



↳ **The "Your Turn" campaign**

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—Editorial—

As we enter the summer months we have much to look forward too in the remainder of the year - the European Pressure Ulcer Advisory Panel (EPUAP) meeting in Berlin in late August followed closely by the European Tissue Repair Society (ETRS) conference to be held in Pisa in mid September. Then the focus shifts back to the UK with a one day symposium to mark the 25th Anniversary of the Tissue Viability Society in October and then the Wounds UK conference in November. Although there remains much to look forward too plans are well afoot for the major events of 2007 and perhaps for the very first time all three major European groups (EPUAP, ETRS and the European Wound Management Association (EWMA)) will all host their annual meetings here in the UK. This should act as a major reminder of the central importance of the UK and its clinicians and researchers in wound care across Europe and the rest of the world. However while the UK remains a key focus for wound care and tissue viability internally we remain disjointed split into several small societies and associations each with limited influence with the public, the politicians and the professional community. This is a historical development that sadly is mirrored in too many

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countries where groups have developed without any real recognition or focus upon strategic goals such as gaining a higher profile for wounds. Perhaps the bringing together of the major European groups next year here in the UK provides an impetus for all of us to review what would be in the best interests of the wound care and tissue viability communities? One starting point for such discussion is the willingness of key societies such as the Tissue Viability Society, the Leg Ulcer Forum, the Scottish Tissue Viability Nurses Association, and the Tissue Viability Nurses Association to come together to participate in the EWMA conference to be held in Glasgow in early May 2007. One consequence of this participation is that there will be no spring meeting of the TVS in 2007 to prevent unnecessary duplication of tissue viability conferences in the first part of 2007. Another example of a current collaboration between associations is the 'Your Turn' campaign which is highlighted in the news pages of this newsletter. Let all of us build upon these collaborations and look to the future to explore what is in the long-term best interests of the tissue viability community and its patients.

Michael Clark
Editor

▾ **The Your Turn campaign**

The prevention of pressure damage is a topic that concerns all of us working in wound care. As patient advocates we strive to provide best care and argue for resources and recognition of the problem. Despite evidence such as the Bennett et al paper, (2004) that estimated the cost of pressure damage in the UK is in excess of £2.1 billion, the true cost of pressure ulcers go unnoticed.

One of the main reasons for this has been our relative failure at publicising the issue. True, there are countless articles written in the healthcare journals on the prevention, management and treatment of pressure ulcers but how many people in the street even consider the problem? How many people recognise they are at risk, and how many women entering a maternity unit would consider they might leave the unit not only with a "little bundle of joy" but also a wound that might take months to resolve?

If we are to raise the profile of pressure ulcer prevention and therefore the pivotal role that our personal endeavours have in their prevention and management we need to engage with those with the greatest voice and those whom it affects the most; the general public. This approach not only supports what we as clinicians have been trying to achieve, but is part of the recent NICE guidance (CG29) that has as a central element the need to inform and work with patients and carers.

The Tissue Viability Society, the Wound Care Society and Tissue Viability Nurses Association have joined forces in supporting an awareness campaign designed to inform the public about the problem, raise awareness and provide patient access to appropriate specialist advice and services. The campaign is not purely focussed at primary or secondary care, but is designed to be accessible to anyone who is at personal risk of pressure damage or who is caring for someone in that category. Even the title of the campaign has been considered at great length. "Your Turn" not only refers to the need to reposition for pressure relief, but has been chosen to prompt patients and carers to take ownership of the problem, and empower individuals to play their part in pressure damage prevention.

"Your Turn" is not going to be a "quick-fix" approach, but a long-term campaign.

Developing the campaign strategy has been a drawn out and difficult process but the first steps are now underway. The "Your Turn" website was launched this week. www.your-turn.org.uk provides basic information on what pressure ulcers are, how they affect individuals and how they can be avoided. It also prompts the viewer to seek further specialist advice if they have concerns. This is only the first part of a campaign that will eventually involve all of us. It is hoped that media attention, (and we will be targeting newspapers, magazines and journals) will prompt the inclusion of pressure damage prevention in future Government healthcare strategy. From this perspective, the campaign is similar to the raised media profile that MRSA has achieved in recent times.

All of those involved in helping to set up the campaign are aware that there could be a backlash from making the public aware of the issue. Dr Mike Clark, whom many of you will know personally and is recognised as a world authority on pressure ulcer prevention and management has agreed to be spokesman for the campaign. Strategies have already been developed to deal with possible negative coverage and the ground has already been prepared in the House of Commons with links to key politicians through a number of recent meetings and receptions.

As clinicians we all recognise that an assertive, empowered patient can be challenging but look how our colleagues in infection control have highlighted the role of hand washing through "clean hands" campaigning and how even the most stubborn healthcare practitioner has responded to patients saying "when did you last wash your hands?" If we only achieve half the success and coverage that campaign has generated we will not only reduce the number of pressure ulcers that occur but will have put tissue viability nursing on the political map and secured its future.

The above report on the Your-Turn campaign was initially prepared by the Tissue Viability Nurses Association and is currently available on the TVNA and the TVS web-sites.

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