

# CAWC Research Project: An Update

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**T**he CAWC held a research consultation at its 2010 annual conference in Calgary, Alberta, to appraise priorities for wound care research in Canada and reflect on research needs in practice environments. Funding was provided by the Canadian Institutes of Health Research; co-principal investigators were Gail Woodbury and David Keast, and administrative support was provided by Donna Lillie.

The objectives of this consultation were to:

- gain input from stakeholders to identify priorities for wound care research, including identifying barriers, facilitators and strategies for research development, promotion and dissemination;
- build networks, collaborations and communication systems among research areas (e.g. with people working in diabetes); and
- identify the role of the CAWC and other organizations in building partnerships to advance wound care research in Canada.

*The CAWC felt that it was important to bring research and clinical stakeholders together to learn from one another and forge collaborations.*

### Stakeholders and sessions

Fifty national and international healthcare professionals from the areas of medicine, nursing, rehabilitation science, engineering, government, non-profit organizations and academia attended the meeting. Participants were from Canada, the US, Mexico, Australia and the UK. Plenary sessions at the meeting included "Regional or Country-specific Views across the 4 Research Pillars" and "The Role of Partnerships."

Working groups addressed the following issues and challenges:

- Information, databases and assessment diagnostics.
- Education, best practices and knowledge translation.
- Healthcare delivery models, systems and policy issues.
- Wound therapeutics, from basic science to clinical delivery.

### Group tasks

Working groups were tasked with addressing the following issues:

- Identify the key themes that require work within this area and make the case for this as a top priority.
- What strategies would move this agenda forward?
- What partners and stakeholders are required for this priority to succeed?
- What are the challenges and opportunities for collaboration within your research priority?
- What are the strategies to overcome defined barriers?
- Who are the facilitators for maximizing opportunities?
- What is the role of the CAWC in this research agenda?

The consultation meeting generated discussion among Canadian and international wound researchers and people working in other specialty areas who might not otherwise have had the opportunity for discussions. The CAWC felt it was important to bring research and clinical stakeholders together to learn from one another and forge collaborations. The meeting also illustrated the diversity of opinions about the nature, importance and definitions of different types of research in wound care.

### Recommendations

Participants encouraged the CAWC to address research-related agendas within the realm of realities for the association, and become a facilitator and catalyst for relevant research needs, while actively pursuing activities in support of a research environment.

Short-term recommendations for the CAWC identified by the task force included the following:

- Provide small grant funding for seed projects that may be applied for by researchers.
- Provide scholarships for student projects and programs with a research focus.
- Serve as a clearinghouse for research – both in Canada and internationally – and provide that information as a resource. This would in turn encourage a collaborative approach to research and information-sharing. In addition, it could help to bring established and new researchers together to provide role models and research mentorship.

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London, Ontario.

- Support a task force meeting to review the current literature related to wound therapeutics – from basic science to clinical delivery – and collate current knowledge. Such a task force should include clinicians, partners, content and enablers. Longer-term recommendations included the following:
- Support a task force for education to examine what work has been done and identify knowledge gaps, outcome measurements, barriers to education, best practices and knowledge translation.
- Support a working group that would develop collaborations with other non-governmental organization partners such as the Canadian Medical Association, Canadian Diabetes Association, Registered Nurses' Association of Ontario, Canadian Public Health Association, Royal College of Physicians and Surgeons of Canada, MEDEC and others to prepare a position statement that develops a framework for a delivery care model that is inclusive of all stakeholders both within the wound care world and those associated with it (e.g. hospitals, long-term care associations).
- Organize a forum at the CAWC's annual conference to stimulate interest in research and encourage a research environment. This event would also serve to inform participants about current research findings. This could be accomplished through a call for research abstracts and identifying researchers who would present their latest research findings.

Going forward, plans for the next CAWC conference (to be held in London, Ontario, in November 2012) include:

- Bringing 2010 task force participants – and additional members – together to address specific research topics and to determine the state of the topic and future directions. Questions that could be addressed include:
  - How does one effectively evaluate wound care delivery models?
  - How does one evaluate the outcomes of educational programs?
  - Are there key questions in the basic science of wound care that Canadians should address?
- Supporting a working group to investigate the development of a national database and set the standard for the items required and their measurement parameters for the identified purposes.
- Supporting a working group to review what we know and what we don't know, and build plans for future research. This group's mandate would be to develop a research framework that recognizes the interconnectivity of the issues.
- Developing a standard glossary of terms: attention must be paid to ensuring that all written and verbal communications regarding wound care use a common language and understanding. ☺

**For detailed information turn to page 23**

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