**Capstone Project Topic Selection**

The predicted upsurge in health care needs as a result of increasing populations in nursing and rehab centers has attracted the focus of governments and health care providers across the world. Wound management in nursing and rehab facilities provide a continuous challenge. Deteriorating body/muscle mass, frail skin and changes in cognitive function incline this client group to pressure injuries and skin tears. To manage such injuries, health care providers require an understanding of the modern wound management techniques and predictive tactics (Sullivan & Schoelles, 2013).This skill is lacking in the enormous semi-skilled populations of workers found in nursing and rehab centers. The disadvantage of this text (Sullivan & Schoelles, 2013) is that it does not provide sufficient information on the modern wound management techniques that modern health workers need to acquire.

Neuropathic ulcers, pressure ulcers, and chronic wound conditions present an ongoing threat to skilled nursing facilities and long-term care. According to Black et al. (2011), it is possible to avoid many pressure ulcers and most often, the advent of a preventable pressure ulcer is considered as a result of inadequate quality care.  Healthcare facilities that strictly adhere to the pressure ulcer prevention ulcers have demonstrated their capability to reduce facility-acquired pressure ulcers. Additionally, keen adherence to risk assessment procedure and the provision of personalized interventions focusing on nutrition. Pressure redistribution, moisture management, mobility, turning, and repositioning are the backbone of care.

To successfully care and manage wounds, health care professionals in nursing homes and rehab centers need to recognize and implement the best practices aimed at management and healing neuropathic ulcers facility-acquired pressure ulcers, surgical incisions as well as chronic wounds. This means that the admitting nurse should be able to identify the common types of injuries and atypical features to collaborate with other providers to highlight the appropriate treatment guidelines and the necessary interventions without delay.

Attaining successful wound results falls beyond the basics in the prevention of pressure ulcer. Nursing homes admitting patients with skin and wound conditions require an interdisciplinary team approach to manage them, with a clearly outlined plan of care and expectations. As Temkin‐Greener et al. (2012) states, lack of a well prepared internal team in nursing homes maximizes adverse outcomes and might lead to costly errors. Additionally, the physical demands of taking care of this high-risk populace without and with wounds in nursing and rehab centers might result in higher rates of staff injuries.

Nurses and other healthcare professionals, including physician extenders, physicians, medical directors, therapists, and clinicians have a differing degree of education regarding management of wounds. However, too often, nurses avoid practicing wound management probably due to lack of expert training or because wound care has evolved beyond what they learned years ago (Sullivan et al., 2013). Irrespective, nurses are willing to incorporate their work and areas of expertise with healthcare team so as to add substantial improvements in outcomes.

To optimally maximize wound and skin outcomes, nursing care facilities should consider using the advancing technologies, standardized therapeutic surfaces, standardized treatments as well as interventions. However, providing care to institutionalized adults comes with its own challenges. Therefore, these facilities should advance education and access to a certified wound specialist to help in establishing the interdisciplinary team.  Besides, healthcare professionals in these institutions should have access to wound journals, national wound symposiums, wound workshops, online training, and national wound certifications to maximize outcomes.

It is well known that the lives of patients are highly affected by non-healing ulcers wounds. The finances that are also associated with the treatment of these wounds are also huge. Hence, it is important to find out the profits and harms that are associated with the advanced wound therapies in patients with arterial ulcers, venous and other non-healing wounds.  When some of the advanced wound care therapies are used, they have a higher likelihood of improving the extent of the ulcers on the patients. This is in comparison with the other conventional treatments. Hence, the advanced wound care therapies are used; they can improve the condition of the patients. The study is advantageous because it provides a clear conclusion on whether advanced wound therapy is effective to patients or not. With this conclusion, it is easier to find out the various advanced therapies that are most effective and for which patients (Greer et al., 2013).

However, one disadvantage of this study is that it had few trials only and hence it cannot be fully relied on. Additionally, the study focused on those commodities that are consented by the United States Food and drug program.

The methods that have been devised by various health care experts on dressing and treating wounds and the various results of the treatments have been written about in many texts. In one of the researches conducted by several authors, they explored the characteristics of the treatments and the success rate of those treatments in terms of the pain, quality of life, and mortality of the patients ((Valle et al., 2014).  In conclusion, the authors found out that cellular dressing, antimicrobial dressing, and sometimes collage had the ability of improve the lives of the patient. This study is important to my research because it outlines the benefits of advanced treatment options for wound. Moreover, it outlines the various advanced treatment options that have proved to be successful in the past. However, some of the literature the authors used to derive their conclusion is poor and hence this could discredit the results obtained and the conclusion (Valle et al., 2014).

There are huge variations and disagreements on the kind of treatment, care, and other aspects of acute wounds. The disagreements normally come up is areas such as the cleansing of the wound, the dressing, directions given to then patient on how to take care of the wounds, and many others (Ubbink et al., 2015). Hence, the study explored the various options that were best for every situation that was analyzed. It is important to understand the best direction to take when it comes to the care and treatment of acute wounds so that they can heal fast and also prevent them from becoming chronic problems. The study concluded that the reason why there are too many variations and disagreements on the issue is because of the many options that are available to the carers (Ubbink et al., 2015).

This study is important because it gives an explanation on why there are variations in the treatment options available for acute wounds; hence the study is helpful in understanding the acute wounds in a deeper level. The limitation of the study is that it was not possible to consider all the issues that are available in acute wounds and hence a clear comparison was not made between the various options available.

**References**

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