The importance of regularly reviewing clinical tools to support the implementation of best practice to ultimately promote improved patient outcomes in wound care

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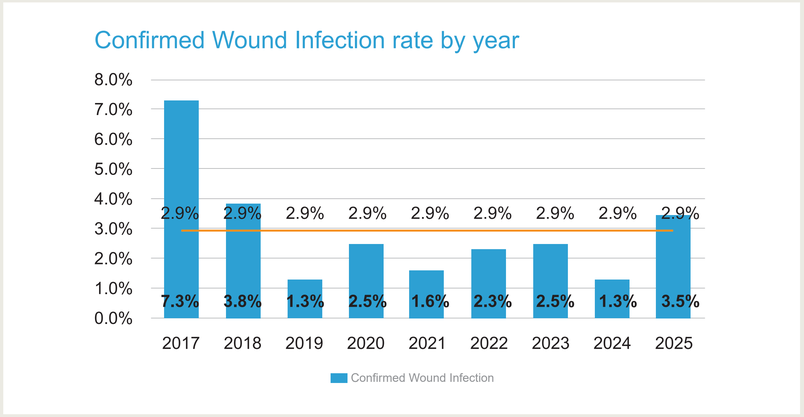
Aim

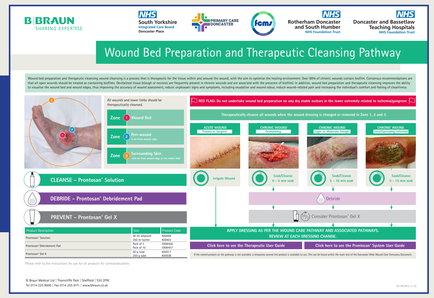
To support the response from wound outcomes and the application of evidence-based practice in wound care provisions for cleansing.

Results

An increase in wound infections was observed compared to 2024; 1.3% (1/78 patients 2024) to 3.5% (2/56 patients 2025); this was compared to the 2017 baseline (pre-pathway implementation) of 7.3% (19/261 patients).



Wound bed preparation and therapeutic cleansing pathway, updated in line with IWII 2025 guidelines.



Method

A 4-week wound infection audit was repeated in a complex wound clinic, this had been undertaken annually since 2017. The local wound bed preparation pathways and supporting guides were reviewed to ensure they remained current with the latest evidence/ recommendations. Best practice statements and Consensus Documents were reviewed. It identified that a new International Wound Infection Institute (IWII 2025) document for therapeutic wound and skin cleansing, had been published and the pathways and guides required updating.

Discussion

Results continued to demonstrate that implementing evidence-based practice is fundamental to improving clinical outcomes, patient safety and quality of care. The 2025 result, when compared to the baseline data of 7.3% infection rate in 2017, pre-pathway implementation, was considered indicative of a lower overall infection rate. Patient audit numbers were lower, due to implementation of a tiered process for complex clinic admissions, individual patients now represented a higher percentage (e.g. in 2017 one patient was 0.38% and in 2025 accounted for 1.8%), meaning one infection would increase the infection rate by a greater degree than in previous years. This was factored in to the clinical review of the data. Evidence-based practice is not always delivered, therefore, pathways and formularies are vital in providing a tool to help drive change (Wounds UK, 2023). The IWII recommendations provided information for practice regarding cleansing, reinforcing wound cleansing as a significant component in preventing and managing wound infection and preparing wounds for healing. Pathways and guides were updated to reflect IWII guidance to ensure early diagnostics and interventions continued to reflect evidence, aligning the local formulary.

Conclusion

This process reinforced the critical role therapeutic cleansing plays in infection prevention and healing, highlighting the importance of regularly reviewing patient outcomes and reviewing clinical tools, to support the implementation of best practice and ultimately promote improved patient outcomes, clinical safety, and quality of care in wound management.

Reference: Wounds UK (2023) Best Practice Statement: Development of a wound care formulary using clinical evidence and ensuring effective change management. London: Wounds UK

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