

The Benefits of Receiving a CAWC Scholarship

BY Karen Bruton



For the first time, in 2002, the Canadian Association of Wound Care (CAWC) offered six scholarships for health-care professionals to pursue studies or research in wound care. CAWC and four of its corporate partners funded the six scholarships, worth \$2,500 each. The grants may be used by CAWC members to finance research projects in the field of wound care or to finance study in approved courses on wound care and related fields, or in some cases to attend conferences and/or educational programs that would serve to educate, inform and promote best practice within the wound-care community and improve patient care. Below, Karen Bruton shares her personal experience on how one of those scholarships influenced the course of her career.

Karen Bruton, RN, IIWCC, is a full-time staff nurse at Northumberland Hills Hospital, Cobourg, Ontario, where she works in hemodialysis and as a wound-care consultant. She is the VON Wound Consultant for the community in Eastern Ontario, has a small private practice and works casually at St. Michael's Hospital in Toronto. She is on the Four County Wound Care Committee, Peterborough; Northumberland Hills Hospital Skin Ulcer Prevention and Wound Healing Committee (Co-Chair); RNAO's BPG Panel and the VON High Risk Foot Committee.

It was a great honour to receive CAWC's first-ever scholarship, called the *Cathy Harley Educational Grant in Memory of Aldora Harder and Cathy Foster*. The scholarship allowed me to pursue my strong interest in wound care by allowing me to take the International Interdisciplinary Wound Care Course (IIWCC) through the University of Toronto. The learning experiences, coupled with meeting health professionals with the same interests from around the world, have had a profound influence on me. There will always be special memories of the time spent with new-found friends, colleagues and mentors during the two four-day residential weekends (pre- and post-course) together in Toronto. I spent many long nights studying and answering questions, and this course has made me re-examine my professional goals and interests and has opened doors I never thought would be opened.

Through the course, I developed several self-learning tools for

Compression Therapy and the Braden Scale. I have written wound-care policies and guidelines (based on best practices and evidence-based articles) and have had them pass through various committees in our facility. I am now able to offer educational sessions, am the wound-care consultant at Northumberland Hills Hospital and teach physicians on an ongoing basis. I now have a great interest to explore methods of program planning/implementation of an out-patient clinic and have been asked to sit on a planning committee this fall to develop an out-patient high-risk foot clinic with the VON. I believe that my participation in the IIWCC led me to be able to sit on the RNAO's Best Practice Guideline Committee for The Assessment and Management of Neuropathic Foot Ulcers for People with Diabetes. The course also helped me prepare for the Canadian Association of Enterostomal Therapy's ET program.

Several months ago, I was asked to speak to and answer questions

from a group of experienced nurses. For an hour, they were all attentively listening to what I had to say. At the end of my presentation, the nurses commented on how interesting and informative it was. I felt a great sense of pride in being able to present knowledge that I have acquired over time and to present it confidently. Having taken the IIWCC, I was confident in my background knowledge of statistical findings and rationales for best evidence and best-practice guidelines.

Through attending the course, which was enabled by the CAWC scholarship, I have increased my understanding of wound-care principles, feel confident in that understanding and can now share my knowledge with others. This will ultimately lead to increased knowledge for patients, which leads to increased adherence, which encourages healthier outcomes. I take great pride in knowing that by improving my practice and the practice of others, patients will be the ones who will benefit the most. ☺



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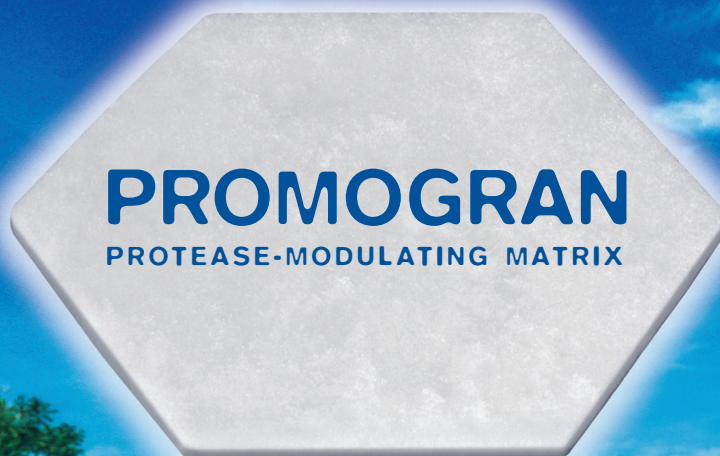
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^{††}*In vitro* testing, using simulated wound fluid model.

Reference: 1. Bowler PG, Jones SA, Walker M, Parsons D. The spectrum of activity of an antimicrobial Hydrofiber[®] dressing against potential wound pathogens. Poster presented at: the 16th Annual Symposium on Advanced Wound Care; April 2003; Las Vegas, Nev.



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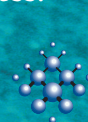
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1. Cullen B, Watt PW, Lundqvist C, et al. The role of oxidised regenerated cellulose/collagen in chronic wound repair and its potential mechanism of action. *Int J Biochem Cell Biol* 2002; in press.
2. Cullen B, Clark R, McCulloch E, et al. The effect of PROMOGRAN, a novel biomaterial, on protease activities present in wound fluid collected from decubitus ulcers. *Wound Rep Reg* 2001;9:407.
3. Cullen B, Smith R, McCulloch E, et al. Mechanism of action of PROMOGRAN, a protease modulating matrix, for the treatment of diabetic foot ulcers. *Wound Rep Reg* 2002;10:16-25.
4. Clark R, Cullen B, McCulloch E, et al. A novel biomaterial that protects endogenous growth factors from proteolytic degradation. *Wound Rep Reg* 2001;9:406.

5. Veves, A. et al. A Randomised, Controlled Trial of a Collagen/ Oxidized Regenerated Cellulose Dressing, PROMOGRAN, Versus Standard Treatment in the Management of Diabetic Foot Ulcers *Archives of Surgery* 2002;137:822-827.
6. Ghatnekar O, Persson U, Willis M. The Cost Effectiveness of Treating Lower Extremity Ulcers with PROMOGRAN in Germany. *The Swedish Institute of Health Economics*, April 2001.
7. Ghatnekar O, Willis M, Persson U. Cost-effectiveness of treating deep diabetic foot ulcers with PROMOGRAN in four European countries. *Journal of Wound Care* 2002;11:2.