



Welcome

Greetings and welcome to the first Tissue Issue newsletter for 2011!

At present we still require editors for the newsletter. In the absence of nominees the national executive asked at the end of last year, that branches volunteer to take turns at providing material for publication of the newsletter, hence the Waikato branch of the society brings this issue to you.

Again, heartfelt sympathy and condolences go to our colleagues and their families/whanau affected by the recent earthquake in Christchurch. Too soon it is time for many to rebuild their homes and lives in circumstances that hold no certainty. It is heartening to witness the nation's spirit and generosity in supporting the people of Christchurch in overcoming such devastation and tragedy.

Many of you will be aware the venue for the NZWCS conference was irretrievably damaged during the earthquake, necessitating a change of venue and dates for the conference, now to be hosted in Dunedin in November. Let's demonstrate our support to our Christchurch colleagues organising the conference by attending the NZWCS conference in Dunedin.

Tena Koutou Tena Koutou Tena Koutou Katoa

Julie, Anna and Angela (Organising Committee, Waikato Branch, NZWCS)

President's Report

Well the most important event of the past two months has been the major earthquake in Christchurch. Not that events in Japan can go unmentioned, but for the Society the aftermath of the Christchurch disaster has meant a considerable amount of work for the Conference Committee. Not only have Dawn and Val been coping with the earthquake (including Val running the Health Care NZ district nursing service from her house!), but they and the rest of the Committee have been working hard to find a new venue, revise dates, change the programme and secure speakers.

Fortunately, we can report that a great deal of progress was made in a very short space of time with emergency meetings and e-mails. As you will all now know we have had to relocate and postpone the conference, which will now be from the 2nd to the 4th of November at the (soon to be completed) Forsyth Barr Stadium in Dunedin. We can also confirm that our three keynote speakers have been able to move dates so they can all still attend. We are now working on the more detailed issues like the programme, local invited speakers and accommodation.

Unfortunately, because of the change in conference dates, we will now have to hold the AGM by teleconference. This has been scheduled for Tuesday

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What is the New Zealand Wound Care Society?

The 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.

Currently there are fourteen branches New Zealand-wide. Each has an area coordinator and a national committee member. The area coordinator is responsible for coordinating meetings and seminars for the local branch members, while the national committee member represents each branch at a national level. In some areas these duties are undertaken by the same volunteer.

For more information & membership forms visit:

www.nzwcs.org.nz

The views expressed in this newsletter are not necessarily the ones held by the New Zealand Wound Care Society.

the 17th May at 7pm. Your Area Coordinator will be arranging a local venue for members to meet and call in for the teleconference. We will be voting for Society positions that are ending their term or currently vacant. Nominations closed at the end of March and we will be sending out voting information very shortly.

Our first round of research grant applications is now closed and we have received one application. This is now being reviewed by a Scientific Advisory Committee.

Best wishes

Wayne Naylor President, NZWCS

A successful start to the year!

We have, after a seven year abstinence, again hosted a wound care seminar to kick-start our 2011 education calendar for members of the Waikato branch of the NZ Wound Care Society.

The day long seminar was held at the Kingsgate Hotel in Hamilton. When our registration of delegates reached one hundred we were relieved to have had the foresight to book such a large venue! Delegates came from near and far including Waikato, Bay of Plenty, Auckland and Taranaki regions. The audience predominantly consisted of nurses with a healthy smattering of podiatrists from a variety of clinical settings including aged residential care, primary care and hospitals.

Dr Andrew Jull set the scene for the day with an opening address regarding ethics and professional accountability in practice, including the role of evidence in decision making and informed consent in wound care.



Dr Andrew Jull, Keynote Speaker

The remainder of the day was taken up with a mixture of concurrent sessions and workshops covering topics including nutrition, lymphoedema, negative pressure wound therapy, the diabetic foot, pressure ulcers, wound care products, wound bed preparation, and vascular assessment and diagnosis of leg ulcers.

For those people who may be interested, presentations from the day are available online from the NZWCS website: <http://www.nzwcs.org.nz/>.

The day was well supported by product companies including Smith and Nephew, Convatec, USL, Bamfords, 3M, Nutricia, Molnlycke and InterMed, who made the day possible due to their sponsorship — thank you.

Highlights of the day included the food — always important to get that right — delegate interest and interaction at the trade displays — great bandaging demos 3M — the quality of the speaker presentations and the scramble to find the spot prizes at the end of the day!



Jen Rothwell from 3m demonstrates bandaging to district nurses

Providing this type of education only happens with the support and goodwill of a lot of people. Thank you to the delegates for attending, the presenters who said yes and enabled us to put together an interesting and relevant program, the companies who sponsored the day and lastly, the Waikato branch co-ordinators Anna Campbell and Angela Carter whose behind the scenes work ensured the day ran smoothly.

Julie Betts, Waikato Branch Committee Member



The Venous Leg Ulcer Development Guideline Committee Update

As many of you will be aware from previous correspondence, specialist health professionals from New Zealand and Australia are developing the Australia and New Zealand Clinical Practice Guideline for Prevention and Management of Venous Leg Ulcers.

Response to the consultation has been good with some very useful feedback. Thank you for all those of you who gave up their time to critique the document providing us with your opinions on how this guideline can best serve our people. It was heartening to see such an excellent response from New Zealand. Our next stage in the process is developing user-friendly tools from the guideline to assist in your everyday practice.

In the February issue of *Kia Tiaki* a short article providing an overview of the work the NZWCS Leg Ulcer Working Party have achieved over the past two years in the development of a leg ulcer assessment tool, Venous Leg Ulcer Pathway and development of the Clinical Practice Guidelines.

With this issue you will see the notice for the launch of the Inaugural Pan Pacific Pressure Ulcer Forum and Venous Leg Ulcer Forum on 15–17 October 2011 to be held in Canberra, Australia.

We hope we will see some of you there.

Mandy Pagan, Chair LUAG

Diabetic Foot Ulcer working Group Update Feb 2011

This group was formed to investigate the available forms for assessing a Diabetic foot wound and to develop forms that could be adopted for use in New Zealand.

Two forms will be developed: one for use in Primary care by practice nurses, GPs and podiatrists etc, the second form which will be an expansion on the first for secondary care situations.

To date the stocktake of available forms from both NZ and the rest of the world have been reviewed and the criteria for the two forms will be developed over the next couple of months so that the requirements of both forms can be defined and critiqued by the group.

Leigh Shaw, Specialist Podiatrist BOPDHB

Advanced Wound Care Practitioners Forum — November 2010

The Advanced Wound Care Forum was held in Auckland on 24/25 November 2010 & hosted by InterMed Medical Limited. Christine Mann, Clinical & Education Training Manager from KCI-Medical, Australia facilitated the day sharing her vast wound care knowledge & experience and encouraging discussion from the experienced group of nurses who attended.

Christine was very experienced in the use of topical negative therapy (TPN) and had recently returned from China where VAC Therapy was being introduced. She shared her experiences of introducing a new concept into a country where the nursing & medical staff spoke no English & she did not understand or speak Mandarin. She apologised when her phone rang during one session stating 'it was China & she was on call'. She described this as 'an interesting but challenging situation'.

Approximately 16 tissue viability nurses from a range of DHBs throughout NZ and from the NZWCS attended this forum. Many came from hospitals where complex operations & complicated traumas were common and the use of VAC Therapy in these situations was thoroughly

discussed & debated eg the challenges of Abdominal Compartment Syndrome and Enterocutaneous fistulas. Christine demonstrated how a fistula could remain patent by inserting a catheter into the opening; using an Eakin seal to secure it, the Granufoam & drape could then be placed into the wound cavity. She had many photos, hints & tips to demonstrate advanced practice.

Of particular interest was the session from the Wound Specialist Nurse from Counties Manakau who was developing a risk assessment tool to identify patients at risk of surgical dehiscence. More than one risk factor greatly increased the risk of dehiscence, eg diabetes, obesity, increased wound pain. She is currently looking for DHB's to participate in a research project. This generated a lot of discussion with many nurses willing to participate however the group decided this would be better raised at the next NZWCS meeting/conference to ensure a broader group of subjects.

In another session Christine discussed the use of TNP under compression bandaging to heal leg ulcers; a common problem that is increasing in NZ as the elderly

population grows. The wound specialist nurse from Christchurch shared her research and experiences with TNP under Coban2. Their objective in the beginning was to identify patients with non healing ulcers and to see if alternative treatments could be tried. They completed a holistic assessment of the patient and a specific Leg ulcer assessment using the new NZWCS Leg Ulcer assessment form. The plan was to use compression bandaging, which is the gold standard treatment for leg ulcers, but this time to try VAC therapy as the interface dressing.

They reported this as being successful in achieving wound healing in a timely manner; it was cost effective, patient friendly and had been managed at home by the District Nurse.

We may not have the very complex patients that larger hospitals treat but we are in line with other DHBs in our appropriate use of VAC therapy for inpatients and patients in the community. A number of nurses were interested in the new VAC therapy dressing bank we have recently introduced and saw this as a cost effective benefit.

Diabetic foot ulcers and pressure areas were topics discussed on day two; again very informative and very relevant to patients in the BOPDHB. These were very interactive sessions with a lot of knowledge being shared and individual cases discussed.

There are new innovations in VAC therapy machines currently being trialed in the United States.

VAC VIA is a single use, small portable system with pressures of 75–125mghs that can be used for mesh grafts. Once it is applied to the graft site it is left insitu for five–seven days before being removed and disposed of. It is said to be cost effective; an interesting concept and we look forward to seeing it, maybe at the NZWCS conference in November 2011.

This forum was informative and valuable to our practice; especially the networking which carried on through breaks and into the evening where we discussed and shared experiences and even managed to solve some problems.



Topical Negative Pressure Therapy demonstration

Diane Hishon, Tauranga Hospital

Lyn Dalton, Whakatane Hospital

Pan Pacific Pressure Ulcer Forum & Venous Leg Ulcer Forum



Date: October 15–17, 2011

Location: Canberra, Australian Capital Territory, Australia

Venue: Rydges Lakeside

Further information:

www.panpacificulcerforums.com.au

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NZWCS National Committee & Area Coordinators

Wayne Naylor — President
Pam Mitchell — Vice President

Auckland: Vacant

Waikato: Julie Betts — Committee Member, Angela Carter & Anna Campbell — Area Coordinators

Rotorua/Taupo/Bay of Plenty: Diane Hishon & Lyn Dalton — Committee Members & Area Coordinators

Hawke's Bay: Leonie Smith — Area Coordinator & Committee Member

Manawatu/Whanganui: Desley Johnson — Committee Member & Ros Mead — Area Coordinator

Taranaki: Chris Gruys — Area Coordinator

Emil Schmidt — Treasurer

Jeannette Henderson — Administrator

Wellington: Paula McKinnel — Committee Member & San Gerrys — Area Coordinator

Nelson/Marlborough: Susie Wendleborn — Committee Member

Canterbury: Val Sandston — Committee Member

Otago: Emil Schmidt — Area Coordinator

Southland: Mandy Pagan — Committee Member & Area Coordinator

See the NZWCS website Committee and Coordinators page for contact details of the National Committee members and Area Coordinators.