



## Newsletter

August 2019

This newsletter summarises recent activity and highlights ongoing or imminent consultations with the Stakeholder Forums. All consultation will be through the Stakeholder Forums – to sign up visit [www.nationalwoundcarestrategy.net](http://www.nationalwoundcarestrategy.net)

The NWCSP is aiming to be as open and transparent as possible. Information about the programme, including the membership of the NWCSP Board, Workstreams and Stakeholder Council, can be found on the NWCSP website. [www.nationalwoundcarestrategy.net](http://www.nationalwoundcarestrategy.net)

### Stakeholder Forums

We have now recruited over 800 stakeholders to the Forums but still have only a small number of patients and carers. If you know anyone who would be interested, please encourage them to register at [www.nationalwoundcarestrategy.net](http://www.nationalwoundcarestrategy.net)

The membership of the Stakeholder Council is currently under review. More information will be shared following the September NWCSP Board meeting.

### Patient Public Voice

We have identified funding to allow us to recruit a Patient Public Voice (PPV) Partner for the NWCSP Board and one for each of the clinical workstreams. We will soon be advertising these roles on the NWCSP website, and through the NWCSP Stakeholder Forums and social media.

Please spread the word and if you (or someone you know) would make a great PPV partner, please consider applying.

### Clinical Workstreams

The **Lower Limb** workstream consultation on the draft clinical navigation tool (CNT) revealed strong support for the proposals along with some useful suggestions. The workstream are now finalising the CNT (which will be posted on the website) and developing recommendations for education, workforce and key performance indicators to support implementation of the CNT. These will go out for consultation.

The **Surgical Wounds** workstream continues to develop a CNT for surgical wound management across primary secondary and community services. Thank you to those who have shared such 'pathways' from their areas of practice. The draft CNT will be going out for consultation.

The **Pressure Ulcer** workstream is focusing on developing recommendations around improving data collection, selection of based risk assessment tools and pressure ulcer prevention in community settings.

### Enabler Workstreams

The **Education and Workforce** workstream has collated a list of university courses which will be published on the NWCSP website. The consultation showed that stakeholders would welcome a suite of online free-to-access modules. A few such modules on pressure ulcers have been identified and will be made available through the e-Learning for

Healthcare website [www.e-lfh.org.uk](http://www.e-lfh.org.uk)  
Further work and funding will be needed to develop / adopt modules on other topics.

The workstream has also identified several sets of wound care related capabilities / competencies. These are now being considered with a view to developing a suite of multi-professional, multi-level capabilities/ competencies.

The **Data and Information** workstream held a very successful event with industry to share its ongoing work. The event focussed on digital applications for supporting wound care. The Data and Information workstream shared its work to date about the features required of point-of-care data-capture mobile technology. ORCHA <https://www.orcha.co.uk/> gave a presentation discussing the regulatory framework for health care apps and there was also an update on the Wound Care Sector Deal Project.

The **Research Evidence** workstream is developing recommendations for evidence standards for clinical effectiveness of wound care products. These are likely to mirror the NICE criteria proposed for Tier 3b evidence for Digital Health Technologies  
<https://www.nice.org.uk/Media/Default/About/what-we-do/our-programmes/evidence-standards-framework/digital-evidence-standards-framework.pdf>

The reconfiguration of the **Supply and Distribution** workstream continues. Unfortunately work pressures mean that Stuart Lakin has had to step down from

leading this workstream so we are pleased to welcome Stephanie Rose to take his place. Steph is recruiting a team of clinicians with expertise in medicines optimisation, procurement, systems of supply for wound care products. This group will develop recommendations about the principles of good practice for systems of supply and distribution of wound care products. Alongside this, an expert clinical group consisting of tissue viability nurses from all NHS England regions from both acute and community providers plus representation from the College of Podiatry has been convened. This group is developing a matrix to support good clinical decision making about product selection and contributing clinical expertise to NHS partners' work around the development of wound care product specifications for procurement.

(It should be noted that the NWCSF is not responsible for tendering or procurement processes for wound care products, work to review NHS procurement approaches or primary care prescribing system policy. Comments about these should be directed to the relevant organisations i.e. Department of Health and Social Care [appliances@DHSC.gov.uk](mailto:appliances@DHSC.gov.uk) or NHS Supply Chain [capa@supplychain.nhs.uk](mailto:capa@supplychain.nhs.uk).

### Thank you

The last few months have been particularly busy and challenging so thank you to everyone who is contributing, whether through the Board, a Workstream or a Stakeholder Forum. Your help is really appreciated.

Dr Una Adderley RN, QN  
Director- NWCSF

You can keep up to date at: [www.nationalwoundcarestrategy.net](http://www.nationalwoundcarestrategy.net)

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