A Conversation with Greg Archibald, Newly Elected President of the Canadian Association of Wound Care



Greg Archibald: "We are eagerly developing purposeful relationships with our Quebec wound care counterparts."

What is your mission and vision for the CAWC over the course of your term as President?

One of the main things I'd like to do during my tenure is explore ways that physicians – particularly family physicians – can actively participate in team-based care with respect to wound management. In the past, I believe there was a bit of a disconnect regarding team-based approaches for the management of our patients, especially those with chronic wounds. This issue has been explored by the CAWC over the past few years; we have reached out to physicians through our annual conference and through a series of communications, to encourage their collaboration with other professionals as team members in providing wound care.

As well, the CAWC has spent the last 2 years looking at enhancing the current programming, such as the annual conference and the Foundations of Wound Care learning series, which is now available online. We are also looking forward to developing other relevant programs through our improved and enhanced relationships

with such organizations as the Canadian Diabetes Association (CDA) and the Ontario Ministry of Health and Long-Term Care, and exploring the potential for developing advisory working groups. We are also eagerly developing purposeful relationships with our Quebec wound care counterparts.

The next area of focus relates to continuing the excellent work that has already been accomplished through the CAWC's PEP (Peer Education Program) Talk initiative, which is a large part of our commitment to creating enhanced linkages with our patients.

Another key relationship is with our own membership: In order to be more relevant and effective to our members, we will pay more attention to enhancing value-added membership opportunities within the CAWC.

How will the reorganization of leadership roles benefit the CAWC with respect to short- and long-term goals?

We've created a number of efficiencies with respect to reorganizing the CAWC offices. It came to our attention that restructuring was required to build a team that would help the Board of Directors broaden the organizational vision. To that end, and drawing upon the excellent leadership of Peggy Ahearn as Executive Director, a proposal was accepted by the Board in December 2012 to redistribute the operational responsibilities among a core group, which will be led by Peggy. The main thrust of the new management team places her in a more strategic role, one that champions the development of broader and deeper relationships with our corporate and wound care partners and also supports new programming based upon the strengths of current contractors in 3 distinct portfolios:

- Douglas Queen, Director of Strategic Development, will be exploring ways the CAWC can refresh or reposition itself in the near future regarding national and international relationships and opportunities within the academic and industry milieus.
- 2. David Stein, Director of Operations, will be controlling the day-to-day operational

- and financial accountabilities of the organization, and developing with staff support efficient logistics regarding education and product development.
- Mariam Botros, Director of Educational Program Development, will focus on the delivery of high-quality, relevant educational programming, as well as liaising with academic institutions and affiliated organizations such as the CDA.

All of these efforts are part of a longer-term plan to move the CAWC into a stronger leadership position nationally and internationally.

What further impact can the CAWC have on clinical practice in wound care in the future?

Our intention is to continue to create leadership around practice standards development that is dynamic, to fulfill the strategic direction of the CAWC and lead the writing of such important documents as our best practice recommendations, which will influence the educational agenda.

Another impact will be to explore substantial relationships with international organizations. This would include such initiatives as the Wound Care Program at Hôpital Bernard Mevs in Port-au-Prince, Haiti, which was launched after the devastating earthquake in January 2010. We hope to be involved in such initiatives in a very meaningful way; as well, the educational and practical tools developed by the CAWC plan to be shared on an international stage.

What are your personal goals with respect to wound care across Canada in the future?

Broadly speaking, I plan to spend a portion of my educational leave time within the next 2 years exploring educational modelling for wound care training as it pertains to engaged constructs in Canada; as well, to consider research with respect to the impact of change to team-based approaches regarding the care of people with chronic wounds in our health systems, particularly those in long-term and home care.

Professor Keith Harding Honoured for Services to Healthcare

By Douglas Queen, Director of Strategic Development, CAWC

It is with the utmost pleasure and pride that the Canadian Association of Wound Care recognizes both a long-time friend and an inspirational leader in the area of wound care, Keith Harding CBE MB ChB MRCGP FRCP FRCS.

To most of us involved in wound care, Dr. Harding needs no introduction; his achievements are legendary. However you know him, you're certainly aware of Dr. Harding's passion and commitment to wound care and its evolution into a true clinical specialty. Indeed, he has devoted the majority of his professional career to this goal and coined the phrase 'woundologist,' of which he is a prime example.

In recognition of his effort and passion, Her Majesty the Queen named Dr. Harding a Commander of the Order of the British Empire (CBE) in the 2013 New Year Honours List, for his services to medicine and healthcare. This honour. announced December 29. This high honour 2012, recognizes his outis recognition of true standing career, forwarding dedication and lifetime the clinical specialty of achievement in a field wound care, benefiting those close to the hearts who suffer from both acute of our readership.

and chronic wounds not only in

Wales but in other regions of the U.K. and on the international scene, including Canada. Dr. Harding will be invited to Buckingham Palace to receive his CBE from a member of the royal family at an investiture ceremony.

Following is an abbreviated recap of the career of a professional wound carer: Dr. Harding has had a long-standing interest in wound healing. He has undergone training in both general surgery and general

practice. He was appointed as the first Director of the Wound Healing Research Unit, Wales College of Medicine, Biology, Life and Health Sciences, Cardiff University, in 1991. From 2002-2005 he was also Head of the University Department of Surgery and currently is the Director of the TIME Institute. School of Medicine, Cardiff University; Head of the Wound Healing Research Unit, Cardiff University; and Clinical Director of Wound Healing in the Cardiff and Vale NHS Trust. His clinical practice focuses exclusively on treating patients with wound-healing problems with a wide range of etiologies. He has authored more than 300 publications in the field of wound healing and has written a number of chapters and books in this area.

He is the Editor-in-Chief of the *International Wound Journal*, published by Wiley-Blackwell. He was the First President of the

European Pressure Ulcer Advisory Panel and First Recorder of the

European Wound Management
Association, and is a Past
President of the European
Tissue Repair Society. He
was Chair of the International
Working Group on Wound
Healing in Diabetic Foot Disease
in 2003, Chair of the Expert Working

Group that produced the World Union of Wound Healing Societies (WUWHS) Consensus Document on minimizing pain at wound dressing-related procedures in 2004. He was Chair of WUWHS expert working groups on exudate in 2007 and on compression, vac therapy and wound diagnostics in 2008. He was also Chair of the international consensus document on wound infection in 2008. He chaired an International



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Working Group on Pressure Ulcer Prevention, Prevalence and Evidence in Context, which was published in 2009.

He has obtained funding of more than £30 million from a range of academic, commercial and clinical sources since the Wound Healing Research Unit was created in 1991.

Much has been achieved over the past 3 decades; however, being awarded this high honour is recognition of true dedication and lifetime achievement in a field close to the hearts of our readership.

On behalf of the Canadian Association of Wound Care, I would like to congratulate Keith on this significant recognition and for his continued contribution to wounds on a global basis. I know he will say he is accepting on behalf of his team, as nothing is truly achieved without a true professional multidisciplinary approach.

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You can now find the Canadian Association of Wound Care on Twitter and Facebook. Follow us on Twitter at http://twitter.com/woundcarecanada to receive timely updates regarding the Association's wound care education programs and the latest news in wound care. You can also find the Canadian Association of Wound Care on Facebook.

