

IIWCG: a platform to develop the next generation of wound care leaders

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The International Interprofessional Wound Care Group (IIWCG) is based in western Asia. The purpose of the organisation is to provide a platform and scientific outlet for the International Interprofessional Wound Care Course graduates to continue with small-scale research in their own workplaces after course completion. Furthermore, it aims to help graduates to continue using small interventions to make a positive difference in the provision of wound management at the bedside. The IIWCG course assists graduates to initiate, lead and conduct the needed system changes within workplaces, simply by translating and incorporating best wound-related evidence into small day-to-day activities around the bedside of patients who need wound-related interventions.

Our members are spread out over the whole region, in the United Arab Emirates (UAE), Saudi Arabia, Bahrain, Oman, Kuwait, Qatar, Pakistan and India. The continent of Africa is not forgotten and there are members actively working in South Africa, Nigeria, Ethiopia, Rwanda and Kenya to learn from each other, share successes and create interprofessional teams for wound care service delivery to be as cost-effective as possible, while still adhering to internationally accepted best evidence-based principles.

Through course Selectives (small research studies) that are aimed at learning scientific investigation on a small scale, we have found that many of those Selective initiatives continue within the clinical settings of graduates, due to the immediate positive impact made. Many of the achieved and reported on wound-related process changes in hospitals, clinics and primary care centres started as small bottom-up studies for the course that, through an approval process including respective executive administrations, led to the implementation and testing of change initiatives in those settings. Many of those have led to immediate policy changes and subsequent guidelines being developed for the institutions.

The prime examples of successful IIWCG interventions are found in pressure injury (PI) prevention initiatives within hospitals and centres accommodating in-patients in their care loads. As a result of many Selective projects focusing on this

problem over many years, and each making a small change within their own setting to limit PIs, proactive change has occurred across the region with active daily pressure injury risk assessment processes in place. Subsequently, auditing of PI incidence and prevalence of hospital-acquired PIs is now the required process that must be adhered to. It has escalated so far in the UAE, that the Health Authority now requires hospitals to report incidences of hospital-acquired PI as part of their quarterly feedback system. This level of accountability is actively spreading throughout the region to become a benchmark in the establishment of patient-safe environments on all levels for patients with skin vulnerabilities.

The beauty of these interventions is that multiple small changes over time have led to combined and much better outcomes, without being too expensive or logistically difficult to implement. These grassroots initiatives are the lifeblood of IIWCG. The reason we continue to, formally teach doctor-nurse-allied health teams together, train carers and empower patients through simplified interventions. All these actions have helped to support challenging changes, such as incorporating systematic assessment and risk documentation into the electronic medical documentation systems to improve the accuracy of audit data. The mere presence of documentation that simultaneously leads to data generation, has changed practice even in the more difficult care environments where a lot of resistance to change was previously present. In this manner, formal evidence is translated into fun initiatives as a sustainable transfer of knowledge process, spreading right down to the care level of patients with wounds.

The Abu Dhabi Wound Care Conference, the yearly flagship celebration and reporting platform for initiative outcomes of IIWCG members, recently took place at the Abu Dhabi National Exhibition Center (ADNEC) in Abu Dhabi, UAE. One aim of the conference was to develop new leaders, so that this next generation of health professionals can use evidence correctly and make that evidence applicable to their own particular patient populations, while they address patient needs in a holistic manner. At this conference, the development of new leaders is what we celebrate, while those who are still struggling towards outcomes, can find helpers, answers, and new plans for next year. What more can we wish for!