

Foundations of Best Practice for Skin and Wound Management

Introduction

Best Practice Recommendations Update 2017

It didn't take a village, it took a country, to create and keep up-to-date the Canadian Association of Wound Care's (Wounds Canada) best practice recommendation (BPR) articles, beginning in 2000. Seventeen years later, a total of 71 expert authors and various production teams have been involved in the development and updating of these seminal documents.

The authors approached the content and process with new eyes—eyes that see the patient, not the wound, as the centre of the care process. This shift ensures that clinicians acknowledge and act on the full range of risks and risk-specific interventions required to support positive patient outcomes. A stronger focus on self-management and sustainability acknowledges the role the patient plays in the prevention, healing or palliation process when not under direct care.

This new approach is represented by the Wound Prevention and Management Cycle. The cycle is intended to illustrate an easy-to-understand process that can be used by care teams in all settings for all types of patients with wounds or at risk for developing wounds, regardless of the environment and health-care system in which teams live and work.

The Documents

The revised articles published on this site form part of Foundations of Best Practice for Skin and Wound Management. Additional wound-specific articles will be added over time.

Volume One: Foundations of Best Practice for Skin and Wound Management

- Introduction
- Chapter 1: Skin: Anatomy, Physiology and Wound Healing

- Chapter 2: Best Practice Recommendations for the Prevention and Management of Wounds
- Chapter 3: Best Practice Recommendations for the Prevention and Management of Pressure Injuries
- Chapter 4: Best Practice Recommendations for the Prevention and Management of Surgical Wound Complications
- Chapter 5: Best Practice Recommendations for the Prevention and Management of Skin Tears
- Chapter 6: Best Practice Recommendations for the Prevention and Management of Diabetic Foot Ulcers

Getting the Most from the Resources

The first chapter addresses the anatomy and physiology of skin and how they affect and are affected by wounds and wound healing. The second chapter addresses an overall approach to the prevention and management of wounds that revolves around the five steps presented in the Wound Prevention and Management Cycle. For the best possible understanding, these two chapters should be read prior to the chapters that address specific the wound types.

The Method

Select authors from previous papers were asked to create and lead interprofessional and inter-regional teams of experts from across Canada. They had a threefold task:

1. Update the existing articles with recommendations based on new research, information or protocols identified in national and international guidelines, consensus documents and publications.
2. Arrange the recommendations into the new five-step format of the Wound Prevention and Management Cycle.
3. Gain consensus on the changes using a modified Delphi method.

Once each BPR was completed a rigorous review process was implemented involving the *Wound Care Canada* Editorial Advisory Board, the authors from the other newly revised BPR publications and stakeholder organizations.

What's next?

Work is already underway adapting and modifying all Wounds Canada educational programs so they align with the new information and process of the revised BPRs.

Throughout 2017 writing teams will either revise existing or create additional BPRs to add to this first group.

Acknowledgements

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Our industry partners have again stepped up to provide unrestricted educational grants to cover production costs so we could bring these resources to you.

All 71 authors (listed below) over the past 16 years have been essential to the creation of these documents. They mined the literature to identify and synthesize the best practices available at that time to share with our readers. They started from new or built on the work of their predecessors. Their dedication and hours spent volunteering for Wounds Canada to get these documents done must be applauded.

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