

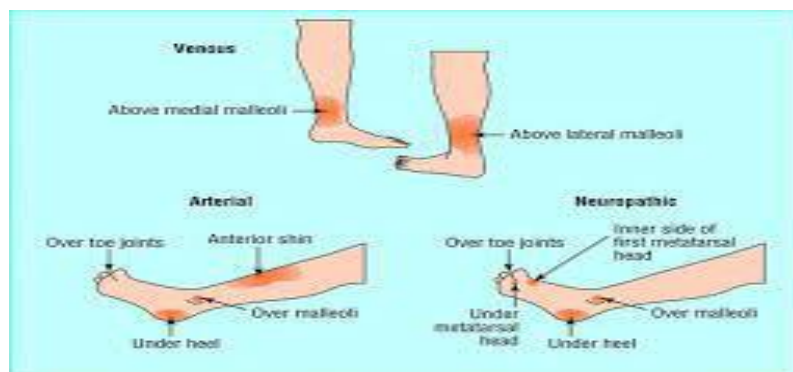


- Only staff trained by an Appropriately Qualified Health Professional (AQHP) can perform this procedure.
- This procedure is a guide only and may not be appropriate in all circumstances. Therefore, instructions from an AQHP must always be obtained and followed.
- Ensure that the person’s staffing preference is applied to this procedure, as detailed in their [NDIS LWB 5531 Personal Care - Plan](#).
- This procedure should be read with the [NDIS LWB 5600 High Intensity Daily Personal Activities - Procedure](#), [NDIS LWB 5501 Health and Wellbeing - Procedure](#), [Medication Administration Procedures](#), [NDIS LWB 5531 Personal Care - Plan](#) and in consultation with the person.

Only an AQHP (wound care registered nurse) can apply dressings and wound healing devices.

The AQHP is to provide training in any required wound care and is in the scope of practice of a Disability Support Worker (DSW)..

Common Areas for Neuropathic Ulcers



Neuropathic Ulcer Wound Care Procedure



Check

- Check and follow the person’s Complex Wound Care Plan/protocol.
- Check that the required equipment and consumables are available and ready for use.
- Confirm how the person would like to be actively involved in their support, as outlined in their plan, and to the level they choose.
- Explain the procedure to the person and seek their consent to proceed.
- **Call 000** if the person has a fever or is vomiting.
- **Seek urgent medical advice** if the wound has an offensive odour

- A team of allied health professionals, including a dietician, should review any person at risk of pressure ulcers or a chronic pressure ulcer.
- People who have diabetes (Type 1 or 2) should have prevention strategies documented in their Diabetes Management Plan.



Support

- DSWs should never trim a person's toenails. The person should be supported to access Podiatry services.
- Wear the appropriate PPE – latex-free disposable gloves, gown or apron, face shield, or protective goggles. Refer to [NDIS LWB 5507 Let's Talk About PPE for Support Activities](#) for the correct PPE requirements and follow hygiene and infection control procedures.
- Ensure the correct lifting techniques are followed, per the person's [Transferring, Repositioning, and Mobility \(TRAM\) Plan](#) when supporting a person to change position. For example, a slide sheet or hoist may be appropriate.
- Follow the Complex Wound Care Plan, which an AQHP has developed.
- Actively involve the person in their support, as outlined in their plan, and to their chosen level.
- Observe the person's skin daily, particularly their feet and toes. Activities such as toileting, washing, showering and repositioning should be seen as an opportunity to look at and inspect the skin, especially in high-risk areas.
- Relieve pressure from the area.
- Maintain regular podiatry care.
- Moisturiser dry skin with recommended creams.
- Support the person in having well-fitting footwear.
- Avoid rubbing or prolonged pressure on the skin using a circulatory device or application. i.e. pressure stocking, pressure wraps or lymphatic circulation machine (as a medical practitioner prescribes).
- Assist and support the person in understanding that walking barefoot should be avoided.
- Support the person to seek prompt treatment of fungal infections (as defined by a medical practitioner).
- Seek medical advice if any changes are observed. For example, obtain medical advice when a pressure injury or ulcer is identified or if an existing wound fails to respond to treatment.
- Contact a diabetes educator – if one is involved.



Report

- Take note of the location of any ulcer on the body, its size (e.g. length and width), appearance (shape, pattern and colour), and any presentation of pain and discomfort.
- If skin integrity issues, pressure injury or wounds result from a failure to implement the person's documented support strategies, this should be recorded in i-Sight as *Category Client Wellbeing> Category Type Neglect*.
- Any unexplained bruising, suspicious mark or injury must be reported immediately to the Disability Support Leader or On Call, and i-Sight event created – *Category Client Wellbeing>Category type Injury>Category Subtype Unexplained Serious/Minor Injury*.
- Document all wound care and prevention methods in progress notes and record any areas of skin changes or pressure damage in the [NDIS LWB 5553 Bruising, Injury and Skin Integrity - Recording Chart](#).
- Report any concerns or issues related to ulcer care immediately to the Disability Support Leader¹ or On Call.

For Further Guidance and Advice

Contact the AQHP who developed the person's support plan.

¹ All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor.