WOUND CARE COMPETENCY CHECKLIST- Nursing Managers

Employee Name:	Date:

Evaluator Name:_____ Title:_____

Committee participation/ Policy and Procedures/Leadership				
Performance Criteria	Met	Not Met		
Attends hospital/facility wide skin/wound committee meetings				
Provides feedback to hospital/facility wide skin/wound risk assessment				
department				
Assures that skin injuries/ulcers/wound policy and procedures are accurate and				
up-to-date with the most current CMS regulations, evidence & clinical guidelines				
Coaches/mentors staff in prevention, assessment & management of the various				
skin injuries/ulcers (pressure ulcers, venous ulcers, MASD, DFU, skin tears)				
Coordinates on-going staff education/training for new employees and continuing				
employees on a regular basis				
Provides resources for staff to implement prevention and treatment care				
 Advocates for resources to senior leadership 				
 Develops business plans, when needed, to secure required resources 				
Makes wound rounds with wound care experts and staff on a regular basis				
Creates evidence based action plans to meet appropriate outcomes for all skin				
and wound conditions				
 Uses a systems approach to redesign care and improve 				
outcomes				
 Addresses individual issues through education and counseling 				
Pressure Ulcers	•			
Performance Criteria	Met	Not Met		

Pressure Olcers		
Performance Criteria	Met	Not Met
Prevalence and Incidence		
 Monitors incidence/prevalence rates both hospital/facility wide and 		
nursing unit specific		
Monitor's staff adherence to unit's pressure ulcer prevention action plan		
Risk Assessment		
 Monitors staff adherence to completing pressure ulcer assessment tool 		
(e.g. Braden Scale) accordingly to hospital/facility policy		
 Evaluates staff ability to perform a comprehensive assessment to 		
determine patient's/resident's risk for pressure ulcer development		
including:		
Any low subscale scores		
Skin assessment		
Patient/resident risk factors: e.g.co-morbidities, medications, etc		
 Evaluates staff implementation of appropriate pressure ulcer 		
prevention interventions based on the individualized patient/resident		
assessment that can include:		
Pressure redistribution		
Repositioning		
Skin care and protection		

	Nutrition		
	Moisture		
	Shear		
٠	Monitors staff communication of patient/resident pressure ulcer risk		
	during handoff and to other members of the health care team		
Pressu	re Ulcer Classification		
•	Monitors staff performance of ability to differentiate pressure ulcer		
	from other skin injuries- e.g. skin tears, moisture associated skin damage		
	(MASD), venous ulcers, etc		
•	Monitors staff accuracy of all six pressure ulcer(s) stages using the		
	NPUAP EPUAP PPPIA 2014 classification system		
•	Monitors staff documentation of pressure ulcer characteristics per		
_	hospital/facility policy		
Pressu	Ire Ulcer Treatment		
•	Monitors staff performance of ability to cleanse pressure ulcer per		
	hospital/facility policy		
•	Monitors staff ability to apply dressings (when ordered) per		
	hospital/facility policy		
•	Monitors infection rates of pressure ulcer(s)		
•	Monitors staff adherence to documentation of any pressure ulcer		
	treatments and assessments for changing status (healing or worsening)		
•	Evaluates effectiveness of pressure ulcer status communication across the interprofessional team		
Vonou	is Leg Ulcers		
		Met	Not Met
Perfor	mance Criteria	Met	Not Met
	mance Criteria Monitors staff ability to differentiate venous leg ulcers from other skin	Met	Not Met
Perfor	mance Criteria Monitors staff ability to differentiate venous leg ulcers from other skin ulcers	Met	Not Met
Perfor •	mance Criteria Monitors staff ability to differentiate venous leg ulcers from other skin ulcers Monitors staff ability to perform ABI prior to applying compression	Met	Not Met
Perfor •	mance Criteria Monitors staff ability to differentiate venous leg ulcers from other skin ulcers Monitors staff ability to perform ABI prior to applying compression bandages or stockings	Met	Not Met
Perfor •	mance Criteria Monitors staff ability to differentiate venous leg ulcers from other skin ulcers Monitors staff ability to perform ABI prior to applying compression	Met	Not Met
Perfor • •	mance CriteriaMonitors staff ability to differentiate venous leg ulcers from other skin ulcersMonitors staff ability to perform ABI prior to applying compression bandages or stockingsMonitors staff ability to cleanse venous leg ulcers per hospital/facility policy	Met	Not Met
Perfor • •	mance CriteriaMonitors staff ability to differentiate venous leg ulcers from other skin ulcersMonitors staff ability to perform ABI prior to applying compression bandages or stockingsMonitors staff ability to cleanse venous leg ulcers per hospital/facility	Met	Not Met
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Perfor	mance CriteriaMonitors staff ability to differentiate venous leg ulcers from other skin ulcersMonitors staff ability to perform ABI prior to applying compression bandages or stockingsMonitors staff ability to cleanse venous leg ulcers per hospital/facility policyMonitors staff ability to apply dressings and change (when ordered) per hospital/facility policyMonitors staff ability to apply compression bandages or stockings per prescriber's ordersMonitors staff ability to assess ulcer(s) for signs and symptoms of infectionMonitors staff ability to assess for painMonitors staff documentation of any venous leg ulcer treatments and	Met	Not Met
Perfor	mance CriteriaMonitors staff ability to differentiate venous leg ulcers from other skin ulcersMonitors staff ability to perform ABI prior to applying compression bandages or stockingsMonitors staff ability to cleanse venous leg ulcers per hospital/facility policyMonitors staff ability to cleanse venous leg ulcers per hospital/facility policyMonitors staff ability to apply dressings and change (when ordered) per hospital/facility policyMonitors staff ability to apply compression bandages or stockings per prescriber's ordersMonitors staff ability to assess ulcer(s) for signs and symptoms of infectionMonitors staff ability to assess for painMonitors staff documentation of any venous leg ulcer treatments and assessments for changing status (healing or worsening)	Met	Not Met
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hospital/facility policy		
Monitors staff implementation of interventions to treat/prevent causes of MASD		
Monitors staff documentation of any MASD treatments and assessments for changing status (healing or worsening)		
Evaluates effectiveness of MASD skin damage status communication		
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	Iviet	Not Met
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changing status (healing or worsening)		
team		
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mance Criteria	Met	Not Met
Monitors staff ability to differentiate skin tears from other skin injuries		
Monitors staff implementation of individualized care plan to prevent		
skin tears as per hospital/facility policy		
Monitors staff implementation of interventions to treat causes of skin		
tears based on the ISTAP classification system		
Monitors staff implementation of interventions to protect skin damaged		
from skin tears as per hospital/facility policy		
Monitors staff documentation of any skin tear treatments and		
assessments for changing status (healing or worsening)		
Evaluates effectiveness of skin tear status communication with		
Evaluates effectiveness of skill tear status communication with		
	Monitors staff implementation of interventions to treat/prevent causes of MASD Monitors staff documentation of any MASD treatments and assessments for changing status (healing or worsening) Evaluates effectiveness of MASD skin damage status communication across the interprofessional team ic Foot Ulcers (DFU) mance Criteria Prevention Monitors staff adherence to assessing for risk of diabetic foot ulcer Monitors staff adherence to assessing for risk of diabetic foot ulcer Monitors staff use of skin temperature assessment Monitors staff evaluation of patient/resident blood glucose levels Monitors staff evaluation of patient/resident footwear and offloading Evaluates staff teaching and assessment of patient/resident self-care knowledge including adherence to care plan Ulcer Treatment Monitors staff ability to differentiate DFU from other skin ulcers Monitors staff ability to cleanse DFU per hospital/facility policy Monitors staff ability to apply/change dressings as ordered as per hospital/facility policy Monitors staff ability to assess for Charcot foot and/or infection Monitors staff ability to assess for Charcot foot and/or infection Monitors staff documentation of interventions to treat/prevent causes of DTU Monitors staff documentation any DFU treatments and assessments for changing status (healing or worsening) Evaluates effectiveness of DFU communication with interprofessional team asses Monitors staff ability to differentiate skin tears from other skin injuries Monitors staff implementation of individualized care plan to prevent skin tears as per hospital/facility policy Monitors staff implementation of interventions to treat causes of skin tears based on the ISTAP classification system Monitors staff implementation of interventions to protect skin damaged from skin tears as per hospital/facility policy Monitors staff indermentation of interventions to protect skin damaged from skin tears as per hospital/facility policy	hospital/facility policy Monitors staff ability to protect skin damaged from moisture as per hospital/facility policy Monitors staff implementation of interventions to treat/prevent causes of MASD Monitors staff documentation of any MASD treatments and assessments for changing status (healing or worsening) Evaluates effectiveness of MASD skin damage status communication across the interprofessional team Met Prevention Met Monitors staff adherence to assessing for risk of diabetic foot ulcer Monitors staff evaluation of patient/resident blood glucose levels Monitors staff evaluation of patient/resident footwear and offloading Evaluates staff teaching and assessment of patient/resident self-care knowledge including adherence to care plan Ulcer Treatment Monitors staff ability to differentiate DFU from other skin ulcers Monitors staff ability to apply/change dressings as ordered as per hospital/facility policy Monitors staff ability to apply/change dressings as ordered as per hospital/facility policy Monitors staff ability to assess for Charcot foot and/or infection Monitors staff cocumentation of interventions to treat/prevent causes of DTU Monitors staff documentation of interventions to treat/prevent causes of DTU Monitors staff documentation of interventions to treat planding Monitors staff documentation of interventions to treat causes of skin team assessments for changing status (healing or worsening) Evaluates effectiveness of DFU communication wit