



# Do You Hate Policy? If So, Come To The Policy Café

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*“Do you hate policy?”* That was my question... followed by, *“If so, then come to the Policy Café”*.

This was my approach to encourage participation at the Policy Café at the 2024 *Wounds Canada National Hybrid Conference* held in October in Toronto.

It was a hard sell, especially with the dazzling competition of the sponsors surrounding us in the bustling Exhibit Hall, but we managed to attract enough interested participants to fill the deliberately limited number of spots in four separate Policy Café sessions held over three days. As a result a diverse range of policies from across Canada were presented and enthusiastically discussed within the individual sessions.

According to the World Health Organization, health-care policy involves ‘decisions and actions’ in order to achieve health-care goals. Now in its second year, the Policy Café provides a forum for sharing experiences of stakeholders across jurisdictions, with the purpose of supporting and driving meaningful policy changes which prioritize skin health and

improve outcomes for people who require wound management.

## Café Session 1

**Holly Calliou**, the first presenter, is a Home Care Coordinator at Enoch Health Services, Enoch Cree Nation, Alberta. Holly has identified the need to align practice within the different sectors that serve Enoch Health Services. Home Care Nurses, Public Health Nurses and a Diabetes Coordinator, all have responsibility to provide wound care but the lack of alignment of charting.

Home Care has access to electronic charting, while Public Health does not, which can result in very different treatment plans for the client. The goal of developing a policy is to ensure continuity of care when working with wounds. Issues to address were identified as including facilitating workable charting, capturing images in the same way and working with the generic policies provided by Indigenous Services Canada. In order to develop policies,

Holly has facilitated nursing staff from each of the sectors to create a Policy Statement, Policy Rationale and Expected Outcome. Work is still in progress on Process Guidelines and Tools and Resources, with testing of the policy by end of 2025 and implementation by the beginning of the 2026 fiscal year.

## Café Session 2

**Tara Schmitz Forsyth**, the second presenter is a Clinical Nurse Specialist, and Advanced Wound Care Clinician who divides her time between a facility with a very diverse client population including rehabilitation, long term care and palliative care, and a complex wound care clinic at a tertiary hospital in Winnipeg, Manitoba. Tara outlined the content of the 2025 Skin Health and Wound Care Policy which was developed for the two health-care jurisdictions in Winnipeg. This replaces the previous two iterations of the policy, which was first written in 2014. The updated 2025 policy now includes the roles and responsibilities of health-care aides and rehabilitation assistants. The policy outlines the roles, responsibilities and practices related to staff who have some or all aspects of wound prevention, assessment and treatment with their role, scope and setting.



Holly Calliou (centre), a Home Care Coordinator at Enoch Health Services, Enoch Cree Nation, Alberta led the first Policy Café session.

Educational requirements are defined for staff, however there is a challenge in translating knowledge into practice. While the policy provides guidance on the development of 'wound care champions', in reality, this is difficult to achieve. The feedback is that staff are now more aware of their scope and the hope is that by improving education and defining the need for a wound care plan rather than a physician order, clients will receive timely intervention for the prevention, assessment and treatment of wounds.

## Café Session 3

The third presenter, **Dr. Helen Rees**, is a podiatrist who practices in New Brunswick and is the Past President of the Canadian Federation of Podiatrist Medicine. Helen spoke about licensing and scope of practice for podiatrists in Canada. At present, podiatrists are unable to conduct surgeries, except for soft tissue, and none that include bone. The hope is that policies will change across the country so that podiatrists become licensed through the various Colleges of Physicians and Surgeons at the provincial/territorial level.

This current limitation of scope is detrimental to the goal of limb salvage for people with diabetes whose immediate needs are not addressed in a timely fashion, often resulting in limb loss. Discussion after Helen's presentation included concern about the lack of action on the recommendations at a provincial and federal level following the 2024 CIHI Report,<sup>1</sup> and the need for health-care professionals to work within their full scope, which would include training in advanced wound care skills, such as conservative sharp wound debridement. The lack of consistent policy related to wound prevention and wound treatment is a limiting factor, related to scope enhancement and, ultimately, 'gold standard' management of diabetic foot ulcers.

## Café Session 4

Our fourth Policy Cafe topic was presented by **Dr. Kathleen Stevens**, Executive Board Member of the Canadian Association of Foot Care Nurses/ Association Canadienne des Infirmières et Infirmiers en Soins de Pieds (CAFCN/ACIISP). Kathleen is a Professor of Nursing at Memorial University, St. John's Newfoundland and Labrador. Kathleen's topic was: Towards Canadian Nurses Association (CNA) Certification in Advanced Foot Care Nursing: Advocating for excellence in advanced foot care nursing (AFCN) across Canada.

The problem which the CAFCN/ACIISP has tackled is the lack of standardization for certification of advanced foot care nurses (AFCNs), which has implications for patient safety, as it is difficult to identify a qualified AFCN. The objective was to support certification development, implementation, coordination and evaluation of programs for AFCNs. To create this process, policy advocacy skills were demonstrated by both CAFCN/ACIISP and CNA. CAFCN/ACIISP developed a Competency Framework through member survey, input, presentation and revisions.

From the CNA policy perspective, collaboration and communication with the CAFCN/ACIISP ensured alignment of the code of ethics and standards of practice for all regulatory designation of nurses, and the standards of practice required by the provincial and territorial regulatory bodies. The outcome of this policy advocacy is that a CNA Portfolio Certification for Advanced Foot Care Nurses will be launched in early 2026.

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1. Canadian Institute for Health Information. CIHI's Annual Report, 2024–2025.

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