East Suffolk and North Essex NHS Foundation Trust

Leg Ulcer Assessment and Management
Clinical Competency Pack

For (role/s): All Registered Nurses

Pre-requisites: Prior to commencing this clinical competency pack, all Registered Nurses must meet the following criteria:

- undertaken a Legal & Professional Update session within the last 4 years
- Has attended trust approved leg ulcer management program
- Have an appropriate mentor experienced in leg ulcer management and compression therapy

Following the training it is your responsibility to judge your understanding of the elements below.

Following training you will need to be signed as competent to undertake *Leg Ulcer Assessment and Management,* by an experienced registered practitioner or other experienced practitioner at line manager's discretion.

The user has been trained on the following practical and theory elements:

	Taught element	Training received
1.	Identifies the different types of Leg Ulceration	
2.	States the most common cause of arterial leg ulceration	
3.	States 2 acute causes of ischemia	
4.	States chronic causes of ischaemia	
5.	Lists signs and symptoms of arterial disease/ulceration	
6.	Lists predisposing/risk factors associated with arterial leg ulceration	
7.	Identifies which treatments prove to be effective when dealing with arterial leg ulceration	
8.	Lists the signs and symptoms of neuropathy	
9.	States what structures facilitate the flow of blood in one direction in the veins	
10.	States the pump/s which assist the venous return of blood to the heart	
11.	States the condition that results as a consequence of damaged incompetent valves	
12.	Lists the predisposing/risk factors associated with venous ulceration	
13.	Identifies the signs and symptoms which would lead to diagnose a venous ulcer	

14.	Discusses treatments which are proven to be most effective in the management of venous ulceration	
15.	Lists equipment required when performing a full leg ulcer assessment	
16.	States what does the hand held Doppler ultrasound measure	
17.	Identifies the differences between and 8mHz probe and a 5mHz probe and when to use them	
18.	Explains what gel is used when using the hand held Doppler and why	
19.	Names and locate all four pedal pulses	
20.	Explains why and how many pulses should be measured in each, arm and foot in order to obtain an ABPI	
21.	Explains which readings you would use when calculating the ABPI and why	
22.	Describes how to calculate the ABPI accurately	
23.	Lists all the factors that would affect the accuracy of the readings	
24.	Explains the different ratios of an ABPI, when you can compress, and when you need to refer on.	
25.	States the recommended frequency for Doppler re- assessment	
26.	States the rationale when to use reduced compression and full compression	
27.	States the optimum pressure required in mmHg at the ankle to reverse chronic venous hypertension	
28.	Identifies all the types of compression bandages and explain how to use each one	
29.	Describes how ankle circumference should be measured	
30.	Describes how patient be positioned before bandaging takes place	
31.	Describes alternative methods of compression	
32.	Describes the most important aspects of skin care in relation to leg ulcers	
33.	Describes infection control measures that must be taken when washing the patients legs	
34.	States how to recognise varicose eczema and first line treatment	
35.	Identifies the aftercare needed following healing of venous ulceration	
36.	States the advice that must be given to patients with a venous ulcer	
37.	States the frequency for renewing compression hosiery be renewed	
38.	States the difference between British Standard Hosiery and RAL Hosiery?	
39.	States the advice that could be given for ease of application	
40.	List different combinations of liners and hosiery could be used for ease of application.	
41.	Describes how compression stockings work and different classification	

42.	Demonstrates hand hygiene and universal precautions prior to assessing the patient	
43.	Patient preparation: • Explains procedure • Positions patient • Allows appropriate rest time • Protects ulcer site	
44.	Obtains verbal consent	
45.	Assesses mental capacity if necessary	
46.	Offers support and answers questions in an appropriate manner, level and pace	
47.	Assists patient into a comfortable position prior to the assessment	
48.	Assembles correct equipment with: • Appropriate probe gel • Check maintenance • Battery charged • Environmental effects	
49.	Demonstrates ; • Location of pulses • Appropriate use of gel • Identification of sounds • Selection of correct size cuff • Selection of correct reading to calculate ABPI	
50.	• Uses assessment protocol to inform decision making process • Complete assessment documentation and patient records appropriately	
51.	Selects appropriate bandages for selected compression therapy	
52.	Explains procedure to patient and seeks verbal consent. Discusses with patient lifestyle effects and changes	
53.	Assesses • Patient history • limb characteristics • Allergy status • ABPI calculation and implications	
54.	Bandage selection: • Rationalize bandage choice • Importance of ankle size and treatment choice	
55.	Bandage application: • Demonstrate correct safe application of bandages • Awareness of products • Foot positioning	

	• Demonstrate understanding of protection of vulnerable areas with padding • Check accuracy after application • Patient information and advice	
56.	Undertakes patient assessment taking into account risks and contraindications	
57.	Educates the patient taking into account risks knowledge and motivation	
58.	Identifies the need to reassess and record Doppler ABPI and review treatment plan accordingly	
59.	Positions the patient appropriately to allow accurate measurement of limb to determine hosiery size	
60.	Records in the medical notes: • Limb measurements • Size and type of hosiery required • What was distributed to the patient	

Trainer Signature:	Date:
Print Name:	

Doppler Assessment	
Observation 1.	
Department Based Assessor Signature:	Date:
Print Name:	
Observation 2.	
Department Based Assessor Signature:	Date:
Print Name:	
Observation 3.	
Department Based Assessor Signature:	Date:
Print Name:	
Observation 4.	
Department Based Assessor Signature:	Date:
Print Name:	

Compression Bandaging	
Observation 1. Department Based Assessor Signature: Print Name:	Date:
Observation 2. Department Based Assessor Signature: Print Name:	Date:
Observation 3. Department Based Assessor Signature: Print Name:	Date:
Observation 4. Department Based Assessor Signature: Print Name:	Date:

Compression Hosiery	
Observation 1. Department Based Assessor Signature: Print Name:	Date:
Observation 2. Department Based Assessor Signature: Print Name:	Date:
Observation 3. Department Based Assessor Signature: Print Name:	Date:
Observation 4. Department Based Assessor Signature: Print Name:	Date:

By signing this document I declare I am aware of my professional accountabilities and consider myself competent to undertake *Leg Ulcer Assessment and Management.*
User Signature: Department:
Print Name: Date:

On completion of competency please scan completed slip and email to *TrainingRegisters@esneft.nhs.uk*

Skill COM 021 Leg Ulcer Assessment and Management.	**Assessed by**	**Signature**
User Name	**Department**	**Date**