

An Interview with **Jan-Marie Morgan, RN (EC) NP, MScN**

# Wound Care in Dubai:

## A Canadian Contribution to Global Wound Care



Jan-Marie Morgan

INTERVIEW BY Catherine Harley, Associate Editor, *Wound Care Canada*

**Jan-Marie Morgan, RN (EC) NP, MScN**, is a practice development nurse and wound-care specialist at the Rashid Hospital in Dubai, United Arab Emirates. She was previously the wound-care specialist at St. Joseph's Health Care, Hamilton, Ontario, where she co-ordinated an outpatient diabetes foot ulcer clinic. She is a primary health-care nurse practitioner and holds a master's degree from McMaster University in Hamilton.

### **Q** How did you first get involved in wound care?

It is hard to pick the moment when wound care became my passion. I have always had an interest and I remember, even as a graduate nurse at St. Boniface General Hospital in Winnipeg, following Dr. Ken Dolynchuck around, looking over his shoulder and asking a ton of questions. I then took the International Interprofessional Wound Care Course (IIWCC) in 2002, immediately after getting my nurse practitioner licence because I knew that with my extended scope of practice I could really make a difference.

### **Q** What are some of the wound-care programs you were involved with while in Canada?

I was an active member of the CAWC, and my hospital was a pilot site for the Pressure Ulcer Awareness Program in 2006. I have been involved in the IIWCC for several years as a marker, and I have served on advisory boards for different industry partners developing generic wound-care education programs. I also developed the curriculum and co-ordinated the Wound Care Institute for the Registered Nurses' Association of Ontario, which runs for one week per year.

### **Q** What motivated you to make the move to Dubai?

I nursed in Saudi Arabia in the '90s, so the move to Dubai wasn't a hard decision. I had spent time in Dubai and knew what I was getting into. It was my husband's job that ultimately brought us here.

### **Q** Could you tell us about your current role at Rashid Hospital in Dubai?

Rashid Hospital is one of three hospitals in the government system in Dubai—Dubai Health Authority. It is the largest trauma centre in the region, seeing approximately 11,000 patients in the emergency department (ED) every month. The operating theatres do about 900 trauma cases a month, so you can imagine the wound workload!

The job is very busy and quite interesting. As the practice development nurse for the department of surgery, I am responsible for the nursing practice of over 300 surgical nurses. This aspect of the job has proved to be a bit of a learning curve for me, but changing nursing practice was a big part of my master's degree, so I am able to lean

on that knowledge. I am also the wound-care specialist for the hospital. I was very lucky that the hospital already had two nurses dedicated full-time to wound care and four physicians and a physiotherapist on a referral basis. We also have an outpatient wound clinic that links with the primary health clinics in the area. There are many challenges with length of stay in the hospital due to wound-related issues. The biggest part of my role is providing education around wound-care best practices to nurses, doctors and allied health staff associated with the hospital and helping the wound-management team to build a strong program at Rashid Hospital.

### **Q** What inspires you to come to work every day?

*continued on page 52*

### **T-3 M**

#### **Adjustable Therapy for the Management of Venous Stasis Ulcers**

- Clinically Proven Effective
- Clinically Proven Pressure
- Clinically Proven Gradient

The new and improved T-3 M CircAid® non elastic compression legging is the only clinically proven, instantly adjustable and reusable pressure range and gradient compression system. Used as a secondary dressing for the management of venous stasis ulcers. The three interlocking bands provide one of 3 prescribed pressure ranges: 20-30mmHg, 20-40mmHg or 40-50mmHg.

# **NEW** to our product line:

THE **T-3 M CIRCAID®** NON ELASTIC COMPRESSION THERAPY LEGGING  
AND THE **VASCULAR DIABETIC ASSIST** PACKAGE.



### **VASCULAR DIABETIC ASSIST**

The Vascular Assist provides advanced diabetic assessment, with PPG technology and rapid easy ABPI & TBPI measurements. The PPG sensor is placed on the appropriate digit to replace Doppler as the detecting device and allows waveform and pressure to be recorded. Bi-lateral measurements of ABPI and TBPI can be taken in half the time.

**VALCO**  
mediven  
LOOK GOOD. FEEL BETTER.

The widest selection of  
compression garments  
for all your venous and  
lymphatic problems.

For the well-being  
of your legs  
**www.valco.ca**  
**1.800.361.3153**

The people here truly want to learn about wound care, and I have never had such an easy time of changing the practice of the nurses. It is a very friendly place to come to work every day and I love what I do.

**Q Are the wound types that you see every day similar to what you were seeing in Canada?**

Actually, no. In Canada, I worked with a large dialysis population and ran the diabetic foot ulcer clinic. In Dubai, in the trauma centre, the types of wounds are very different. I have learned a ton about burns and will be directly involved with the new burns unit that is opening here this year. I had never worked with burns before so I have had to learn quickly. Pressure ulcers are an issue worldwide, so I can still be within my comfort zone at times! We ran the first pressure ulcer prevalence and incidence study here in April 2009, which was very exciting.

**Q Can you describe the differences in setting up a wound-care program in Dubai versus in Canada?**

Dubai is a medically driven health-care system. Nurses are not used to questioning a doctor's orders and most lack the confidence to do so. Nurses here are mostly from India or the Philippines, so there are always cultural differences and language barriers to overcome. Although the hospital is based on English, most patients do not speak it and therefore translation is a must when doing any kind of care. Advanced wound-care products are available here, but povidone-iodine or gauze is the dressing of choice throughout the UAE. Sometimes I feel like I'm in a time warp!

**Q Is there a multidisciplinary approach to wound-care in your facility? If so, how is it structured?**

The head of our wound-care team is a plastic surgeon, Dr. Marwan Al Zarouni. His passion for wound care is endless, and he is an excellent surgeon. There is me and then two full-time nurses, one of whom has taken the IIWCC. They initially see all patients, in and out, and decide if the physician needs to become involved. We also have a physiotherapist, a general surgeon, another plastic surgeon and a vascular surgeon who attend rounds for all our difficult patients every Thursday. Occupational therapists, social workers and dietitians are involved at the ward level as needed. We are still working on establishing a valid referral system and wound-care protocols for the hospital.

**Q Does wound care move across the continuum of care from the hospital to the community? Is home care involved?**

The community is generally not well-equipped to handle complex wounds. We have 26 primary health-care (PHC) clinics in the region and we are trying to educate the personnel and get them the up-to-date dressings to provide wound care. All they have been used to is povidone-iodine and gauze. A dressing that would be done in the home in Canada is done in the hospital here, with the patient taking up a bed unnecessarily.

**Q What role do you play in wound care education within your facility and beyond?**

I run basic full-day education ses-

sions for all the nurses in Rashid Hospital. The nurses from the PHCs attend as well. The wound-management team has set up a Wound LINK nurse system in the hospital, which has a Wound LINK nurse from all units. I chair that group and provide them with further education as needed. The team has also set up a Link DR program within the Dubai Health Authority and has provided education there as well. We are also working with Dr. Gary Sibbald and the group from the University of Toronto to bring the IIWCC here this year. I have partnered with industry to provide generic education in the region and have already been to Beirut in Lebanon for the weekend a few times! This will be a good way to see the region.

**Q What do you see as your greatest challenge in wound care working in the UAE?**

Education and building capacity in the region will be the challenge. As I said, changing the nursing practice is the easy part in wound care. It is the physicians that will remain the challenge. I think once the IIWCC is up and running here, it will help to change the practice of the physicians in this medically driven culture.

**Q What changes have you been able to make in terms of wound-care delivery that have had the most positive outcomes so far?**

I have only worked here for a short time so mountains have not moved yet! However, the first

*continued on page 54*



Rashid Hospital in Dubai, United Arab Emirates.

## PRESENTING FIRST STEP® ALL-IN-ONE™

Another advanced low air loss therapy system brought to you by KCI.

A **step** up for your high acuity patients



### An advanced surface for optimized patient care and nursing efficiency

- 400 lb weight limit accommodates a wide variety of patient sizes
- Optimizes skin microclimate delivery via Low Air Loss
- Helps reduce edema through pulsation therapy
- Turning therapy; continuously rotating patient

For more information,  
including facility case study results,  
call us toll-free at

**1-800-668-5403**

or visit our website at

**[www.kci-medical.com](http://www.kci-medical.com)**

Travel to the  
KCI booth  
and get your  
Passport  
stamped

First Step All In One™ MRS units have specific indications, contraindications, safety information and instructions for use. Please consult product labeling and instructions for use prior to use.

Caution: KCI therapeutic support products are medical devices that require the order of a doctor or a licensed healthcare professional at a licensed healthcare facility.

©2008, KCI Licensing, Inc. All rights reserved. KCI USA, Inc., PO Box 659508, San Antonio, Texas 78265-9508, 1-800-275-4524. In Canada, call 1-800-668-5403. GORE® is a registered trademark of W.L. Gore and Associates. All other trademarks and service marks designated herein are property of KCI, its affiliates and licensors. Most KCI products are patented and/or subject to pending patents. KCI is an ISO-13485:2003 certified company. DSL #08-10-004.1, 10/08 Lit. #18-A-109



week I was here there was an incident with a burn patient in the ED. The nursing staff were concerned with how the patient's burn was treated in the ED. The nurses were angry and the physicians frustrated. After talking to all parties involved, I put together an education session for all nurses on burn care. A shelving unit dedicated to burn care was created in the ED so that staff do not have to run all over the ED to find the products needed to provide appropriate burn care. Although this was a very simple thing to do, the feedback from the patients and the staff has been very positive.

### **Are you making any other contributions to wound care in the Middle East?**

Beside what I have listed above—industry talks and IIWCC—I also chair an interest group that is composed of IIWCC graduates

from throughout the UAE. We are a very new group and meet every two or three months. We support each other, share projects and provide a network based on common knowledge in wound care. We are hoping to standardize wound care in the region and create the first wound-care association in the Middle East. Wouldn't it be nice to see the World Union here one day?

### **Who has been your greatest mentor in wound care and why?**

Wow, that's a tough one. Dr. Karen Campbell for her enthusiasm and vast knowledge—one of my first wound-care workshops was with Karen. Dr. Rosemary Kohr for her incredible use of the English language and for helping me to become a better writer. And Laura Teague and Debbie Mings for their ability to think outside the box and help me to see things from all angles.

These are four women who have had a major impact on my education and my career. They have all influenced me in different ways and I am very fortunate to have learned from them. I am honoured to call them friends and colleagues. No matter where I am in the world, I know that I can call on them for advice and guidance. Once a mentor, always a mentor!

### **Do you have any words of advice for health-care professionals who are interested in working in a hospital in Dubai?**

There are two systems in Dubai—private and government—and I can only speak from the government side. Unfortunately, the pay in Dubai is very poor for bedside nursing staff and, as a result, we have very few Western-trained nurses in those roles. There are other higher-level opportunities in Dubai, provided the nurse has

at least a bachelor's degree. A recruiter would be the best person to answer any questions that nurses may have, and they can be found on the Internet. Dubai is a fun, fast-growing city and I very much enjoy living here. Yes, even in the heat!

### **Where do you see yourself five years? Do you have any plans to move back to Canada?**

One thing I have learned is that long-term plans can change in a heartbeat, although we are hoping to remain in Dubai for four more years. I am learning a lot from the practice development nursing role here in Dubai and would like to pursue a career in practice development once I return to Canada. It will be difficult to pull me away from wound care, but I feel that I may be able to impact change from an even higher level in the future. ☺

## **News in Wound Care ...continued from page 8**

in Geneva. The conference will be trilingual, with all conference materials and sessions provided in English, French and German. Online registration and abstract submission will open on November 1, 2009. The abstract submission deadline is January 15, 2010. For additional information, visit [www.ewma.org/ewma2010](http://www.ewma.org/ewma2010).

### **EWMA 2011 Conference in Belgium**

The EWMA 2011 Conference will take place in May 2011 in Brussels.

The conference will be held in co-operation with the Belgium Federation of Wound Care.

## **Industry News**

### **KCI Announces New Director of Sales**

KCI Medical Canada, Inc., is pleased to announce the appointment of Mike Jessop to the position of director of sales. With over 23 years of industry experience, Mike brings excellent sales leadership skills to this organization. KCI Medical

Canada is excited that Mike is joining the team and wishes him great success in his new role. To discover more about the organization, visit [www.kci-medical.com](http://www.kci-medical.com).

### **ConvaTec to Introduce a Negative Pressure Wound Therapy System in Canada**

ConvaTec Inc., is pleased to announce that it will be launching a negative pressure wound therapy system in Canada. This system features innovative technology that

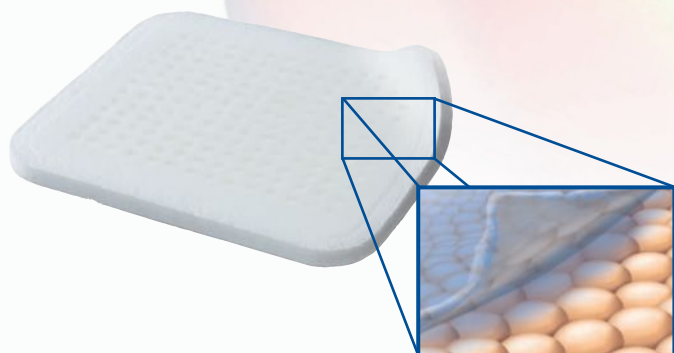
utilizes negative pressure to promote healing by creating controlled tissue strain and removing excess fluid. Every aspect of this system, from the wound interface to the user interface, has been designed to attain optimal clinical and economic outcomes. For additional information, call 1 (800) 465-6302.

*All Industry News is supplied by the companies or their agencies and is published as a courtesy by the CAWC.*

# Wound Management In A New Light *with*

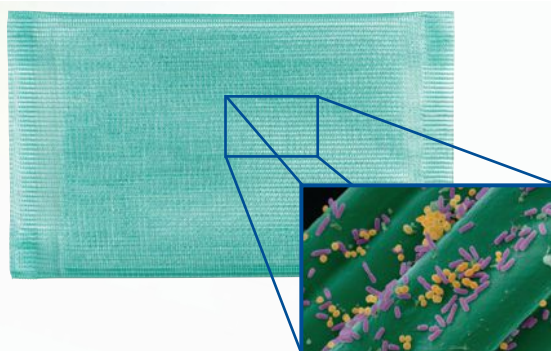
**Cutimed®  
Advanced  
Wound  
Care**

**Best of 2 worlds:  
Cutimed® Siltec®**



A unique foam dressing with both a silicone wound contact layer and super absorbers

**Let's get physical:  
Cutimed® Sorbact®**



Antimicrobial dressing for all colonised and infected wounds

**BSN Medical, maker of quality brands you trust : Hypafix Coverplast Leukomed**