## Meeting reports

#### **Wounds UK Scottish Conference**

This year's Scottish Conference held at the Thistle Hotel, Glasgow on the 6th September had an excellent attendance of almost 300 delegates and 100 industry staff. The delegates represented community, hospital and care home staff, as well as a number of students. Interestingly, there were a number of podiatrists, pharmacists and researchers from local universities.

The focus of the day was on best practice. Pam Cooper chaired the conference and John Timmons began the day looking at methods of debridement. This was followed by Fiona Russell of Aberdeen Royal Infirmary who described the formation of granulation tissue in wound healing and ways in which this tissue can be protected from damage. Paul Chadwick, Principal Podiatrist from Salford, examined the treatment of patients with diabetic foot ulceration, and was followed by Trudie Young, who analysed the care of surgical and traumatic wounds. The afternoon session was headed by Pauline Beldon from Epsom and St Helier NHS Trust who discussed the management of pressure ulcers, followed by Janice Bianchi from Glasgow Caledonian University, who presented case reports in her discussion of lower limb ulceration and management.

Wounds UK would like to thank all the delegates for their support for what was an excellent educational event, as well as all the companies who attended.

### The Scottish Care Home Support System launch

The Care Home Support System (CHSS) is an initiative from Wounds UK in association with ConvaTec Ltd to provide a tissue viability specialist support service to the care home market for a low cost annual fee. The package supplies a range of educational clinical and managerial materials to subscribers.

The launch coincided with the 8th Wounds UK Scottish Conference. The event was over-subscribed and attended by home managers, deputy managers, charge nurses, sisters, matrons, staff nurses and enrolled nurses.

David Gray, Tissue Viability Nurse Specialist set the scene by looking at the current varied and often inadequate levels of support provided by NHS organisations to vulnerable clients in the adult elderly care home sector and considered new ways of working in the future.

Next, Tissue Viability Advisor to the Care Commission, Joyce O'Hare, spoke on the issues of law and regulations and the guidance document *National Care Standards Care Homes for Older People 2005*. She made clear the connections between these documents and how Care Commission inspectors would use the relevant statements in their assessment of care homes' fitness to practice.

Andrew Kingsley, who has been leading the development of the CHSS package for Wounds UK, took a look at some of the reasons to get up to date on pressure ulcer prevention, skin and wound care. He added that together with the need to meet inspectorial requirements, the process of the registration of social care workers was underway by the Scottish Social Services Council (SSSC), for which there are parallel bodies throughout the UK.

Registration is soon to begin for care assistants and there are educational thresholds mapped out for entry. In the immediate future these are not mandatory for first registration, although there are requirements for achievement of this threshold plus post-registration training and learning to be completed by re-registration point. The SSSC also have codes of practice for employers and employees, clearly laying down responsibilities.

Employers are responsible for making sure that they meet the standards set out in the code and provide high quality services which will promote public trust and confidence in social services. To meet their responsibilities in relation to regulating the workforce, social service employers must make sure people are suitable to enter the workforce and understand their roles and responsibilities, and provide training and development opportunities to enable social service workers to strengthen and develop their skills and knowledge. For their part, social service workers must be accountable for the quality of their work and take responsibility for maintaining and improving their knowledge and skills. On top of that, clients are becoming more dependent, while hospitals are keen on discharging patients with still complex wounds. With all those needs laid out, the CHSS package was described (see pp 95–99) and shown how it could help meet the needs of care home owners, managers and staff.

### Current affairs in wound healing

This autumn, Biofisica held three meetings in Bristol, London and Manchester to discuss the role of POSiFECT® electrical stimulation (estim) therapy in wound healing entitled 'Current affairs in wound healing'. Over the three days, more than 30 nurses and wound care specialists attended these symposia which were set up to provide the clinician with in-depth knowledge of e-stim and POSiFECT therapy.

Chronic wounds are often indolent, non-healing or slow to heal due to a number of factors which impact on the wound healing process. Scientific investigation of wounds which heal normally, detect low voltage current as a result of healing activity within the wound. Given that a number of chemical messengers are used to guide the process of healing, the result is that the ions involved create an electrical charge or current, this is known as the

# Meeting reports

'current of injury'. Scientists have also discovered that chronic wounds no longer have this detectable current and, therefore, potentially have reduced healing capacity as a result. By applying low level currents to wounds, the normal wound healing process can be triggered and healing can 'restart'. POSiFECT therapy is in the form of a wound dressing which creates this low level current using a small battery pack.

John Timmons opened the sessions by discussing the problematic nature of chronic wounds and their treatment. In many cases, due to the complex nature of the patient and their concurrent illnesses, wound healing has either stopped or is extremely slow. For many of these patients, reduced quality of life is a major issue while they have an open wound.

The key to appropriate treatment is in accurate assessment and, as with many patients with chronic wounds, the multi-professional team has to be utilised. Chronic wounds often need a 'trigger' to stimulate healing; in some cases this may be antimicrobial products which reduce the bacterial burden. Wound pH can also be an issue. If there is a loss or reduction in the current of injury, POSiFECT therapy can be started to re-establish this and stimulate healing.

Martyn Butcher of Biofisica discussed the science behind e-stim and highlighted its concept across the healthcare field, such as in pain relief. There have been a number of developments over the years which utilise e-stim in patient treatment, however, these have not previously been utilised in wound care. By applying this theory to wound care, laboratory work and in vivo trials have shown that wounds respond to the stimulus. The Outcome Assessment Programme (OAP) has now been completed in the UK, recruiting over 120 patients in numerous sites.

With each site working to the same strict protocol, images and pain data have been recorded at regular intervals throughout the study and the results are overwhelmingly positive.

Jacquie Griffin, a tissue viability nurse specialist from Central Wales, rounded off the days by discussing a number of cases which were included in the trial. These patients showed marked reductions in the size of their wounds and also demonstrated reduction in patient pain scores during the study. Jacquie summarised the events by examining the potential economic benefits of using this therapy, in particular when dealing with nonhealing wounds, and the improvement of quality of life for patients.

Biofisica will be hosting a symposium at Wounds UK in Harrogate this November. For further information please see the Wounds UK and Biofisica websites.

#### Activa Chronic Oedema Roadshows

Earlier this year, Activa Healthcare and Wounds UK hosted six Chronic Oedema roadshows around key sites in the UK. Over 800 people attended these study days and showed tremendous enthusiasm for this hugely important patient issue.

Professor Christine Moffatt CBE opened each event and set the scene by highlighting the physical and social impact of chronic oedema on patients and their families. For many of these patients there may not be access to specialist services.

There is a growing number of patients with other illnesses who are entering the healthcare system, who have chronic oedema which may be undiagnosed. Without recognition of their symptoms and proper assessment, treatment cannot be implemented. Of overwhelming concern is the impact of chronic oedema on the quality of life of the

patients, such as enforced immobility and economic issues for those in employment.

Accurate assessment and diagnosis were discussed by key members of the British Lymphology Society (BLS), including Rebecca Billingham and Justine Whittaker. Identification of the cause of the oedema is important and will have implications for treatment and management of patients. This presentation stressed the importance of assessment, which should always include a detailed history and a full assessment of the affected limb(s), as well as other body sites.

Anne Clements, an independent lymphoedema specialist, examined the care of patients with chronic oedema in the community by using a case study approach. Again Anne stressed the need to individualise patient treatment and give full information to patients and carers.

Janice Bianchi analysed the role of vascular assessment in caring for patients with chronic swollen limbs and discussed the use of Doppler assessment and the new approach to vascular assessment using pulse oximetry.

Jackie Stephen-Haynes and Andrew Kingsley tackled the issue of skin care for this patient group and highlighted the importance of good skin care regimes to prevent further damage and to reduce the impact of untreated chronic oedema on the skin.

Kimby Osborne from Activa Healthcare carried out a practical demonstration of full leg bandaging for patients with chronic oedema.

The popularity of these events highlighted the need for more education on this topic and Activa are currently running more roadshows this year. See opposite for details of these events.

## Meeting reports

### The Lindsay Leg Club Foundation Dinner and Leg Club Conference 2007

The Lindsay Leg Club Foundation held their annual dinner and conference on the 19th and 20th September 2007 at the home of Walsall Football Club. The masked theme proved to be a popular addition for the evening which 'broke the ice' and set the tone.

Alongside the Caribbean themed entertainment, including the outstanding Dr J as Barry White, we were treated to an highly entertaining after dinner speech from Wounds UK's Business Director Edward Rusling which ended with a highly entertaining ode entitled 'The lady from Oz'. The evening culminated in an auction for some unique and unusual items, bringing out the competitive spirit in some. The photos and poem from the evening will be available on the Leg Club website shortly.

The Leg Club conference held on the following day in educational partnership with the Wound Care Society (WCS) entitled 'Expanding our Horizons — Leg Care in the 21st Century' provided an opportunity to learn from our outstanding speakers who covered a variety lof topical issues.

The day started with a presentation on 'chronic oedema and lymphoedema' by Rebecca Billingham and a presentation by Keith Cutting on 'exudate and wound management'. Following coffee and an opportunity to visit the many exhibition stands provided by our colleagues from the healthcare industry, Andrew Kingsley presented a thought-provoking session on 'infection control in a social environment'. This was followed by Pam Kirby discussing the potential benefits of 'vascular pathways'.

During the afternoon, delegates had the opportunity to attend three workshops examining 'Compression Therapy' (Dr Hildegard Charles), 'Dressing Selection and Skin Management' (Jackie Stephen-Haynes) and 'Designing a Clinical Pathway' (Pam Kirby).

Feedback from both events has been overwhelmingly positive and we express our gratitude to all who supported and attended both the dinner and conference. Appreciation also goes to our industry partners for their sponsorship and attendance. We would also like to take this opportunity to thank Lynn Bullock, David Brailsford and Ellie Lindsay for organising such an enjoyable and educational event.

For further information on this and future events please visit our website: www.legclub.org.  $\mathbf{w}_{\text{UK}}$ 

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Heelift® Original and Smooth Patent No. 5449339 Additional patents pending