, the Monitor & Manage Competency Checklist.	See next page.	
Complete any additional competency validation/compliance requirements of the HA / Agency.		

**NPWT Level One: Monitor & Manage
Additional Education Requirements/Competencies
Knowledge/Skill Competency Checklist**

Competency	Date Met	Mentor's Initials
Knowledge		
1. Describe how NPWT supports healing of wounds, incisions and grafts.		
2. Describe the components of a complete order needed for the initiation of NPWT.		
3. Describe the steps for performing a Safety Monitor Check.		
4. Describe situations which requires communication of an adverse event and identify team members requiring notification.		
5. Describe NPWT safety strategies to prevent a fall or a pressure injury.		
6. Describe what is necessary for a successful transition between care areas; e.g. acute to community, specific for NPWT		
7. Describe what trouble-shooting supplies the client/resident will need in their home.		
8. Describe how the patient/client/resident should shower with NPWT device (for the device most commonly used on the unit/care setting).		
9. Describe what to do with the NPWT dressing in the event of an irreparable dressing leak or a device failure.		
Skill (demonstrations can be done either at the 'bedside' or in simulation)		
1. Demonstrate a complete Safety/Monitoring Check.		
2. Complete the Safety/Monitoring Check Flow Sheet appropriately.		
3. Identify any unintended client outcomes and report appropriately.		
4. Identify where to locate information pertaining to specific NPWT devices' alerts/alarms.		
5. Identify where to locate information on how to change the specific NPWT devices' canisters.		
6. Demonstrate how to do a canister change (for the device most commonly used on the unit/care setting).		
7. Demonstrate how to review a NPWT Client Health Education Resource with client/family.		

Monitor & Manage Module completed: _____ (date)

Successful completion of Monitor & Manage Quiz: _____ (date)

Nurse* Name: Printed _____ Signature _____

Successful completion of the Monitor & Manage Knowledge/Skills Competency Checklist: _____ (date)

Nurse Mentor Name: Printed _____ Signature _____ Initials _____

Learning Plan for Unmet Skills:

*If using LHub: to obtain your **Record of Completion**, complete the LHub NPWT Monitor & Manage course's Step 5: Knowledge/Skills Competency Checklist (enter Nurse Mentor's name and date the Checklist done)

Appendix A: NPWT Monitor & Manage Knowledge Quiz

This Appendix A quiz is provided for learners who are not registered for the British Columbia LearningHub course *NPWT Level One: Monitor & Manage* e.g., learners outside of B.C., employees of health authorities/agencies who do not use the LearningHub platform, or those completing this as a part of their post secondary education.

For learners who are registered in the LearningHub course [NPWT Level One: Monitor & Manage](#): complete this same quiz which is located within course (your certificate of completion is based upon this).

Circle the best answer:

- The client asks the nurse to explain how NPWT is going to help heal his sacral-coccyx Stage 4 Pressure Injury. The nurse's best answer to explain how NPWT works for open wounds is:
 - NPWT pulls the wound fluid into a container so that there is less odor and staining from the wound.
 - NPWT applies negative pressure to the wound bed which enhancing wound contraction (macrostrain), as well as, granulation tissue formation (microstrain) leading to improved healing time.
 - NPWT systems slowly debrides the wound, allowing it to heal more effectively.
 - NPWT promotes angiogenesis (building of blood vessels) which increases tissue perfusion, bringing nutrients and oxygen to the wound
 - B & D
 - A & C
- A Physician/NP/NSWOC/Wound Clinician order is always required for NPWT.
 - True
 - False
- NPWT can be used to meet several different treatment goals, which of the following is/are not correct:
 - Healing of an Open Wound by enhancing the growth granulation tissue.
 - Management of low exudate volume.
 - Healing of Closed Incision by splinting the incision.
 - Healing of a Skin Graft by bolstering the graft.
 - Preparing the wound for Delayed Surgical Primary Closure.
- You are doing your q2h Safety/Monitoring Check; what are you checking for when you check the device itself? Choose **all** that apply:
 - Battery life.
 - Pressure and Therapy Settings.
 - An air leak.
 - Device is powered ON.
 - Plugged into the wall, if needed.
- When a NPWT alarm goes off, what is the **first thing** you should do, or teach the client to do, in order to determine the problem/cause?
 - Pull the plug from the wall.
 - Read the screen to identify the problem.
 - Call the local emergency department to see if they can help.
 - Assess the wound to ensure the dressing is sealed and the wound filler(s) is compressed.
 - Call the KCI / NPWT 24-hour 1-800 number.
- For patients who are being discharged from hospital with NPWT and for clients when NPWT is started in the community, teaching includes which of the following (chose **all** that apply):
 - How to turn off the NPWT machine and call 911/go to the ER if excessive bleeding is noted under the dressing, in the tubing or in the canister or if drainage changes from pink/yellow to bright red.
 - How to change the canister (if applicable).
 - How to manage the device alarms.
 - How to manage an air leak in the dressing.
 - How to run an ActiVAC reusable device battery down to 'empty'.

7. Your client, who has NPWT for an abdominal wound, is going for an MRI of his left foot. The trip to/from the MRI department will take less than 2 hours. How would you prepare the client for this procedure?
- a) Ensure that the patient is comfortable on the stretcher and that the NPWT device is positioned so as not to fall off the stretcher.
 - b) Remove the NPWT dressing from the abdominal wound and redress the wound with the alternate dressing as ordered.
 - c) Remove the canister from the device and ensure all tubing clamps are open. Transfer the client to the stretcher and position canister so as not to fall off the stretcher.

Correct Quiz Answers:

1e. 2a. 3b. 4a,b,d,e. 5b. 6.a, b, c, d. 7c.