Reflections on the Wounds Canada Fall Conference

By John Gregory, IIWCC

The 2017 fall Wounds Canada conference, Evolving over Time: Targeting Best Practice in Canada, was held in Mississauga, Ontario, November 16–19. Over 800 health-care practitioners, administrators, government decision-makers, industry representatives and patients attended. What follows are highlights from the conference.

now what you don't know," advised Canadian IndyCar driver James Hinchcliffe, who bounced onto the stage telling woundcare clinicians that they are doing remarkable work.

He knows from personal experience. You



could hear a pin drop in this keynote address, as Hinchcliffe told a packed conference the story of his accident and improbable rehabilitation.

"I was a shish kebab, a Hinch kebab," he said. His story provided a fascinating insight into the patient experience in a major trauma case.

"Stories like yours fuel us," noted one member of the audience.

The conference feedback indicated that the majority of attendees found his keynote very relevant to their practice.

Challenging the Audience

While Hinchcliffe reminded us of the importance of teamwork in effecting positive outcomes, Kerstin Lewis noted that "We can't assume everyone knows how to work as part of an integrated team." And challenging the accessibility of the interprofessional health-care team, one delegate noted, "What happens in Toronto is entirely differ-



ent than what happens in Northwestern Ontario. Don't make the assumption that your pathway for health care will work there."

"Who feels completely happy with everything they do in the organization for managing patients?" asked speaker Nicola Waters, introducing the term *institutional ethnography* (IE). This distinctive mode of inquiry seeks to understand how what people do and experience is organized in relation to others.





Physiatrist Chester Ho provided a glimpse into the controversial discussions within Alberta Health Services on the balance of cultural change versus policy/procedure-driven governance in pressure injury prevention.

The attendance across all four days of the conference was a testament to the level of engagement. And based on the high energy in the room and the feedback later, Sunday morning's Wound Jeopardy was a particularly memorable session that deeply involved the audience.

Living in the World of Wounds

"I don't want to be part of that 80% that gets an amputation," said an impassioned Robert Meyer, a patient with diabetes. A participant at two previous Wounds Canada conferences, he returned to

this conference and, with his no-nonsense comments and singing, brought the house to its feet.

Conference co-chair Deirdre O'Sullivan-Drombolis added, "Attending this conference and being around so many like-minded healthcare individuals is truly inspiring and uplifting. We can come together to share not only knowledge and the latest evidence but also personal stories about our own trials as well as successes



navigating the health-care system. It enables us to return to our everyday lives with fresh new ideas and a renewed sense of purpose."

Exceptional Speakers

Throughout the conference, attendees were treated to many distinguished speakers and panel members. These included special guests Evan Call and David Keast from the International Wound Infection Institute. Call's ses-



sion on Saturday highlighted why microbes are so difficult to control. He noted we have identified only 7% of bacteria, with 93% yet to be discovered. This built on an earlier session with Kevin Woo, who presented the UPPER and LOWER infection checklists.¹

Shahriar Shahrokhi, Attending Surgeon at Ross Tilley Burn Centre at Sunnybrook Health Sciences Centre, kept us mesmerized for 45 minutes in an after-lunch industry-sponsored session.

Kathleen Reid, speaking at the conference for the first time, articulately described setting up a wound-prevention program in the Saturday Long-Term Care session. ("Note to self," tweeted Wounds Canada, "invite her back again.")

Digital Posters and Oral Poster Presentations

Pamela Houghton emphasized the importance of the oral poster presentations, where many innovations are presented. During the conference, these presentations were organized into topic



groups, including Infections and Skin Tears, Dressings, Programs, and Pressure Injuries.

Maryse Beaumier won the People's Choice Award for her poster "Let's See the Best Dry Dressing When Blood Supply Is Poor in a Leg

Ulcer: A Literature Review," and Simona Gabriele received the Judges' Choice Award for her poster "Transdermal Doxycycline: A Novel Treatment of Diabetic Foot Ulcers."

The top three oral poster presentations were:

- "Skin Tear Prevalence, Incidence and Associated Risk Factors in the Long-term Care Population," by Kimberly LeBlanc
- "A Prospective, Multi-Site, Non-Blinded Study Comparing the Cost-Effectiveness of Gentian Violet/Methylene Blue Dressing in

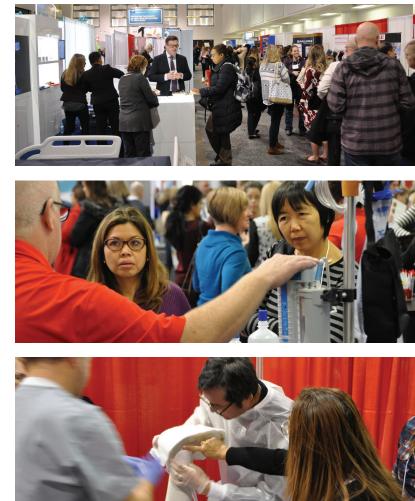
the Management of Open Surgical Wounds vs. the Current Standard of Care in a Canadian Community Care Setting," by Karen Laforet

• "The Benefits of a Regional Interprofessional Complex Wound Center," by John Hwang

Industry Symbiosis

The high attendance at the industry-sponsored sessions and attendee engagement with industry reps on the exhibition floor are a tribute to the successful symbiosis among health-care professionals, wound-care companies and related professional organizations in Canada.

"Wounds Canada attendees are among the world's most motivated and innovative woundcare providers as shown by their dedication to attending educational sessions and interactions



with the many exhibitors demonstrating their products," said Canadian industry consultant Alan Neil.

Nicola Waters commented, "For me, the highlight of the Mississauga event was the opportunity to continue the debate we began at the spring conference in Kamloops about 'What is evidence in wound care?' These two groundbreaking forums have offered patients, clinicians, educators, researchers and industry representatives a unique platform on which to showcase how, although our views and priorities may be very different, we can come together with the aim of improving life for people with or at risk of wounds."

"This year's fall conference showcased the role Canada has played in the development and evolution of best practices and patient-centred woundcare advocacy," added Neil.

We Have an App for That!

The new smartphone app for the conference gave a taste of what to expect in the future. It allowed attendees real-time access to the session schedule and summaries, speaker biographies and digital posters. The posters could be downloaded from the app for future reading.

In the 15 years that I have attended Wounds Canada conferences, I have seen them become *the* centre of learning for attendees from many backgrounds with a stake in improved wound management. For example, more physicians, facility/agency administrators and government decision-makers



have become involved in how wound care has evolved in Canada, and they now make up a greater proportion of conference participants. To accommodate the learning needs of this wider range of attendees, the



conference provides a successful balance of clinical science, everyday real-world clinical practice, lived experience and the seeds of institutional ethnography. One result of the education these conferences provide is that Canada has created an exceptional sphere of international influence.

Said Morty Eisenberg, president of the board of directors for Wounds Canada, "We are indebted to Mariam Botros, Wounds Canada CEO; Robin Evans and Dee O'Sullivan-Drombolis, conference co-chairs; and the entire team at Wounds Canada for putting together a very successful and well-attended conference in Mississauga. The feedback has been excellent, both from participants and our industry partners."

Looking Forward

Next year's spring conference will take place in Winnipeg, Manitoba, May 11–12, with the fall conference in London, Ontario, November 8–11, 2018.

John Gregory edits the syllabus for Wounds Canada conferences. Expect further articles from him on crafting session summaries and the rise of social media in Canadian wound care. You can find him on Twitter @gregiej and @opencityinc.

Reference

 Woo KY, Heil J. A prospective evaluation of methylene blue and gentian violet dressing for management of chronic wounds with local infection. Int Wound J. 2017;14(6):1029– 1035. Available from: http://onlinelibrary.wiley.com/ doi/10.1111/iwj.12753/full.