

'It is important that we share our experiences so that we can discuss what we have learnt and how the quality of life for patients has been improved'

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LOOKING FORWARD TO HARROGATE, 2012

ovember may sound a long way off to most people but time will soon pass and the annual Wounds UK Harrogate event will be upon us (12–14, November). We are busy planning the programme, which this year will focus on 'Sharing best practice' across the four nations of the UK.

The call for papers has now gone out (www. wounds-uk.com) and we encourage you to submit a paper for consideration, either as a free paper or poster. We want you to share your best practice, experiences of using new products, innovations, research, case studies, patient experiences, or anything else that you think colleagues will be interested in.

It is important that as clinicians, we share our experiences so that we can discuss what we have learnt, how the change has affected clinical practice, and how quality of life for patients has been improved. Regional groups across the UK are all developing guidance and best practice statements and are actively involved in audit/research/evaluation — Harrogate offers the opportunity to share these developments with others.

Through sharing best practice we can continue to develop tissue viability as a forward-thinking specialty, which embraces change and incorporates evidence to promote the wellbeing of patients. As usual, the Harrogate conference will be supported by our industry partners who provide the opportunity for us to see new products, discuss established technology, and learn about the research that supports their work. Importantly, visiting the exhibition allows us to discuss the realities of clinical practice and how industry can support us with products that meet the ever-changing needs of the patient with skin integrity issues.

The importance of working with business has government backing in *Innovation*, *Health and Wealth* (Department of Health [DoH], 2011), a publication that

recognises the importance of working closely with industry to promote, develop and implement a quality healthcare service to all users. It identifies that the challenge for the NHS and industry is to pursue innovations that genuinely add value — but not cost — to health care. The authors go on to explain that innovation is a process of development, implementation and the dissemination of ideas into widespread use through three key stages:

- Invention: originating ideas for new services or products, or new ways of providing a service
- Adoption: putting any new idea, product or service into practice, including prototyping, piloting, testing and evaluating its safety and effectiveness
- Diffusion: the systematic uptake of the idea, service or product into widespread use across the whole service (DoH, 2011).

The NHS and industry can complement each other — the NHS through its productivity and quality, and industry through its competitiveness. A successful collaboration will add value to services and reduce costs.

Harrogate provides the ideal arena for clinicians, academics, scientists, researchers, and industry colleagues to learn about developments across the UK as well as networking in an environment that provides the latest tissue viability education and research.

Finally, despite all the current changes, it is worth repeating that the purpose of the NHS, and everyone working within it, is to provide high quality health care, free at the point of delivery to everyone who needs it.

DoH (2011) Innovation, Health and Wealth. Available at: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131784.pdf (accessed 1 June, 2012)