INTERPROFESSIONAL MENTORING WOUND CARE MODEL FOR PERSONS WITH SPECIAL NEEDS AND DISABILITIES

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Aim: Aim of the Interprofessional (IP) Wound Care & Mentoring Study was to implement and evaluate the effectiveness of an IP mentoring & coaching model designed to build capacity, and enhance provider knowledge and satisfaction related to an IP approach to wound management for patients with special needs and disabilities.

Methods: Study utilized a one group, pretest and posttest design with mixed methods for data collection to gain in-depth knowledge regarding the IP mentoring approach and its impact on the following: (i) collaboration and satisfaction in making care decisions; (ii) provider confidence in pressure ulcer prevention & wound management and; (iii) learning & practice; (iv) professional relationships; (v) resource management; (vi) sustainability in everyday practice. The study also measured patient outcomes through Mega Quality Indicators by recording the incidence and prevalence of pressure ulcers over a period of six months.

Results & Conclusions: Quantitative: The model was effective in enhancing health providers’ perception of collaboration and satisfaction in making care decisions; in enhancing health providers’ confidence in wound management and pressure ulcer prevention. It most likely contributed to a drop in prevalence of pressure ulcers from 26.3% to 20.3% over 6 months, with a further 50% reduction in pressure ulcer incidence. Qualitative: Three themes emerged: (I) Learning & practice: (a) Positive learning experience for mentees & mentors; (b) Impact on knowledge & skills; (c) Importance of mentoring to learning about wound care; (II) Impact on relationships through: (a) Better communication and understanding of roles resulting in mutual respect; (b) Mentoring models must address IP & hierarchical tensions; (III) Impact on Resources: (a) Resource management; (b) IP approaches to cost-saving; (c) Need for resources; (d) "Time to focus" on wound care; (d) Tension between resource management vs constraint.