

# Does wound care in the UK have a future?

For those of us who have been in wound care for some years and can recall the heady days of the late 1980s and early 1990s the current wound care environment comes as a shock.

For it appears that the days of expansion are firmly over – 20 years ago funding, primarily through the commercial sector, was readily available and almost overflowing. The ready access to commercial support saw the birth of several specialist associations while the already established Tissue Viability Society enjoyed sustained growth year on year.

New posts were created and the number of clinical nurse specialists in tissue viability and wound care grew from under 20 to many hundreds in the space of a few years. Educational events proliferated and it looked as though wound care was firmly on the map and the expectations were that this new specialty would continue to grow and develop with few limitations to give us concern.

## A growing crisis

But as we enter the mid years of this first decade of a new millennium, wound care faces a growing crisis. In part we should have seen this coming – the UK wound care market was always going to become a mature commercial environment with limited annual growth and we were always going to reach a time where the NHS would want to control suppliers, products and their costs.

These twin drivers mean that commercial funding for wound care education becomes scarce and we as a wound care community must learn to adapt to these new conditions or, like the dinosaurs, face extinction.

If the changes in our market were not bad enough, local control of NHS budgets has eventually led to the awareness of the financial deficits many organisations face. For once these deficits are resulting in action with one obvious result – NHS employees are losing their posts. To what extent will the large cohort of tissue viability nurses escape this reduction in staff numbers?

So times appear bleak with little signs of recovery and growth in the short term. This is not just a case of being overly pessimistic, but simply reflects a changing environment in which we function.

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## Preparing to safeguard the future

So what do we need to do now to safeguard a future for wound care in this country? One thing we must do is to accept that times have changed and we need to look to a different future. If we are to thrive again once (and if) conditions change we need to put a number of steps in place. For too long we have looked to the commercial sector and challenged them to provide the evidence that their products and services are efficacious.

The lack of such information now leaves many commercial organisations unable to defend their products in the face of challenges from generic or low unit cost alternatives.

This failing may cost companies and their shareholders much but we cannot be complacent, for we too failed to safeguard our interests. Where is the evidence that our drive and passion for wound care education has improved patient outcomes? And where are the studies that demonstrate the cost-effectiveness of our models of service delivery – including the value of the specialist wound care nurse?

These gaps make it harder for us now to justify the current investment in wound care education and staffing. If we are to take full advantage of our environment as it changes and grow wound care once again in the UK then we need to be able to answer these questions.

If the environment does not improve then holding the answers to these questions may well mean the difference between the survival or extinction of wound care as we currently know it to be – people with wounds will continue to present in all health care settings but education, organisations, journals, conferences and specialist staff may not be around to help them!

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Editor

This issue of the *Journal of Tissue Viability* features more material reproduced from the out-of-print book *Bedsore Biomechanics*. As mentioned previously, the original illustrations/photographs have been lost over time and the production team has reproduced these from the original pages of *Bedsore Biomechanics*, with consequent effects on the quality of the illustrations.