



Public – To be published on the Trust external website

Digital Wound Photography Procedure

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Status: Approved

Document type: Procedure

Overarching Policy: [Tissue Viability Policy](#)

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1 Introduction

Wound assessment is an important process that allows clinicians, patients and carers to monitor wound healing or identify any presence of complications and measure the effectiveness of treatment.

Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust provides care to a diverse range of service users across several specialties and localities, all of whom require varying degrees of need and support. As reiterated by NHS England, 2019 [online], care provision is variable, with some groups of people continuing to experience inequalities. TEWV NHS Foundation Trust is therefore fully committed to ensuring that patients receive care that is individualised, holistic and evidence based, and that fair and equal treatment is offered to all. No one should have a poorer service or a lesser experience because of their differences. It is in keeping with this principle that this procedure has been written.

This procedure reflects the Trust's strategic direction of travel, Our Journey to Change, by supporting its values and goals. Living our values is integral to the care we deliver. We will show respect to patients by actively listening to their concerns and acting upon them. We will ensure we are always compassionate, kind and supportive. We will be open and honest in our conversations, always receptive (listening) to how much information a person may want, and in what kind of format.

This procedure also supports the Trust's strategic goals. It is important that we work closely with the person so that the experience can be as good as it possibly can be, working to ensure the person has as much choice and control as possible. We will work closely with our Trust colleagues, so they feel supported in working with the person.

2 Purpose

Following this procedure will help the Trust to:-

- Ensure appropriate referral to the Tissue Viability Service
- Support wound assessment and management.
- Ensure digital wound photography is undertaken and used with the full and informed consent of any service users.
- Ensure appropriate control of digital wound photographs (i.e. the taking, using, storage and disposal)

3 Who this procedure applies to

This procedure applies to all clinical staff employed by Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) that utilise digital wound photography as part of the referral of patients to the Tissue Viability Service, by following the procedure it ensures treatment is completed with compassion and respect.

4 Related documents

This procedure describes what you need to do to implement the 'policy section' of the Tissue Viability Policy.



The Tissue Viability Policy defines the roles, responsibilities and interventions which you must read, understand and be trained in before carrying out the procedures described in this document.

This procedure also refers to:-

- ✓ Aseptic Non-Touch Technique Procedure
- ✓ Assessment, Prevention and Management of Pressure Ulcers Procedure
- ✓ Consent to Examination or Treatment Policy
- ✓ Email Procedure
- ✓ Information Governance Policy
- ✓ Privacy and Dignity Policy
- ✓ Sharing Information and Confidentiality Policy
- ✓ Skin Tear Prevention and Management Procedure
- ✓ Standard Infection Prevention and Control Precautions Procedure
- ✓ Tissue Viability Policy
- ✓ Use of Visual and Audio Recordings in Clinical Procedures Procedure

5 Digital Wound Photography

Wound assessment is an important process that allows clinicians, patients and carers to monitor wound healing or identify any presence of complications and measure the effectiveness of treatment.

Digital wound photography in wound management provides visual confirmation to the written record. Digital photography can also provide a timeline for wound progression over a period of time (Estocado and Black 2019).

Digital wound photography of wounds is useful for the Tissue Viability Team when they cannot assess the patient's wounds immediately due to the locality of the patient and allows for interim advice to be given before full assessment can be undertaken.

Patients identified with wounds will have an initial and on-going assessment of their wound.

- Minor wounds and grazes do not necessarily need digital wound photography unless requested by the Tissue Viability Nurse.
- All pressure ulcers of category 2, 3, 4 and category 3-unclassified should, where possible, be photographed.
- Digital wound photographs should be taken upon the initial assessment or as soon as possible.
- Digital wound photographs of the wound should only be repeated on the advice of the Tissue Viability Nurse or if required as evidence as part of a safeguarding referral.

5.1 Risk management

Clinical staff that utilise digital wound photography should do so using Trust equipment only. This does include Trust mobile phones (as they are encrypted) but not the use of personal mobile phones under any circumstances. Precautions should be undertaken to reduce the risk of cross infection caused by the use of digital wound photography devices across care settings using detergent wipes to clean equipment after each use.

The patient's confidentiality should not be compromised, and the identity of the patient should be protected at all times.

Digital wound photographs will be uploaded to a secure email and saved in a secure file where they can only be accessed by the Tissue Viability Team.

The purpose and possible future use of digital wound photography must be explained clearly to the patient before consent is obtained for the digital wound photograph. If the digital wound photograph is to be used for education/ training or research, then it must be clearly explained to patients that the digital wound photograph will be anonymised and that they can refuse without any care being compromised.

5.2 Consent

The healthcare professional is responsible for ensuring that the patient has given informed consent before any digital wound photography takes place. This consent should be documented in the patient's electronic care record. Where the patient cannot give consent, the Trust Consent to Examination or Treatment Policy should be followed. In the event that no informed consent can be obtained then digital wound photography should not be carried out.

5.3 Taking digital wound photographs

Digital wound photography should only be taken on Trust equipment, e.g. Trust mobile phone or Trust standardised equipment.

The healthcare professional should:

- Obtain patient consent before taking the digital wound photograph and record this in the patient's electronic care record.
- If a Trust camera is to be used, set to record time and date.
- Protect the patient's identity by ensuring that faces and any other obvious features are obscured.
- Protect the patient's dignity and modesty by ensuring minimum skin is exposed. Genitalia will be covered to preserve dignity. If tissue damage is around the genitalia and safeguarding is a concern, clinical judgment should be used.
- The wound and surrounding skin should be cleansed if required prior to digital wound photography.
- A visual measurement of scale, if able, should be used e.g. A paper sterile ruler supplied in some dressing packs.
- The clinician should ensure that Personal Protective Equipment (PPE) should be utilised at all times during digital wound photography and the Aseptic Technique Procedure is followed.

- Acknowledge the patient's personal preferences and wishes. Wherever possible these preferences need to be taken into account to promote collaborative decision making, privacy and dignity i.e. gender of staff member taking photo.
- Obtain, if required, further information from the Consent to Examination or Treatment Policy and also, the Privacy and Dignity Policy- both of which are available via the Trust intranet.

5.4 Emailing and storage of digital wound photographs

- Once the digital wound photograph has been taken, download the photograph at the earliest opportunity and email directly to the Tissue Viability Team: tewv.tissueviability@nhs.net
- Digital wound photographs should be deleted from the Trust equipment as soon as possible after the digital wound photograph has been emailed to the Tissue Viability Team
- Digital wound photographs must not be stored on laptops or computers.
- All staff are responsible for ensuring that no images are 'shared' or uploaded to any external site and should only be used for the purposes stated within this procedure

6 Definitions

Term	Definition
TEWV	<ul style="list-style-type: none"> • Tees, Esk and Wear Valleys Trust

7 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.
- There are no risks to the trust values as a result of implementing this procedure.

7.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
No training needs identified			

8 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Tissue Viability Ad Hoc Review and Spot Checks	Tissue Viability Team	Physical Health Group

9 References

Estacado, N and Black, J (2019) Ten top tips: wound photo documentation. Wounds International, 10(3), pp. 8-12.

NHS England (2019) The NHS Long Term Plan (LTP) [online] <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/08/nhs-long-term-plan-version-1.2.pdf> [Accessed 16th January 2023]

10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	07 February 2024
Next review date	07 February 2027
This document replaces	CLIN-0072-001-v2 Digital Wound Photography Procedure
This document was approved by	The Fundamental Standards of Holistic Care Clinical Advisory Group
This document was approved	07 February 2024
This document was ratified by	n/a
This document was ratified	n/a
An equality analysis was completed on this policy on	16 January 2024
Document type	Public
FOI Clause (Private documents only)	N/A

Change record

Version	Date	Amendment details	Status
1	30 Aug 2017	New Document	Withdrawn
2	06 Jan 2021	Full review of Procedure undertaken. Updates and references added	Withdrawn
3	07 Feb 2024	Full review of Procedure undertaken. Update of references, 'who this procedure applies to' section and 'related documents' section.	Published
3	03 Apr 2024	Minor correction to approval group name made. No approval required	Published

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Nursing and Governance/ Tissue Viability Service
Title	Digital Wound Photography Procedure
Type	Procedure/guidance
Geographical area covered	Trust-wide
Aims and objectives	To ensure appropriate referral to the Tissue Viability Service, support wound assessment and manage and standardise digital wound photography.
Start date of Equality Analysis Screening	16 January 2024
End date of Equality Analysis Screening	16 January 2024

Section 2	Impacts
<p>Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?</p>	<p>Trust staff and patients</p>
<p>Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?</p>	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
<p>Describe any negative impacts / Human Rights Implications</p>	<p>This procedure will not negatively impact upon any of the protected characteristic groups.</p>
<p>Describe any positive impacts / Human Rights Implications</p>	

Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	See appendix 9 for references used within document
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	This procedure has been discussed with the Physical Health Group who support patients from a range of protected characteristics on a daily basis.
If you answered No above, describe future plans that you may have to engage and involve people from different groups	N/A

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	Procedure
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and users?	Yes	This procedure has been discussed with the Physical Health Group who support patients from a range of protected characteristics on a daily basis.
Have any related documents or documents that are impacted by this change been identified and updated?	N/A	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		

Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	
Are supporting documents referenced?	Yes	
6. Training		
Have training needs been considered?	Yes	
Are training needs included in the document?	N/A	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9. Approval		
Does the document identify which committee/group will approve it?	Yes	The Fundamental Standards of Holistic Care Clinical Advisory Group (nb ToR approved)
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	Yes	Public
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	

Do all pictures and tables have meaningful alternative text?	N/A	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Yes	