

Pan-European exchanges: working together and learning from one another



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Welcome to this special issue of *Wounds UK*, which coincides with this year's EWMA conference. The focus of the conference is "*Change, Opportunities And Challenges — Wound Management In Changing Healthcare Systems*", a hot topic in the UK and extremely relevant to the ongoing changes in our healthcare system. Even the UK media seem set on reporting about missed targets for Emergency Departments, people having to wait weeks to have an appointment with their General Practitioners, long waiting lists for elective operations, and a disconnect between health and social care. I am sure that these concerns are not limited to the UK and it will be interesting to hear how international colleagues are managing these challenges.

DON'T BUY CHEAP, BE SMART

Personally, I am particularly excited to be able to attend sessions that investigate quality of life and cost-effectiveness. Are these two terms synonymous? In the UK, we are aware of the constant need to maintain and improve health-related quality of life outcomes; indeed, clinicians are measured against a range of quality indicators, including the Commissioning for Quality and Innovation (CQUINs) payments framework. Has being made responsible for these targets increased quality of life for patients? We would hope so, as we have seen a reduction in hospital-acquired pressure ulceration and wrong site surgery to name but two. It is essential we remember that cost-effectiveness does not equate to using the 'cheapest' product or service, but that it is explored using health economics which takes into account staff time, number of hospital appointments and the length of time a wound dressing can be left in place for, amongst other factors. Therefore, the importance of interdisciplinary collaboration cannot be emphasised enough. We must ensure that all healthcare professionals, nurses, medical staff, procurement, management teams, academics, as well as patient groups and industry

work in partnership to ensure that the end user — the patient — is not adversely affected by any guidelines we develop and implement.

SKIN TEARS — NOT SUCH A MINOR ISSUE

The other session I will be pleased to see is 'Chronic Wounds in the Fragile Ageing Patient', which is being delivered with the International Skin Tear Advisory Panel (ISTAP). Skin tears as a wound are often overlooked, as they are seen as only a minor injury. Skin tears have attracted little research, yet as the global population continues to age, we can assume that the prevalence of skin tears will increase. LeBlanc et al (2011) argued that skin tears may be more prevalent than pressure ulcers, yet there is little literature that guides prevention, assessment and management. I question why have we overlooked these injuries? As such, ISTAP has developed and published a skin tear resource kit that can assist and guide clinicians, promoting the importance of education, prevention, assessment and management of these injuries. Additionally, ISTAP have produced a skin tear decision algorithm with clear goals of treatment and a classification system. If you are unaware of these resources, I urge you to visit the ISTAP website (www.skintears.org) and use these tools in clinical practice. If you are attending EWMA, then why not attend the joint sessions and become involved in skin tear management?

GO NETWORK

Conferences provide an excellent venue not only for developing knowledge but also networking with other clinicians from a range of healthcare areas. If you are attending, come and visit our stall (3B18), take the opportunity to chat to people you would not normally meet in the UK, introduce yourself to speakers following sessions or speak to other delegates who are visiting the industry exhibition. Learning how other healthcare areas approach issues concerning scarcity of

REFERENCES

- LeBlanc KI, Baranoski S; Skin Tear Consensus Panel Members (2011) *Skin tears: state of the science: consensus statements for the prevention, prediction, assessment, and treatment of skin tears*. *Adv Skin Wound Care*. 24(9 Suppl):2–15

... and for those staying at home: developments in the UK

resources, improving quality of life outcomes, or maintaining safety in clinical areas may be transferable to your own clinical area. Most importantly, enjoy the conference and reflect on what you learn, ready to share with your colleagues when you return home.

WHAT'S HAPPENING IN THE UK

For those of you who can't make it to EWMA, it feels like there is a huge amount happening in the UK. The first version of the Wound Assessment Standard from NHS England has now been published and is in circulation in time for activity around the Wound Assessment CQUIN (Available at: <https://www.england.nhs.uk/wp-content/uploads/2016/11/cquin-2017-19-guidance.pdf>). The NHS Improvement work on 'Stop the Pressure' is gaining momentum — and we hope to be holding consensus meeting on definitions and measurements in Birmingham on 16th May — so if you can, please do come along. We have also seen the first reports from the Clinical Evaluation Team on films and film island dressings, and gelling fibres (Available at: <http://www.nhsbsa.nhs.uk/CommercialServices/5651.aspx>).

There is still a lot to be done; in addition to the work around wound assessment, NHS England is focusing on managing the lower limb — I was fortunate to attend a Phlebology conference in London earlier in the year that made me realise how little I know about the surgical management of venous disease and how much benefit it offers to patients. Picking up Karen's theme on cost-effectiveness, although the cases presented were from a private centre, the cost savings achieved were astonishing. This in addition to obvious benefits for patients and lower recurrence rates because of corrective surgery. So why is this type of surgery not routinely available to NHS patients? Whilst it may seem expensive, if it allows patients to quickly heal and reduces recurrence, there must be significant cost savings.

It is perhaps timely to also remember our

charity of the year, the Katie Piper Foundation, (Available at: <https://katiepiperfoundation.org.uk/>). Some of you may have seen the TV programme showing the amazing work they do to promote wellbeing and improvement in quality of life for burn patients. However, the prevention and management of scar remains an under-researched and under-discussed topic, so perhaps you could add it to the agenda for your next local educational event.

Also under-discussed is seating. I recently carried out a literature search on the subject and unless you are interested in patients in wheelchairs, or with specific diseases such as SCI (Spinal Cord Injury), there is an absolute paucity of information. I'm looking forward to seeing the new guidance that is due out this summer, which will hopefully address general seating in acute and community care — this is a daily challenge for many and despite all the research and clinical evaluations carried out on mattresses, there is so little on the chair when the patient is at much higher risk of damage.

It would be great to see some support for the less common subjects; leg ulcers are making a stellar appearance, let's raise awareness about skin tears, fungating wounds, scars and perhaps raise the profile of the less common pressure ulcers on the ischia — related to poor seating or positioning and those under devices. And a quick reminder, as it's almost summer, please make sure you take care of your own and your patients' skin.

WOUNDS UK SUMMER CONFERENCE

If you are unable to make it to this year's EWMA, you may be able to come and see us at our Wounds UK Summer Conference in Birmingham on 5th and 6th July (Available at: <http://www.wounds-uk.com/events.php?eventid=109>).

In the meantime, why not get in touch with us if you would like to write for the journal or present at one of our events. We look forward to hearing from you.



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