



ANNUAL REPORT

1 July 2014 - May 2015

Advancing practice and knowledge in wound management

INTRODUCTION

The New Zealand Wound Care Society Incorporated (NZWCS) is a voluntary organisation made up of health care professionals from a variety of disciplines who share a common interest in wound management. As an organisation it gives its members an opportunity to share experience, expertise and knowledge, providing a forum to network with other members throughout the country.

The aims of the Society are:

- To improve outcomes and quality of life for patients with wound and skin integrity problems.
- To provide and encourage best practice wound management across all health care settings.
- To be a recognised voice at national and local level in any issues relating to wound healing or maintaining skin integrity.

To achieve these aims the NZWCS has a focus on education and professional development, as well as fostering and encouraging an evidence-based approach to wound management. The Society holds regular local education sessions and study days, which are organised by Area Coordinators, and a biennial national conference. Members also receive two international wound care journals and the Society's own newsletter Tissue Issue.

Currently there are thirteen NZWCS branches across New Zealand: Northland, Auckland, Waikato, Rotorua/Taupo, Bay of Plenty, Manawatu/Palmerston North/Wanganui, New Plymouth/Taranaki, Hawkes Bay, Wellington, Marlborough/Nelson, Christchurch, Dunedin, and Southland.

The NZWCS is a registered Incorporated Society (No. 671834) and a Registered Charity (No. CC44360).

President — **Emil Schmidt**

Honorary Treasurer — **Rebecca Aburn**

Administrator — **Jeannette Henderson**

PRESIDENT'S REPORT

Dear Wound Care Society Members

Greetings to you all!

Once again, I am sure you agree that it has been a very busy year indeed. I would like to thank all members who have tirelessly worked on the national committee, regional coordinators and those who are involved in the several focus groups within the society. Working for the society takes a lot of time. This work is usually done either at the weekends or evenings or even in the small hours of the morning via teleconferences. We all need to remember that without this generous "gift" of time the society simply wouldn't be able to function. When I was attending the charity commissions work shop during the year it was amazing to learn of the generosity of New Zealanders. Did you know that there are over 25,000 charities in NZ and 2,000 in the health sector! Within the health sector volunteers donated over 260,000 hours of their time. Simply amazing isn't it. We don't know how many hours you are all contributing but I am sure it must be in the thousands.



It was heartening to get so many applications for the various positions that had to be filled during the year. The spirit within the society remains high. I would like to thank you again to keep the flame burning as we strive to serve our patients better.

The Charity Commission has changed the way we need to complete our yearly report. Our treasurer, administrator and the President have been working with the commission on this issue.

I can assure you all, that the Society is well prepared. The financial accounting is in good hands as we are well advanced towards a complete paperless accounting system. In future we need to explain our activities in more detail. We also need to report on the outcome of those activities. The Charity Commission and the public must be able to understand the business of what we are doing e.g. when we are running a seminar we need to get a brief report from the organizer of the numbers attending and the purpose of the seminar.

During the last year we have achieved our goal to close the gap between our income and expenditure. Please read the full financial report from Rebecca, our able treasurer supported by Jeannette, our administrator.

I would like to take this opportunity to explain our Memorandum of Understanding (MoU) that we have with the Australian Wound Management Association (AWMA). In 2007 the NZWCS became an affiliated member of AWMA. For this membership we had to pay a \$20 AUD affiliation fee each year for every NZWCS member. This equated to well over a quarter of our membership fee.

The main benefits were to:

- Reduced AWMA conference fees for NZWCS members
- Access to wound practice and research journal
- A commitment to work closer with the AWMA

At the June 2014 AGM we agreed to move towards e-journals only. Unfortunately, we are still working with AWMA on establishing access to their journal on our website. This process has taken much longer than anticipated.

We have also asked AWMA to review our affiliation fee as we no longer access the hard copies of the journal. And these discussions are also ongoing.

I hope you find time to read the summaries of all the activities with the society. The education sessions and study days provided by our area coordinators were very well attended and are crucial in developing our standards of practice.

The Leg Ulcer Advisory Group (LUAG) has also continued their amazing work. This group is well established and has achieved really good results. They are actively working together with MOH and PHARMAC as well as AWMA. Great work!

One of the highlights of last year was the launch of the '*International Clinical Practice Guidelines on Prevention and Treatment of Pressure Injuries*'. What a fantastic achievement it was. The Pressure Injury Advisory Group (PIAG) was re-established earlier this year. This group has met via teleconference several times and completed their Terms of References. Members of this group have been involved in the 'Show Your Ability' & the 'Moving and Handling' roadshows throughout NZ not only promoting the society but also the new pressure injury guidelines.

Each year the society provides scholarship funding for our full members who wish to seek financial support to attend conferences, study days or for post grad study. This year we are able to award 16 scholarships totalling almost \$10,000 NZD, 11 of which were awarded to attend this conference.

I would like to finish by thanking all you hard working colleagues out there in New Zealand aiming to make a difference to our patients and their families who we care for, but I would particularly like to mention:

Sue Rossiter – Area Coordinator for the Nelson/Marlborough area who steps down after serving the NZWCS for over 8 years.

Jo Hunter – who steps down from the Area Coordinators role for Southland after 4 years (and who is our poster girl)

The PIAG members who stood down – Maria Schollum, Jane Edwards, Kate Gray & Paula McKinnel – (thanks for all your contributions and late nights working on the 2014 Pressure Injury guidelines)

Rebecca Dawson – National Committee member & Area Coordinator for the Bay of Plenty region

Liz Milner – Area Coordinator for the Auckland region.

And finally – I would like to thank our own families for their continued support.

Kind regards

Emil Schmidt

President - NZ Wound Care Society

ADMINISTRATOR'S REPORT

Administrator's Report 2014-2015



What a busy year this has been. The National committee and Area Coordinators have been stretched this year with all the peer reviews and assessments that I have asked them to do. In October/November 2014 we had over 20 scholarship applications to access, followed in January 2015 by Expressions of Interest for the LUAG, PIAG and PHARMAC. In April I had to ask you to do peer reviews on quite a number of Oral & Poster abstracts for Conference. I want to thank you all for your hard work on top of your already busy days.

STOP PI Day took place last Nov so there was a lot of posting out of resources to all the areas.

We hope to be able to send this out earlier, this year, so that you will have plenty of time to organise what you are doing for STOP PI Day **19 November 2015** this year.

Thank you to all our sponsors who continue to support our education and awareness endeavours.

Wayne Naylor was our Knight in Shining Armour last October when the NZWCS website and email system crashed due to hacking. He had to move the whole thing over to the 'New Look' website overnight – luckily this had already been designed. Hopefully this was a seamless experience for most of you, but is the reason for the more complicated passwords.

I went along to the Wellington Study Day, last August, to help Paula McKinnel & Kate Gray with the registration desk and I also attended the 'Show Your Ability', in February in Palmerston North, to support Desley Johnson with Pressure Injury and NZWCS information.

I continue to take the minutes of the National Committee meetings every 2 months and the LUAG, PIAG and Conference 2015 meetings (although the LUAG have been quite self-sufficient for the last few months), administration of the membership and the day to day banking through Xero. Xero is a great on-line accounting system and if you are not sure about something, they provide free on-line tutorials. We are working towards a completely paperless 'Society' (pun intended) by sending out our renewals and receipts via email and through Xero.

Emil, Rebecca and I attended the External Reporting Board seminars (in different cities) on the NZ Accounting Standards for the Charity Services. Rebecca has more information on this in the Treasurer's Report.

Membership for 2014-2015 stands at:

Full – 271

Corporate – 25

Commercial – 14

A Conference year is always more enjoyable as I get to help with the conference organisation and work closely with the conference convenors. Susie Wendelborn and Jane MacFarlane have done a fabulous job, I hope you agree. I also get to meet you all and put faces to names.

It has been an honour to work with Emil, Rebecca, National Executive committee and the Area Coordinators. You all do such an awesome job.

Jeannette Henderson
Administrator
NZ Wound Care Society

PRESSURE INJURY ADVISORY GROUP

Pressure Injury Advisory Group Report 2014-2015

The PIAG has had a busy and very exciting year. In August 2014, **Prevention and Treatment of Pressure Ulcers: Clinical Practice Guideline was published. This guideline was the** result of a collaborative effort amongst the National Pressure Ulcer Advisory Panel (NPUAP), European Pressure Ulcer Advisory Panel (EPUAP) and Pan Pacific Pressure Injury Alliance (PPPIA) (the umbrella organisation for the NZWCS for this project). The guideline was developed using a rigorous scientific methodology to appraise available research and make 575, evidence-based, recommendations. A consensus voting process (GRADE) was used to assign strengths of recommendation that indicate the extent to which one can be confident that adherence to a recommendation will do more good than harm, intended to assist the health professional to prioritise interventions. In other words, the guidelines incorporate the best available evidence out there.

Pam Mitchell, wound consultant at CDHB, represented NZ on the Guideline Development Group (GDG). Wayne Naylor, Maria Ten Hove and Emil Schmidt were strategic members of smaller working groups, and then there were many of you who participated as stakeholders and your comment and critique were held in high esteem nationally and internationally. Thank you for such an amazing team effort in making this document such a valuable one.

We hope you have all had an opportunity to look at the QRG which is available free to download from our website. “Users should not rely on excerpts from the Quick Reference Guide alone” (Haesler, 2014). The CPG needs to be purchased, and offered at a reduced price for the PPPIA region. The GDG is still actively discussing issues arisen since the publication of the guideline. The NZWCS has agreed to contribute to the cost of keeping Emily Haesler, our Methodologist, employed so that she can continue her excellent work in reviewing and providing evidence tables for the 2019 update. The NZWCS will receive a share of all the money received through selling guidelines.

We now need to focus on the implementation of the Guidelines and decide on our on-going involvement internationally both with the GDG and the Terminology group for the ICD (International Statistical Classification of Diseases and Related Health Problems) particularly for Staging PIs and definitions. Their current terminology precedes the definitions in the 2009 EPUAP / NPUAP documents for the Prevention and Treatment of Pressure Ulcers. The ICD also only allow one pressure injury to be coded even if there are multiple pressure injuries! Then there is the question of ‘Pressure Injury’ vs ‘Pressure Ulcer’ in the International document? Currently ‘Pressure ulcer’ is used in this document, but it is synonymous with ‘Pressure Injury’. This remains under discussion internationally. We will continue to use ‘Pressure Injury’ in the PPPIA region.

In December 2014 the PIAG was disbanded and an Expression of Interest was sent out to all members of the NZWCS. There were many worthy candidates with excellent credentials who applied. Thanks to all those who applied. After much deliberation and lengthy process, the select committee of the NZWCS, decided on the core group members.

The new group consists of Leanne Bolton-Palliative Care Registered Nurse-Mary Potter Hospice, Pam Mitchell -Clinical Nurse Consultant Wound Management-CDHB, Rachael White – Wound Care Nurse Specialist-Older Persons Health Speciality Service-CDHB, Wendy Mildon-Clinical Nurse Specialist-

HBDHB and Emil Schmidt - Wound Care Specialist-SDHB. The input of our many members and our Multi / Inter disciplinary teams will be requested and valued before publication. Our new Terms of Reference has been completed. Our focus for the next six months will be the preparation for International Stop Pressure Injury Day on the 19th November 2015 – (always the third Thursday in November). We are grateful that Prue Lennox has agreed to lead and work with the PIAG on this action day.

We look forward to the many challenges and the work ahead.

Thank you all for your support

Leanne Bolton

Wendy Mildon

Pam Mitchell

Emil Schmidt

Rachael White

Reference:

National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel, Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers: Quick Reference Guide. Emily Haesler (Ed.). Cambridge Media: Osborne Park, Western Australia; 2014.

LEG ULCER ADVISORY GROUP

Leg Ulcer Advisory Group (LUAG) Annual Report 2014-2015

Introduction:

The LUAG consists of NZWCS members with expertise and a special interest in lower extremity wounds.

Current Members:

Jeannette Henderson – Administration Officer, Kate Gray - Community Wound Care CNS Hutt Hospital, Cathy Hammond - CNS Wound Care Nurse Maude ChCh, Julie Betts- Nurse Practitioner Wound Care Waikato DHB, Natalie Scott – CNS Wound Care, Rebecca Auburn -CNS Infection Prevention and Control Southern DHB and Mandy Pagan CNS Wound Care Nurse Southern DHB



Rebecca, Julie, Cathy, Mandy, Natalie and Kate at the LUAG meeting in Wellington May 2015

Activities:

We welcome Rebecca Auburn, replacing Rowena McGrath, onto the LUAG. Rebecca will attend her first LUAG meeting in May 2015.

The LUAG have had teleconference meetings and two face-to-face meetings in Wellington (coupled with other national work). This year's work has focused on updating the NZWCS Leg Ulcer Assessment Form. The updated form has included descriptors and prompts for the novice to advance assessment skills and learning, the form will soon be available on the NZWCS site. We encourage health professionals to use this form to assist with history, examination and investigations to support diagnosis for all consumers with lower leg ulcers. The national Venous Leg Ulcer Advisory Panel has approved this form.

The LUAG terms of reference have been updated and are available on the NZWCS website. The LUAG provide progress updates at the national NZWCS committee meetings.

Work has halted with Pharmac in regards to the distribution logistics of implementing funded hosiery for patients with healed venous leg ulcers. The LUAG has completed competencies for certified authorizers of compression hosiery when this is rolled out nationally. A special acknowledgement to Kate for her outstanding work on this competency.

Cathy and Julie continue to work collaboratively with the AWMA and provide feedback to the LUAG. The AWMA are aware the LUAG want to take a proactive role when updating the Clinical Practice Guideline for Prevention and Management of Venous Leg Ulcers.

At the national conference in May, time has been allocated for the LUAG to update attendees on our work, and a workshop will be held on practical applications to implement the venous leg ulcer guideline. This workshop caters for the novice health professional.

The LUAG have recently published an article in the journal of NZ College of Primary Health Care Nurses, LOGIC March 2015 volume 14(1). The article titled: Implementing the Clinical Practice Guideline for the Prevention and Management of Venous Leg Ulcers.

Special acknowledgements to all members who provide work in their own valuable time, the national Committee for supporting our work, and Jeannette who continues to provide the LUAG with much organisation and essential administrative support!

Mandy Pagan
Co-coordinator LUAG

PHARMAC Wound Care Advisory Group

PHARMAC WOUND CARE ADVISORY GROUP (WCAG)

Purpose

The purpose of the WCAG is to provide objective clinical advice on wound care, wound care products and related issues to PHARMAC.

Background

In 2010 Cabinet decided that PHARMAC would take a more active role in the procurement of medical devices used in DHB Hospitals (medical devices covers the whole range of wound care products).

PHARMAC & the Ministry of Health were asked to develop a plan to give effect to this decision.

The plan, which was approved by Cabinet in 2012, involved the establishment of a common system for procurement of medical devices across DHB's.

The aim of PHARMAC'S management of medical devices is to create national consistency in access, improve transparency of decision making and improve cost effectiveness of public spending to generate savings for reinvestment into health.

As part of establishing PHARMAC'S new role in managing medical devices, PHARMAC staff consulted in May 2013 on the commencement of procurement work in a number of identified medical device categories to generate benefits for the DHBs. Stakeholders indicated that the wound care category should be included in the procurement activity. There was a strong message that there should be a national approach to the standardisation/ rationalisation process for wound care products on behalf of the DHB's.

Relationship between WCAG and PTAC and subcommittees

Currently, PHARMAC'S clinical advice for medicines primarily comes from the Pharmacology and Therapeutics Advisory Committee (PTAC) and from a range of subcommittees that provide objective independent clinical input and recommendations to PTAC, although advice is sometimes sought from a range of other sources. PTAC is a committee of the PHARMAC Board, and its role is defined in the NZ Public Health and Disability Act 2000.

PHARMAC has recognised that in order to take all relevant clinical aspects of medical devices into account, PHARMAC needs to engage with a wider range of experts than has been done in the past for medicines.

The WCAG, therefore, operates on a different basis to a subcommittee of PTAC. It is a group of experts, who are individually contracted to PHARMAC, to provide recommendations and advice in a working group setting to assist PHARMAC in informing its approach to the management of the wound care category.

PHARMAC staff have sought PTAC'S advice on setting up advisory structures for its medical devices role and various approaches on how PHARMAC seeks advice from PTAC will be developed over time as the medical device work develops.

The establishment of the WCAG is one of these approaches that will assist PHARMAC gain better understanding of medical device issues and wider requirements.

As PHARMAC'S activities in relation to medical devices continue to evolve, PTAC and its subcommittees will be asked for their clinical advice when appropriate to do so.

Role of the WCAG

The role of the WCAG is to:

- Provide objective advice to PHARMAC on the possible approaches for standardisation and rationalisation of wound care products nationally.
- Assist with defining requirements and specifications that require consideration in relation to each wound care subcategory
- Review clinical evidence and appropriateness of new wound care products and /or new technology offered by wound care suppliers.
- Help to ensure that products are fit for purpose, clinically appropriate and meet the needs of patients at a sustainable cost, and
- Consider, make recommendations or report to PHARMAC and /or PTAC on any other matters that may be referred to it by PHARMAC.

Members of the WCAG

Julie Betts, Waikato (Chair)

Alan Shackleton, Auckland

Wendy Mildon, Hawkes Bay

Susie Wendelborn, Marlborough

Cathy Hammond, Christchurch

Emil Schmidt, Dunedin

Mandy Pagan, Invercargill.

The WCAG have had three meetings to date and the task has been to review the structure of the wound care categories and subcategories schedule listings. If there is a specialty not covered within the WCAG, PHARMAC will seek a representative to advise, e.g. Castings /tapes - Emil Schmidt has been selected by the NZWCS group to advise in this field.

It is important to ensure that when this schedule goes out to the market place, purchasers can find and identify wound care products and that there are clear descriptions and definitions of their functionality.

Information regarding the group and its activities will be available on the Pharmac website.

Susie Wendelborn

SCHOLARSHIPS

Each year the Society provides up to \$6,000 worth of scholarship funding, which is available for Full Members who wish to seek financial support to attend conferences, study days or post-graduate study. In addition, it was agreed by the National Committee that the NZWCS study grants are able to be used for international distance courses, for example those offered by Australian Universities. It is also important to remember that professional development and educational courses or events do not need to be specifically about wound care to receive Scholarship funding. For example courses, conferences or study days on topics related to wound care, such as stoma therapy or podiatry, could also qualify for funding, as long as the applicant can demonstrate how their learning will contribute to their clinical practice and its relevance to wound management.

The **2014-2015** Scholarships attracted over 20 applications of which the Society was able to support 16 due to there being scholarship funds available from 2013-2014.

Following a blind peer review process of the applications, the following NZWCS members were awarded scholarships for 2015:

- Pam Mitchell – International Conference – Launch of the 2014 Pressure Injury Guidelines
- Treena Harris – International Conference – Australasian Podiatry Conference
- Mandy Pagan – National Conference – 7th NZWCS National Conference
- Elaine Yelland – Post Grad Study
- Jane Edwards – Post Grad Study
- Christine Cumming – NZWCS National Conference registration
- Elizabeth Frost – NZWCS National Conference registration
- Jenny Phillips – NZWCS National Conference registration
- Teresa James – NZWCS National Conference registration
- Judith Geary – NZWCS National Conference registration
- Wendy Dragt – NZWCS National Conference registration
- Wendy Mildon – NZWCS National Conference registration
- Cathy Dickson – NZWCS National Conference registration
- Sharon Flynn – NZWCS National Conference registration
- Amanda Pressley – NZWCS National Conference registration
- Heather Johnson – NZWCS National Conference registration

2015/2016 Scholarships

The NZWCS will once again demonstrate its support for education and professional development of health professionals involved in wound management in New Zealand by providing 9 scholarship awards for 2015-2016. The scholarships available include:

- Four (4) awards of \$250 to attend a short course or study day on wound care,
- Two (2) awards of \$1000 for post-graduate study in Wound Management, and
- Three (3) awards of \$1000 to attend a National or International Wound Conference.

Scholarship applications will be open later in 2015 and members will be advised by e-mail and on the NZWCS website on when and how they can apply.

NZWCS AREA REPORTS

Area Coordinators and National Committee Members

The NZWCS relies on its Area Coordinators and National Committee members, who often work together, to hold regional evening seminars and study days as a way of keeping members and non-members up-to-date with the latest in clinical practice and knowledge in wound management. Area Coordinators and National Committee members undertake these roles voluntarily, putting a lot of their own time into the education events to run. Below is a list of current Area Coordinators and National Committee members, along with some regional highlights of NZWCS events.

Areas 1 & 2: Northland & Auckland

Committee Member / Prue Lennox

Area Coordinator: Liz Milner

The Auckland region has been involved in various national events over the last year. The goal being to raise the profile of the NZWCS.

We received another invitation from the Show Your Ability National Expo to present at the professional development sessions. This was a great opportunity to raise the awareness of the new international pressure injury guidelines, especially to OT's and PT's.

The Auckland branch coordinated the National Stop Pressure Injury Day in November. Thank you to the First Do No Harm and Northern Regional Alliance for their support. We will be supporting the event again this year, and look forward to seeing our DHB's and communities get involved.

Prue Lennox represented the NZWCS at the Moving and Handling Association national roadshow. This was a brilliant opportunity to engage with ACC and our multi-disciplinary colleagues and present Pressure Injury Guidelines -Advancing International consensus for Prevention and Management International Pressure Injury Guidelines across NZ, and raise the profile of the society. A very successful series of events.

Area Coordinator Liz Milner coordinates the post grad wound management paper at Auckland Uni. This paper is to be provided again in July 2015. The feedback was brilliant from 2013, with high calibre overseas speakers, and practical content this paper will solidify and expand your clinical management of wounds where ever you work. Contact Auckland Uni if you're interested.

The Area Coordinator role for Auckland and Northland is being voted on at the AGM, and we look forward to supporting a new coordinator into the region.

Prue and Liz

Area 3: Waikato

Committee Member: *Maria Schollum*

Area Coordinator:

The Waikato branch has continued to arrange education activities for the region with renewed gusto. This has been due to the enthusiasm and commitment of members helping to organise events.

Last year the branch hosted an education evening with a focus on pressure injuries which coincided with the International STOP pressure injury day. The evening was attended with 44 delegates with a mix from of hospital, community and aged residential facilities. The evening was well received and generated much discussion amongst the delegates. This evening would not have been able to come to fruition without the dedication from the members of the branch who have offered their energy and time, Julie Betts, Angela Carter, Jane Widdowson and Andrew Jones, thank you for your ongoing support and enthusiasm. We have two more events planned for later in the year, a session on Wound Assessment using TIME in July and another pressure injury evening to support STOP pressure injury day in November.

We still have a vacant position for the branch coordinator and I am hoping next year someone might take up the challenge of this position which I will happily provide support to. I have been in this role as a member of the National Committee for a year now and it has been a great learning curve and I look forward to the next year. A thank you to Julie Betts for supporting me in this role and for sharing your wealth of knowledge with myself and others.

Maria Schollum - National Committee Member – Waikato Branch

Areas 4 & 5: Rotorua/Taupo/BOP

Committee Member: *Rebecca Dawson*

Area Coordinators:

No activity has been recorded in this area.

Area 6: Manawatu/Wanganui

Committee Member: *Desley Johnson*

Area Coordinator:

Despite often hectic lives and busy schedules it is encouraging to see the continued interest and enthusiasm in wound care.

We are supported at a national level by the working groups on leg ulcers, pressure injuries and PHARMAC wound care. Thanks to all those who give their time and expertise to support these and other projects.

Locally, Area 6 membership remains stable with 28 full members and 2 corporate groups. We meet in either Palmerston North or Wanganui. In the last year we have held four meetings with education topics including 'Care of the patient with HIV', 'Update on Pressure Injuries' and 'Dressing products – old favourites, new products and advanced treatments'. These were generally well attended and it's always nice to finish off the evening with supper and discussion!

Unfortunately we didn't manage a study day in August 2014 as planned, but some from our area attended the day held by the Wellington branch. A study day for 2016 is being discussed.

I would also like to acknowledge the wound care companies for the provision of educational support at local and Australian seminars, and via webinars.

In closing, for Jeannette our administrator who does an amazing job organising the society and keeping us all up to date, a big thank you!

Desley Johnson – National Committee Member/ Area Coordinator

Area 7: New Plymouth/ Taranaki

Committee Member / Chris Gruys

Area Coordinator: Suzanne Smith

A lot has been happening in the Taranaki region over the last twelve months.

Suzanne Smith has become the new NZWCS area delegate and will be organising a NZWCS Saturday study day sometime after conference when ideas and topics are fresh and flowing.

The Clinical Nurse Specialist Wound role has been involved in a major ambulatory review in 2014-early 2015 resulting in the .5 position being increased into a full time role which Suzanne and I now job share.

Suzanne will be attending the conference AGM breakfast, and I am reluctantly an apology this year due to prior study commitments (apologies Suzie for not making it to Blenheim) however rest assured I will be thinking of you all and wish you every success for a fabulous conference in a stunning part of Aotearoa.

Locally we have been working on ways to bridge the gaps between primary and secondary sectors. We have a fairly sprawled out demographic area which can be challenging as we are managing increasingly complex patients in aged care and community settings.

Our focus has been to reduce the risk in populations at risk of developing pressure injuries; and also outcomes in our leg ulcer services.

Chris Gruys - National Committee Member

Area 8: Wellington

Committee Member: Kate Gray

Area Coordinators: Paula McKinnel & Kate Gray

Kate Gray has agreed to take over from Paula as the National Committee member whilst continuing to share the role as Area Co-ordinator with Paula. Our evening educational seminars have had good attendance from a wide group from both aged care sector; primary health; inpatient services; community health and podiatry. In the past year we have had presentations on Moisture Associated Skin Conditions which included Moisture Lesions and Incontinence Associated Dermatitis (Kate Gray) which was positioned to work with the recognition of the International STOP Pressure Injury day in November 2014. In March 2015 we had a presentation on the Impact of Medications on Wound Healing (Brendan Ng) which received excellent feedback from attendees. Our biggest event in terms of education was the Regional Study day held biannually in August 2014 which also received positive feedback. The theme was Managing Risk in Wound Care and topics included International Pressure Injury Guidelines and Managing Risk and Prevention (Emil Schmidt); Pressure Relieving Equipment (Sally Wallace); Risks associated with Surgery and Wounds including Long Term ACC (Darren Joe); Wound Assessment (Natalie Scott); Diabetic Foot and Risk (Fiona Angus); Wound Infection involving Osteomyelitis (Mr De Ridder). Our thanks to these speakers for their informative presentations and also their time.

We would like to take this opportunity to thank Jeannette Henderson Administrator for the NZWCS for her support in organising the study day and also to the continued support that the companies give us with our educational seminars.

Paula McKinnel and Kate Gray

Area 9: Nelson/Motueka

Area Coordinator: Sue Rossiter
Committee Member: Susie Wendelborn

Hello from sunny Nelson. The Heid-Pie series presented by Wendy White were well received by a small group of dedicated participants, all of whom did not miss one session. These were run over the year and I would like to acknowledge and thank the Public Health Organization in Nelson, for providing a venue and IT equipment, free of charge. This was always set up, ready to go and much appreciated. The feedback from the participants was positive and provided a forum for ongoing discussion around their own practice, enabling them to consider a more holistic approach to the individual with a wound.

Sue Rossiter - Area Co coordinator

Area 10: Canterbury

Committee Member: Pam Mitchell
Area Coordinator: Cathy Hammond

In Christchurch we have had very little opportunity to put on education this year. This has been for a number of reasons, the main one being we have all had other commitments. However, we are putting together some education for the second half of the year and hope to be able to announce these soon.

Cathy Hammond - Area 10 coordinator

Area 11: Dunedin

Committee Member / Rebecca Aburn
Area Coordinator: Anne Sutherland

Overall we have been involved in the wound care study days that are run through the surgical services department at Dunedin Hospital which our members are active in either attending or as speakers. During these study days we highlight the NZWCS purpose and goals. As a result there are 32 members currently. During the next year we hope to run a study day. We have 6 members being funded from various departments here at Dunedin to go to conference and this should provide some valuable feedback sessions to colleagues.

Rebecca Aburn and Anne Sutherland

Area 12: Southland

Committee Member: Mandy Pagan

Area Coordinator: Joanne Hunter

The purpose of this report is to outline the activities of Area 12 over the last 12-months. Area 12 is represented by healthcare professionals working in primary and secondary healthcare settings and across private and public health sectors. Membership includes podiatrists, district and practice nurses, and nurses working in public hospitals and in aged care.

The Primary Health Special Interest Group (PHSIG) in Southland incorporates Area12 members who are invited to attend educational sessions.

Activities:

Ongoing emails of latest updates and articles of interest. This has included the recent publication of the international clinical guideline on the Prevention and Treatment of Pressure Ulcers, promoting STOP pressure injuries day with distribution of posters, 3m Skin Integrity Newsletter, Wounds International: Incontinence Associated Dermatitis and promoting the NZWCS 2015 Wound Conference. In addition the six Wendy White Wound Webinars have been re-run for members to attend including a session on family violence and screening.

Area 12 members are invited to attend practical wound care training via the Southland Hospital Outpatient Wound Clinic.

A special thanks to Jo Hunter for her assistance over the years and who sadly will be stepping down from this role. Thank you also to the Area 12 members for your passion and interest in wound care; I anticipate our future continued contact and working relationships will continue to flourish!

Mandy and Jo – National Committee member and Area Coordinators

Area 13: Hawke's Bay

Committee Member / Wendy Mildon

Area Coordinator:

Here in sunny Hawkes Bay our membership consists of podiatrists, District nurses, nurses in the acute hospital, practice nurses as well as those nurses who work in aged residential care all with an interest in wound care.

The past year has flown by....there have been many challenges. Wound education sessions have been held at the local hospital to which not only the hospital staff attend but also those from the primary sector and aged care.

We have continued to promote the STOP Pressure injuries day in November and this year it is hoped that we will be able to schedule an evening education session about pressure injury prevention and staging.

Many thanks to all the members for your continued interest in wound care and I look forward to our ongoing contact and working relationships

Wendy Mildon – National Committee members and Area Coordinator

FINANCIAL REPORT

Treasurers Report 2015

The following financial statements are from the most recently financial accounts of the New Zealand wound Care Society prepared by Keogh McCormick, Chartered Accountants for the financial year ended 30 June 2014. Included are the finances from June 2014- to 30 April 2015

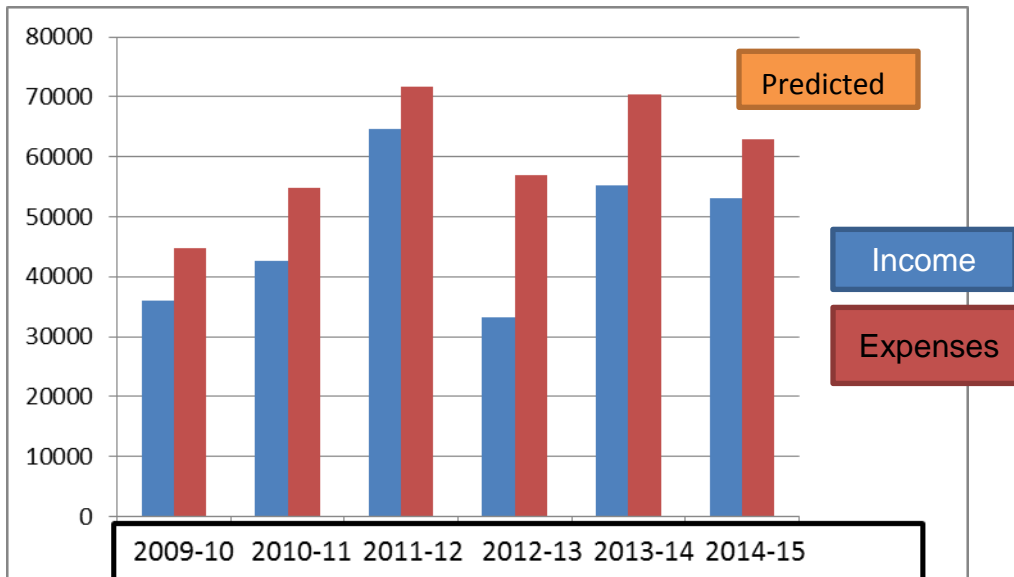


The top 7 Expenditures for the financial year 1 July 2013 – 30 June 2014

1. Accountancy fees	\$ 4,995	\$ 2,432.22
2. Administration Fees	\$20,042	\$16,551.30
3. Postage	\$ 9,344	\$ 479.65
4. Telephone and tolls	\$ 8,382	\$ 2,776.12
5. Printing fees	\$ 8,565	\$ 5,377.40
6. Travel expenses	\$ 3,949	\$ 6,589.34
7. Scholarships	\$ 6,686	\$ 4,000.00

July 1st 2014 to 30th April 2015

The society is investing money to advance practice and knowledge of our members and colleagues through scholarships, e-Journals education and webinars. We are also working with updating policy and guideline development nationally and internationally, specifically PUAG and LUAG.



The predicted gap is decreasing between expenditure and income this is very positive. It is due to the National committee reducing postage and related costs for shipping the magazines from Australia. . The Society will still have to pay our affiliation fees to AWMA (approx. \$10,000 AUD)

Profit & Loss			
New Zealand Wound Care Society			
1 July 2013- 8th May 2015			
	8th May 15	30 Jun 14	30 Jun 13
Income			
Other	\$13,134.55	\$46.00	\$50.00
Seminars/workshops/courses	\$7,336.00	\$4,325.70	\$29,143.42
Sponsorship	\$0.00	\$7,822.10	\$0.00
Subscriptions	\$15,035.00	\$32,975.00	\$32,012.00
Trade Display	\$0.00	\$0.00	\$3,680.00
Total Income	\$35,505.55	\$45,168.80	\$64,885.42
Gross Profit	\$35,505.55	\$45,168.80	\$64,885.42
Plus Other Income			
Interest Received	\$2,482.50	\$2,193.73	\$2,882.77
Share of P'ship - NZWCS Conference Joint Venture	\$0.00	\$7,954.00	\$34,593.00
Total Other Income	\$2,482.50	\$10,147.73	\$37,475.77
Less Operating Expenses			
Accountancy Fees	\$2,432.22	\$4,995.35	\$3,933.66
Administration Fees	\$16,551.30	\$20,042.10	\$15,309.21
Audit Fees	\$40.00	\$503.02	\$4,300.61
AWMA affiliation fees	\$10,216.28	\$0.00	\$37,716.56
Bank Charges	\$431.85	\$317.15	\$403.60
Depreciation	\$0.00	\$406.00	\$236.00
Postage	\$479.65	\$9,343.46	\$5,792.32
Printing Expenses	\$5,377.40	\$8,565.37	\$2,286.20
Scholarships	\$4,000.00	\$5,290.45	\$8,000.00
Seminar Expenses	\$3,441.85	\$6,685.69	\$31,065.96
Stationery	\$471.18	\$887.76	\$19,484.28
Sundry Expenses	\$6,589.34	\$459.63	\$51.11
Teleconference Expenses	\$2,776.12	\$8,382.29	\$6,412.91
Travel Expenses	\$0.00	\$3,948.74	\$0.00
Website Expenses	\$423.19	\$672.37	\$226.95
Total Operating Expenses	\$53,230.38	\$70,499.38	\$135,219.37
Net Profit	-\$15,242.33	-\$15,182.85	-\$32,858.18

- AWMA affiliation fees in 2013 of \$37,715.56 NZD was a back pay from previous years as was the \$10,216 in 2014, therefore, we can expect another fee payment for this next financial year.
- Postage has dropped dramatically as we are not importing and forwarding magazines shipped from Australia.
- Seminar expenses have dropped over the last few years.
- Teleconference costs have dropped as we have sourced a better deal from telecom.

- Sundry expenses show reimbursements to companies supporting Stop PI day and sending delegates of LUAG to AWMA meetings (flights and accommodation).

Charitable Trust Changes

Charitable trust will be similar to how we are currently are reporting our yearly accounts with the accountant. There will need to be a statement of service that explains what we did and the outcome of these activities. As we have total operating expenses of less than \$125,000 per year we are on their **Tier 4 cash based accounting** which includes financial and non-financial information.

The Statement contains five sections:

1. Entity information - Who we are? Why we exist? (rules, documents, mission statements etc.)
2. Statement of Service Performance- What we do? When we do it? (Activities Reports)
3. Statement of Receipts & Payments – What did it cost? How was it funded? (accounts)
4. Statement of Resources & Commitments - What do we own? What do we owe?
5. Notes to support the information in the Performance Report (Information that helps understand the charity)

The Balance Date for the Charitable Trust is 1st July 2015 – 30th June 2016 and the report to the Charitable Trust is due in December 2016.

**Rebecca Aburn RN MN
Treasurer
New Zealand Wound Care Society**



NEW ZEALAND WOUND CARE SOCIETY

The New Zealand Wound Care Society Incorporated
Annual Report 2014 - 2015
Prepared by Emil Schmidt, NZWCS President

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