

Northamptonshire Wound Care Framework Pathway

Tier's and Criteria

Escalation

Tier 5

Tier 1 GMS/LCS
Healing wounds less than 28 days old, evidence of healthy granulation/epithelial tissue
Suture & Clip removal, new tubes/drains/stomas that require dressing

Tier 2 GMS/LCS
Healing wound with evidence of healthy granulation/epithelia tissues that meets the following criteria:

- ABPI 0.8–1.3 weeks
- Wound area <100cm2
- Wound present <6 months
- No history cardiac failure
- Current infection/fungal infection resolved 7–10 days
- No history of non-concordance with treatment
- Wound reduces in size by 20–30% at 4–6 weeks
- No fixed angle or reduced range of motion
- No foot deformity
- No unmanaged pain
- No severe lymphoedema
- Venous leg ulcer management (venous disease is a lifelong condition that requires continuous venous compression therapy even after wound healing)

Tier 3 New Wound Contract
Healing wound with evidence of healthy granulation/epithelia tissues that meets the following criteria:

- ABPI outside of 0.8–1.3 range, unable to obtain ABPI
- Wound area >100cm2
- Wound present >6 months
- Controlled/uncontrolled cardiac failure
- Unresolved infection and / or history of recurrent infections
- History of non-concordance with treatment
- Fixed angle or reduced range of motion
- Foot deformity
- Unmanaged pain
- Severe lymphoedema
- Healthy static wounds for people living well with wounds (wound more than 6 months), includes tubes/drains/stomas with open wounds that are healthy.

Tier 4 New Wound Contract

- Wounds failing to heal despite adherence to local pathways or where pathway is assessed as NOT working
- Wounds with unresolved infection/discharge/odour/exposed muscle/tissues/uncontrolled pain/unresolved maceration/unresolved fungal infection/over granulation/debridement / necrotic tissue damage/ new tracking
- Tubes/drains/stoma sites with open wounds that are not healthy & healing
- Specialist advice/support and management planning if after treatment the wound is not healing, or Nurse has other concerns
- Seek advice if deteriorating/other complications

- Registered Nurse review same day if any flags present
- For all wounds which failed to heal/improve within 2 weeks, follow WOUND HEALING PATHWAY
- Treat localised signs of infection with support from GP
- Treat localised signs of fungal infections
- Urgent medical review if signs of feeling unwell/sepsis/excessive pain
- Urgent medical review is signs of DVT, excessive bleeding, loss of sensation, swollen glands
- Urgent surgical review if signs of surgical wound complications & surgical site infections unresolved after 5 days
- Refer to Tier 4 for those with unresolved infections/ discharges/ odour/ exposed muscle or tissues/ uncontrolled pain/ new tracking/ unresolved maceration/ fungal infections

- Registered Nurse review same day if any flags present
- For all wounds which failed to heal/improve within 2 weeks, follow WOUND HEALING PATHWAY
- Treat localised signs of infection with support from GP
- Urgent medical review if signs of feeling unwell/sepsis/excessive pain
- Urgent medical review if signs of DVT, excessive bleeding, loss of sensation, swollen glands
- Urgent surgical review if signs of surgical wound complications & surgical site infections unresolved after 5 days
- For lower limb left untreated is likely to develop more severe symptoms of venous disease in the future which are harder to treat. (follow LOWER LIMB PATHWAY throughout pts journey) Exposed muscle or tissues
- Lymphoedema or size of limb making compression impossible those with vasculitis or autoimmune disease
- Those not compliant with best practice treatment
- Those living with wounds whose symptoms are not under control

Refer to Tier 4 for assessment & advice for :-

- Slow to heal/no reduction in size by 1st 12 weeks
- Unresolved infections/ discharge/ odour/ uncontrolled pain/ new tracking/ unresolved fungal infections
- Fixed ankle/ leg deformity affecting ability to doppler/ applied effective treatment

- Registered Nurse review same day if any flags present
- Response to practice nurse queries within 2 days
- Urgent medical review if signs of feeling unwell/sepsis/excessive pain acute care/urgent care
- Urgent medical review if signs of DVT, excessive bleeding, loss of sensation, swollen glands acute care/urgent care
- Refer to chronic pain team for uncontrol chronic pain with no red flags

Tier 5 Acutes
Surgical
post op wound complications and infections not resolved after 5 days. Suspected implant/prosthetic infection

Vascular
As Per Lower Limb pathway
ABPI less than 0.5, stop compression and refer urgently
Those with ABPI 0.5–0.8 class 1 compression
Those with exposed tissue/muscles/tendons

Dermatology
urgent those with suspected skin cancer
those with difficult to treat skin conditions

Diabetic
As Per Diabetes and High-Risk Foot pathway
High Risk foot patients on IV therapy

Plastics
Patients under the care of Burns and Plastics who require metal forceps and magnifying glass to remove dressings will be managed by the Burns and Plastics team.

Care will be transferred back to appropriate Tier once wound healthy and showing signs of healing or static and healthy for those living well with wounds