

Jane McSwiggan MSc, OT Reg

In an interview conducted by Janet L. Kuhnke, Winnipeg-based Jane McSwiggan outlines her job as Education and Research Coordinator – Wound Care in Manitoba and discusses the rewards and challenges her role brings.



Q What is your current role in wound care?

A I am the Education and Research Coordinator – Wound Care for the Winnipeg Regional Health Authority in Manitoba. In addition to promoting excellence in wound care, I am responsible for supporting initiatives to promote evidence-based practice to improve the quality of wound and skin care, including prevention and management of wounds.

My role is primarily focused on identifying learning needs in wound prevention and wound care for health-care professionals and support staff, and working collaboratively with clinicians to develop learning strategies such as wound care courses, clinician mentorship and collaboration.

Q How has your role in wound care and research evolved over the years?

A The position of Education and Research Coordinator – Wound Care was established in the autumn of 2014, so I feel very privileged to be given the responsibility of establishing the role within this assignment. Since I was appointed in November 2014, I have seen my role evolve from being one focused out of necessity on developing wound care education programs to empowering clinicians to access their clinical reasoning and

critical thinking skills in the prevention and treatment of wounds.

Q What is your view on interdisciplinary wound-care teams?

A The consumers of the health services—our patients, clients and residents—expect the highest standards from the professionals and support staff assigned to their care. An interdisciplinary approach to overall care is imperative because of the complexity of the skills and knowledge required by health-care providers, especially with a population that has a large number of older people and that has more complex needs associated with chronic disease. Therefore, I feel that given the multifaceted nature of wound care, interdisciplinary wound care teams that function effectively to provide excellence in care along a continuum from prevention and treatment of the cause of a wound to successful healing, maintenance or palliation of a wound are imperative.

Q Could you describe what you see as critical success factors to developing an interdisciplinary wound care team?

A The literature does help in this regard, and from what I have read, the team needs to be very clear about the scope of services it provides and ensure it has adequate staffing to meet

its mandate. A successful wound team should have professional interdependence, meaning that each team member has mutual respect and values the contributions of the other members. Treatment goals for wounds need to be very clearly articulated, and the person being treated needs to be fully involved, informed and integrated into the process even if they have difficulty in adhering to the team recommendations for care of their wound.

Q What are some of the biggest challenges you have seen in the practice of wound care? Do you see them as barriers or solutions?

A Ironically, perhaps it is the need to develop strong wound care teams with emphasis on evidence-based practice. The delivery of wound care, whether in the prevention or treatment of wounds, seems to be fragmented and struggles with being comprehensive in its delivery. I do not see this as a barrier because my position was created exclusively to encourage and achieve excellence in wound prevention and wound care. My daily telephone calls and emails with clinicians both within and outside Winnipeg give testament to the fact that there is significant interest in making wound care a priority for their teams. They are eager to embrace evidence-based and collaborative practice.

Q What is the biggest challenge in wound care in your present role?

A I am passionate about the complexities of the skin. Skin has the distinction of being the largest organ in the body and is a palette from which we can evaluate state of health and detect local and systemic disease. Skin gives us the ability to regulate temperature, sense danger, feel pain, pressure and touch because of the complex network of blood vessels, sebaceous and sweat glands, nerve endings and sensors.

However, I think that skin is taken for granted, and its status as an organ needs to be raised. Skin care needs to rank high in everyone's mind. Skin ischemia and cell death, while not nice to

speak of, is the wording that should be used to help clinicians focus on the detrimental effects of friction, shear and pressure to skin and contribute to the imperative of attention to these forces.

Q What role have you played in wound care in Winnipeg, Manitoba?

A It surprises many that my job is dedicated to wound care. I co-ordinate all of the wound care courses that the Winnipeg Regional Health Authority (WRHA) offers. I am not a content expert so I rely on a strong team of clinicians, including dietitians, nurses, occupational therapists, physicians and physiotherapists to develop content and teach wound care courses. The WRHA courses include an online Level 1 wound care course, which was developed collaboratively with clinicians and stakeholders in the Winnipeg region and has been used as an education tool in the regional health authorities outside Winnipeg.

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I am involved in the development of clinical practice guidelines and manage the education of staff with wound care product conversion by collaboration with our industry partners.

My favourite role is to be a resource to the health-care community in trying to solve problems, connect people with each other and delight in making someone's day a bit easier.

Q Any last or favourite comments?

A I think it is amazing that skin gives us the ability to make an assessment of a person's mental status, mood and disposition as soon as we see them. Perhaps this is the occupational therapist in me coming out. Their skin is providing these clues about their emotions and state of mind without even having a conversation. Every day we must remember that the skin differs from other organs in that it continually renews itself; therefore our fabric does not wear out, our seams don't burst and we don't sprout leaks in the bathtub. 🩹