

EDUCATION NEEDED FOR HEALTH-CARE PROFESSIONALS TO PREVENT AND TREAT WOUNDS

RECOMMENDATION: Wounds Canada urges the Government of Ontario to help educate health-care professionals on best practices in wound prevention and management by providing \$810,000 annually in funding for 3,000 individuals to fill 4,400 course registrations through the Wounds Canada Institute.

Wound care costs Ontario at least \$1.5 billion annually. With proper education in best practices, wound care costs would be reduced by improved patient outcomes and experiences.

- Wounds come in many levels of severity. Many are preventable. Some are simple and heal quickly on their own. Others that should heal quickly become complex because of patient factors or inadequate treatment.
 - A small percentage, usually in patients with multiple health issues, can take years to heal, if they heal at all, unless treated by an expert interprofessional team.
- Improved clinician knowledge about appropriate early interventions would reduce the number and severity of all types of wounds.

The Wounds Canada Institute offers accredited and cost-effective education programs

- Wound care is often treated as a specialty, when in fact wounds are everywhere and often go undetected, even when patients are in long-term care homes, hospitals or doctors' offices. Unfortunately, many health-care professionals are not properly trained to identify early-stage wound-related issues and do not know how to treat wounds or where to refer patients.
- There is demand for greater education: For example, there are over 170,000 registered nurses and registered practical nurses in Ontario, yet minimal training for wound care is provided in their schooling, even though they often provide wound care on a daily basis.
- The Wounds Canada Institute has been working to address this issue by providing affordable online courses and in-person skills labs across Ontario to a wide range of health-care professionals, from nurses and family doctors to chiropodists and surgeons.
- Wounds Canada urges the Government of Ontario to expand the availability of these programs. An investment of \$810,000 in one year would allow 3,000 health-care professionals to access 4,400 spaces in a wide range of programs.
 - The online component allows flexibility to professionals who can take the program from home or office as their schedules allow. The skills lab programs, which require onsite attendance by clinicians, can be scheduled strategically and in locations to best serve the needs of Ontario's clinicians.
 - If there is demand, the programs can easily be scaled up to accommodate more students.

Example of education programs available to health care professionals with annual funding:

Timeline	Program	# of participants	Cost
Months 1–12	Best Practice Approach to Skin Health and Wound Management: Knowledge program (A100MNN)	3000	\$491,550
Months 3–12	Best Practice Approach to Skin Health and Wound Management: Knowledge and Skills program (A100NWS)	300	\$96,615
Months 4–12	Focus on the Prevention and Management of Pressure Injuries: Knowledge (A102MWN)	100	\$5,650
Months 4–12	Focus on the Prevention and Management of Surgical Wound Complications: Knowledge (A103MWN)	100	\$5,650
Months 4–12	Focus on the Prevention and Management of Skin Tears: Knowledge (A104MWN)	100	\$5,650
Months 4–12	Focus on the Prevention and Management of Diabetic Foot Ulcers: Knowledge (A101MWN)	100	\$5,650
Months 4–12	Focus on the Prevention and Management of Diabetic Foot Ulcers: Knowledge and Skills (A101MWS)	200	\$64,410
Months 4–12	Focus on the Prevention and Management of Venous Leg Ulcers: Knowledge (A105MWN)	100	\$5,650
Months 4–12	Focus on the Prevention and Management of Venous Leg Ulcers: Knowledge and Skills (A105MWS)	200	\$64,410
Months 4–12	Holistic Approach to Diabetic Foot Offloading: Knowledge and Skills (A108MWS)	200	\$64,410
			\$809,645

An educated general health-care force = earlier identification of risk for wounds or problems with existing wounds, leading to:

- Fewer wounds (focus on prevention)
- More efficient allocation of health-care resources (more for high-risk patients, fewer for low-risk)
- Reduced wound-related materials costs (dressings, antibiotics)
- Reduced clinician time (fewer dressing changes, specialist appointments, home care visits)
- Reduced rates of complications (fewer emergency department visits, hospital stays, severe disabilities, deaths, lawsuits)

The Result: Health-care cost savings, reduced suffering and better patient health