

# Our vision for the National Wound Care Strategy Programme



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## Box 1. How to join the Stakeholder Council

The Stakeholder Council currently consists of a healthcare professionals forum, a patients and carers forum and an industry forum. Anyone with an interest can sign up to the Stakeholder Council by emailing:

Stakeholdercouncilproject@dh.gsi.gov.uk.

Please put 'National Wound Care Strategy Programme' in the subject heading and give some detail in the body of the email about your wound care interests.

Chronic wound care is a large burden for healthcare providers and the patients and carers who live with wounds that are slow to heal or fail to heal (Guest et al, 2015). Chronic wounds are primarily associated with ageing but also with obesity, diabetes and cardiovascular disease, all of which are rapidly increasing in prevalence. So, as more people live longer and the incidence of those aforementioned diseases increases, the burden of wounds is likely to increase. NHS costs are predicted to reach £15bn per annum by 2023 (Guest et al, 2017).

UK wound care currently shows marked unwarranted variation with underuse of evidence-based interventions and overuse of ineffective interventions (Gray et al, 2018). People are living with wounds for much longer than they should, and their care is costing the NHS much more as a result. We know from research and audit evidence that care that is organised and research-informed achieves improved healing rates, better patient experiences and greater cost-effectiveness.

Until recently, chronic wound care has not been deemed a national priority in England but the publication of the 'Burden of Wounds' study (Guest et al, 2015) shone a light on the problem. In 2016, the Leading Change, Adding Value framework established a set of workstreams. These led to recommendations for wound assessment, the introduction of a CQUIN, a set of competencies for wound care, and some guidance for commissioning wound care services. NHS Business Services Authority have started work to better understand wound prescribing data and NHS Supply Chain are developing better approaches for the supply and distribution of wound care products to the NHS. Alongside this, initiatives such as the Stop the Pressure (<http://nhs.stopthepressure.co.uk>), React To Red (<http://www.reactoredskin.co.uk>), and Legs Matter! (<https://legsmatter.org>) have focused attention on particular areas of wound care.

NHS England's National Wound Care Strategy Programme has been commissioned to unite these initiatives to promote collaboration, minimise duplication and achieve a much needed focus to

drive forward improvements in wound care. The vision of the National Wound Care Strategy team is to achieve "An English NHS co-produced wound management health and care system which provides excellence in the standards of care for the assessment, prevention, optimised healing, and provision of wound care services for patients and carers." It aims to achieve this through developing pathways of care for priority clinical issues, improving the supply and distribution of wound care products, developing appropriate education for all involved in wound care and developing robust national data information sets to measure performance.

The National Wound Care Strategy Programme consists of three clinical workstreams and four enabler workstreams. The clinical workstreams focus on the three most common forms of chronic wounds: pressure ulcers (7%), acute wounds (such as burns, abscesses, surgical and wounds due to trauma), (29%) and wounds on the lower limb (42%) (Guest et al, 2015). The enabler workstreams are there to support the work of the clinical workstreams but also to achieve objectives that will improve monitoring of wound care (Data and Information workstream) the supply of products necessary for high-quality care (Supply and Distribution workstream) and to plan how meet the educational and workforce needs of healthcare professionals, patients and carers (Education and Workforce workstream). Researchers will be embedded within their relevant workstream group to promote 'research-think' and evidence-informed practice.

In addition, a Stakeholder Council has been established to promote consultation between the workstreams and the stakeholders, who will be affected by our recommendations. The Stakeholder Council will promote the flow of information into and from the workstreams and back to stakeholders. The ambition of this project is considerable, but the wound care community is embracing the challenge with enthusiasm. Achieving the vision will take time, planning and energy but this is an opportunity that we must seize and make the most of!

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Guest JF, Vowden K, Vowden P (2017) The health economic burden that acute and chronic wounds impose on an average clinical commissioning group/health board in the UK. *J Wound Care* 26(6):292–303

Gray TA, Rhodes S, Atkinson RA et al (2018) Opportunities for better value wound care: a multiservice, cross-sectional survey of complex wounds and their care in a UK community population *BMJ Open* 8:e019440