

About this Unit

This standard covers undertaking treatments and dressings related to the care of individuals' lesions and wounds. It is applicable in a variety of care settings including hospitals, care homes, the individuals own home or other community settings such as GP surgeries.

This standard involves removing and disposing of soiled dressings and wound coverings, cleaning lesions and wounds and applying fresh treatments/dressings.

All of these activities must be undertaken using an aseptic technique and following local guidelines and procedures.

Users of this standard will need to ensure that practice reflects up-to-date information and policies

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

Values — the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

Key Words and Concepts — a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

Specific Evidence Requirements for the Unit

It is essential that you adhere to the Evidence Requirements for this Unit

SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT
Simulation:
<ul style="list-style-type: none"> ◆ Simulation is NOT permitted for any part of this Unit.
<ul style="list-style-type: none"> ◆ The following forms of evidence ARE mandatory:
<ul style="list-style-type: none"> ◆ Direct Observation: Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. For example, how you maintain sterility of the dressings during the procedure and secure them appropriately. ◆ Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example, changes in the lesion/wound you noticed and how you dealt with this.
Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:
<ul style="list-style-type: none"> ◆ Reflective Account: These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge. ◆ Questioning/professional discussion: May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice. ◆ Expert Witness: A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice. ◆ Witness Testimony: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen. ◆ Products: These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier. ◆ Prior Learning: You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit. ◆ Simulation: There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation.
GENERAL GUIDANCE
<ul style="list-style-type: none"> ◆ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence. ◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge. ◆ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work. ◆ All evidence must relate to your own work practice.

F07L 04 (CHS12) Undertake treatments and dressings related to the care of lesions and wounds

KNOWLEDGE SPECIFICATION FOR THIS UNIT

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role.**

You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the 'knowledge evidence' section of the Assessment Guidance.

You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
1 The current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to undertaking treatments and dressings related to the care of lesions and wounds.	
2 Your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance.	
3 The duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer.	
4 The importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence.	
5 What valid consent means and why it must be obtained and confirmed prior to actions being taken.	
6 The importance of applying standard precautions to undertaking treatment and dressings related to the care of lesions and wounds, and the potential consequences of poor practice.	
7 Why individuals should be supported and told about the nature of the lesions/wound treatment or dressing.	
8 The concerns and worries which individuals or client groups have.	
9 The adverse reactions which may occur during and following procedures and how to identify and deal with these.	
10 The role of the tissue viability/wound care specialist practitioner and how they can be contacted.	
11 The anatomy and physiology of the skin related to the application of dressings and wound supports.	
12 The following regarding wound healing: (a) the process of wound healing (b) factors affecting wound healing (c) potential complications of wound healing	
13 A working knowledge of: (a) asepsis (b) antisepsis (c) cross infection	

You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
14 How aseptic technique contributes to the control of infection.	
15 Potential sources of contamination when undertaking treatments and dressings and appropriate measures to reduce or deal with them.	
16 The potential consequences of wound contamination.	
17 A working knowledge of: (a) the equipment and materials required for the treatments and dressings you are required to undertake (b) why resources should be prepared before you start the activity (c) the personal protective clothing and additional protective equipment which may be worn for the individual's and your protection	
18 The types of treatments that are undertaken within your work area and why they are carried out.	
19 The types and purposes of dressings used within your work area.	
20 The importance of following the treatment and dressing procedures exactly as it is specified, and the potential effects of not doing so.	
21 The importance of packing up used equipment and soiled dressing materials prior to leaving the immediate care area.	
22 How and where to dispose of soiled materials used for treatments and dressings.	
23 Why questions which are beyond your role or knowledge need to be passed onto the appropriate member of the care team.	
24 A working knowledge of: (a) the importance of keeping accurate and up-to-date records (b) the specific records required for reporting on treatments and dressings carried out	
25 The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff.	

Performance Criteria		DO	RA	EW	Q	P	WT	PD
		1	Apply standard precautions for infection prevention and control and take other appropriate health and safety measures.					
2	Check the individual's identity and confirm the planned activity.							
3	Give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns.							
4	Gain valid consent to carry out the planned treatment and/or dressing.							
5	Confirm all equipment and materials for treatments and dressings are: (a) as prescribed/detailed in the individual's plan of care (b) appropriate to the procedure (c) fit for purpose							
6	Carry out the treatments and dressings: (a) at an appropriate time according to the individual's plan of care (b) using appropriate techniques (c) in line with manufacturer's instructions (d) in a manner which optimises the patient's comfort and dignity and minimises pain and trauma							
7	Observe the lesion/wound for any change in appearance.							
8	Where there is a change of appearance in the lesions/wound apply a suitable alternative where this is within your own sphere of competence, or refer to an appropriate practitioner.							
9	Observe the individual throughout the activity, recognise and report any condition or behaviour which may signify adverse reactions to the activity and take the appropriate action.							
10	Maintain the sterility of the dressing prior to and during application.							
11	Apply or attach dressings correctly.							
12	Use suitable non-allergenic dressings where individual allergies have been identified.							
13	Ensure that the pressure exerted by the dressing is consistent with the type of wound.							
14	Dispose of waste appropriately.							

Performance Criteria		DO	RA	EW	Q	P	WT	PD
15	Where appropriate, record the outcomes of the activity correctly using the method agreed in your care setting.							
16	Report your findings and/or activity to the appropriate member of the care team.							

DO = Direct Observation

EW = Expert Witness

PD = Professional Discussion

RA = Reflective Account

P = Product (Work)

Q = Questions

WT = Witness Testimony

To be completed by the candidate

I SUBMIT THIS AS A COMPLETE UNIT

Candidate's name:

Candidate's signature:

Date:

To be completed by the assessor

It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.

I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.

Assessor's name:

Assessor's signature:

Date:

Assessor/Internal verifier feedback

To be completed by the internal verifier if applicable

This section only needs to be completed if the Unit is sampled by the internal verifier

Internal verifier's name:

Internal verifier's signature:

Date: