



# Fiona Stanley Hospital (FSH) Burns Management Resources Endorsed for Use in Clinical Practice (EUCP) Policy

## 1. Background

The WA Country Health Service (WACHS) seeks to provide direction and guidance to all staff through the availability of appropriate evidence-based guidelines and procedures. It is envisaged that this information will assist in the efficiency and effectiveness of the organisation in meeting current legislation and the key principles of quality improvement.

## 2. Policy Statement

WA health system policy documents are the overarching policy documents that must be complied with by all WA health system staff. To complement these documents, WACHS has endorsed specific policies, guidelines and procedures covering a range of issues related to clinical practice. WA health system and WACHS policy documents are available via the [HealthPoint Policies](#) intranet site.

In addition, the WACHS endorses a number of relevant evidence-based guidelines and resources from other WA Health Service Providers and organisations external to the WA health system for use in clinical practice.

WACHS endorses the following three (3) **Fiona Stanley Hospital (FSH) Burns Wound Management Resources** as evidence-based recommended practice for use by Medical, Nursing, Midwifery, Mental Health and Allied Health staff:

1. [Coordination of Major Burn Admission with 15% or Greater Total Burn Surface Area Clinical Guideline](#)
2. [Initial Assessment of Minor Burns Guideline](#)
3. [Bitumen Burns Procedure](#)

External sources that are endorsed for use in WACHS clinical practice provide a standard for clinical governance and service delivery and provide a range of information and evidence-based practice to support best practice by all staff for country health patients and clients.

When applied, the information contained in these guidelines must take account of the context and scope of practice, level of service delivery and facility capacity.

These guidelines do not indicate an exclusive course of action or serve as a definitive mode of patient care. Variations that take into account individual circumstances, clinical judgement, scope of professional practice and patient choice, may be appropriate dependent on the health care setting.

While every reasonable effort is made to ensure the accuracy of the information contained in these guidelines, no guarantee can be given that the information is free from error or omission. Users are strongly recommended to confirm by way of

independent sources, that the information contained within these guidelines and procedures is correct, especially drug doses that may change from time of publication.

### 3. Policy Reviewers

The [Coordination of Major Burn Admission with 15% or Greater Total Burn Surface Area Clinical Guideline](#), [Initial Assessment of Burns Injury Nursing Practice Standard](#) and [Bitumen Burns Procedure](#) were reviewed by the following WACHS subject matter experts:

- WACHS Emergency Nursing Advisory Forum
- WACHS Emergency Medicine Leadership Group

### 4. Standards

[National Safety and Quality Health Service Standards](#) – 1.5.2, 1.6.2 and 1.7.1

### 5. Legislation

- [Health Practitioner Regulation National Law Act 2010](#) (WA)
- [Medicine and Poisons Act 2014](#) (WA)
- [Medicine and Poisons Regulations 2016](#) (WA)
- [Occupational Health, Safety and Welfare Act 1984](#) (WA)
- [Carers Recognition Act 2010](#) (Clth)
- [The Children and Community Services Amendment \(Reporting Sexual Abuse of Children\) Act 2008](#) (WA)

### 6. References

1. [FSH Coordination of Major Burn Admission with 15% or Greater Total Burn Surface Area Clinical Guideline](#)
2. [FSH Initial Assessment of Minor Burns Guideline](#)
3. [FSH Bitumen Burns Procedure](#)

### 7. Compliance

Failure to comply with this policy document may constitute a breach of the WA Health system MP0031/16 Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

## 8. Records Management

All WACHS clinical records must be managed in accordance with [Health Record Management Policy](#).

## 9. Related Forms

MR122 [WACHS Wound Assessment and Management Plan](#)  
MR123B [WACHS Comprehensive Skin Assessment](#)  
MR140 [series](#)  
MR144 [WACHS Fluid Balance Work Sheet](#)  
MR144P [WACHS Neonatal / Paediatric Fluid Balance Worksheet](#)  
MR149 [WACHS Neurovascular Observation Chart](#)  
MR179 [WACHS Peripheral Intravenous Cannula Observation Record](#)

## 10. Related Policy Documents

WACHS [Clinical Observations and Assessments Clinical Practice Standard \(physiological, neurovascular, neurological and fluid balance\)](#)  
WACHS [Documentation - WACHS Clinical Practice Standard](#)  
WACHS [Medication Handling and Accountability Policy](#)  
WACHS [Medication Prescribing and Administration Policy](#)  
WACHS [Peripheral Intravenous Cannulae \(PIVC\) Guideline](#)  
WACHS [Recognising and Responding to Acute Deterioration \(RRAD\) Procedure](#)  
WACHS [Wound Management Policy](#)

## 11. Related WA Health System Policies

MP 0122/19 [Clinical Incident Management Policy 2019](#)

## 12. Policy Framework

[Clinical Governance, Safety and Quality](#)

## 13. Variations to the three (3) x Fiona Stanley Hospital (FSH) Burns Wound Management Resources

Nil

## 14. Roles and Responsibilities

**14.1** WACHS Executive Directors of Medical, Nursing and Midwifery Services and Mental Health and the Chief Operating Officer Strategy and Reform are responsible for acting as the principal endorsement authority for external organisations' clinical policy documents.

**14.2** WACHS Area and Regional Medical, Nurse, Mental Health, Aged Care and Population Health Directors are responsible for participating in the review for appropriateness of external organisations' clinical policy and guideline documents for use by clinicians within the WACHS.

**14.3** All WACHS clinicians are accountable for their own practice and are to provide care:

- within their registration status
- in accordance with the codes and guidelines approved by their relevant National Board supported by AHPRA
- within their scope of practice and competence
- within their prescribed responsibilities and duties as defined in their Job Description Form (JDF) and
- within the context of practice that they are operating.

## 15. Evaluation

The number of reportable clinical incidents or near misses relating to inappropriate care provided by clinicians.

## 16. WACHS Learning and Development Clinical Resources

Nil

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