

Speaker:

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Title of Presentation:

Could combined Continence, Ostomy and Wound Care Services be a Reality for the UK?

Introduction / Objective of presentation:

In the UK, enterostomal therapy, wound care, tissue viability, and continence nurses practice as distinctive specialties, although they share much in common. Recent discussions about the scope of practice within these distinctive but closely related practice areas have led to consideration of whether they might be combined into a single Wound, Ostomy and Continence (WOC) Nursing specialty similar to the model practiced in North America.

The model for WOC nursing arose from Enterostomal Therapy (ET), often practiced by persons living with an ostomy. This model evolved into ET nursing and finally WOC nursing. The change from ET to WOC nursing occurred in the early 1990s, in response to a combination of clinical and economic factors. From a purely clinical perspective, WOC nursing grew from a growing recognition that the essential knowledge and skills needed to manage an ostomy and the peristomal skin were intimately related to the core knowledge and skills required to prevent and manage chronic wounds and urinary or fecal incontinence in the intact urinary or gastrointestinal tracts.

From an economic perspective, ET educators realized that by these areas of specialization, they could create a specialty practice essential to care in the community, ambulatory clinic, hospital and long-term care facility.

Learning outcomes:

Despite significant growth in the core knowledge of wound, ostomy and continence management during the previous several decades, full scope practice continues to thrive in North America and it seem prudent to consider whether a similar model might thrive in the UK.