

<< Return to [Wound care: advanced tools and talented care teams lead to solid wound management](#)

## Wound care: advanced tools and talented care teams lead to solid wound management

John Andrews March 01 2009

Long-term care providers have an impressive arsenal of weapons at their disposal in the war against pressure ulcers.

The key to victory is in executing the battle plan with them, experts say.

“The status of wound care in the long-term care marketplace can be characterized as ‘technologically savvy’ in regards to new product development and availability of products across the continuum,” says Cynthia Sylvia, RN, program manager for educational development at Orchard Park, NY-based Gaymar Industries. “Manufacturers and distributors are targeting alternate care organizations with an eye toward providing product and support to bolster sales related to improving practice.”

While a flood of new products generally is a good thing, it also can have a daunting effect on provider purchasing decisions, says Mark Richards, vice president of clinical education for Reno, NV-based Accelerated Care Plus.

“During the past several years, the long-term care market’s been deluged with new wound care products and I feel sorry for facility operators—it makes it difficult for them to determine which products are truly effective,” he says. “Some commonly used products are quite expensive, incurring daily usage fees and, without careful and routine patient-specific assessments, have a tendency to be overused.”

The wound care field clearly has made impressive strides in the prevention, treatment and healing of pressure ulcers.

Topical therapy, wound bed preparation, debridement applications, nutritional supplements and support surfaces all have contributed to improved wound care practices. Sophisticated clinical approaches have evolved as well, says

Beth Sherman, Accelerated Care Plus division vice president.

"I think most long-term care facilities have come a long way in developing their wound care programs," she says. "There is more effort towards an interdisciplinary approach. They have gone away from an approach of just having a single wound treatment nurse to a more global education of nursing staff in the facilities. They are also very aware of the need to evaluate a patient's risk factors upon admission and will make attempts to address support surfaces and make referrals to therapies."

Gaymar's Sylvia says caregiver awareness has grown exponentially over the years.

"Professional and lay caregivers are now making prevention a top priority," she explains. "Identifying risk, assessing skin integrity and tying risk to early intervention are all being given the significance that quality improvement initiatives demand, so the recognition of pressure ulcers is now more efficient."

#### Product patterns

As a category, manufacturers report, advanced wound care products are growing at well above the annual average market growth rate. However, some product groups that were celebrated just a few years ago, including hydrocolloids and films, have seen a decrease in demand, while the markets for alginates and foams are growing rapidly, notes Joyce Norman, clinical education specialist with Mundelein, IL-based Medline Industries.

"In the last 10 years, the biggest change in wound care is the use of antimicrobials in a topical application, improvement of the products to have longer wear times, and more evidence-based information to support practices," says Norman, a registered nurse.

Advanced products are designed to promote a moist environment, thereby accelerating healing of many difficult-to-treat or chronic wounds. Substances that help provide ideal moisture conditions include hydrogels, hydrocolloids, foams and alginates. Norman says she's seen advanced products being used earlier and more often.

Silver dressings, which have fast-acting, broad-spectrum antimicrobial silver ion properties, are especially effective, she says.

“Not only is ionic silver an excellent, cost-effective choice for the management of chronic wounds, but it also provides the unexpected benefit of pain control,” Norman says. “There are various types of ionic silver—some have sustained released silver, some are impregnated with silver and some are actually woven. Whichever type of silver dressing is chosen, considering total costs over time can prove to be of great benefit to a nursing facility, enhancing not only its reputation for care, but its bottom line as well.”

No golden rules

Wound healing methods follow no single “golden rule” or “prescription” of care, Sylvia maintains.

“Taking into account care settings, individual variability among caregivers and between facilities and the heterogeneity of patient risk factors for pressure ulcer development, one commonality is the importance of evidence-based, personalized care plans,” she says. “We hear about the ‘best practice’ and ‘optimizing outcomes,’ but cutting to the quick, the keys are thorough assessment and implementation of the nursing process.”

In Richards' view, highly coordinated treatment plans are the hallmark of an effective long-term care wound care program.

“The facilities most successful in managing wounds are those that have a wound care team involving all key departments within the facility—the medical director to facilitate necessary patient medical work-ups, nursing to provide primary patient care including wound dressings, therapy to apply specific services such as modalities and wound debridement, and dietary services to ensure that those with wounds have adequate nutritional intake,” he says.

“Regular wound care rounds and discussions among team members create powerful treatment plans that are regularly adjusted according to individual responses to care. Ultimately, highly coordinated treatment plans reduce average wound healing times, thereby lessening resident suffering and costs of care,” he adds.

Norman of Medline calls successful wound management “a creative and dynamic process requiring the comprehensive teamwork of healthcare professionals working together.”

Prevention, early detection and rapid, effective intervention are among the basic principles of prevention and therapy, Norman says. She adds that caregivers need to be proficient in recognizing the signs and symptoms of basic and atypical wounds.

#### Tackling wounds

An optimal wound treatment program starts with foresight and commitment from the top, according to Sylvia.

“Administrators need to have the vision to promote high-quality wound care and lead trusted wound care specialists within the facility to autonomously implement best practices for superior patient care.”

Nothing keeps nurses “on top of” wounds more effectively than education, she believes.

“Education needs to be ongoing and approached through the principles of adult education to make it relevant to daily practice,” she explains.

Sylvia recommends providers use vendor support options for education as well as pressure ulcer prevalence audits.

They also should also take advantage of research opportunities.

“The goal of promoting healing can only be achieved with a sound knowledge base and allocation of resources to ensure training and development are equally important to the allocation of wound care products in achieving outcomes management,” she says.