

WOUND AWARENESS WEEK 2015

March 23 - 27



Tips on handling media inquiries

If you are contacted by a journalist

- Ask and write down their name, media organisation and contact phone number.
- Ask what led to them to contacting you in particular (they may have rung the organisation and asked to speak to a wound management clinician).
- Inquire about what questions they want answered, or what information they are seeking – write this down.
- Ask if they are responding to an AWMA media release
- Ask if they would like to speak with the President (who will be quoted in the release). If so, give them the secretariat contact – info.nsw@awma.com.au
- If in doubt, or you have any concerns, say you will get back to them after speaking with AWMA 'head office'. Then contact Di Carr our AWMA secretariat contact – info.nsw@awma.com.au or phone 03-9696 1210.
- They may want to take a photo, or to film for TV. Approval for this would depend on, 1) you and/or your patient's comfort with this, 2) your workplace management approving media coming onto the premises – if concerned, please contact Di Carr, the secretariat at info.nsw@awma.com.au
- They may want a 'local angle' – an interview with a clinician, a patient, or both. If well handled, this puts a human face to Wound Awareness Week, and is likely to result in good coverage.
- Plan in advance if you have suitable patient/s for interview, and a setting where bandaging or wound care could be demonstrated, even photographed/filmed, in privacy without affecting other patients and staff.
- If an interview (radio, TV, newspaper) is to go ahead, please refer to the Q & A's and the key messages list below.
- Before commencing the actual interview, especially for radio, have an informal chat with the journalist to see what they hope to achieve from the interview. It is safe to assume that they will know relatively little about the field of chronic wounds. Try to bring them up to speed in simple language.

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NB: Do not discuss any issues relating to your workplace – **keep the focus on Wound Awareness Week and the key points.** You will be speaking on behalf of AWMA, not your facility. *It is not your role to be discussing, even 'off the record', whether XYZ clinic or hospital has enough resourcing for wound care, or other services. Be mindful of the media protocols that your facility/service has in place to govern what can be said, and by whom, to the media.*

- *If you feel what you have said has confused the journalist, go back to it and explain again.* Even if it is a radio or TV interview, don't worry about saying, "Sorry, I'm not really happy with what I said, do you mind if we do it again?" You're not the Prime Minister on 7.30 Report being grilled about a tricky subject – you will find that those journalists who take our issue on board are likely to be supportive.

- Smile, be pleasant with them, and stress that anything you are saying is for the benefit of patients, who are battling bravely with a very difficult health issue, and who need the community's support.

- If you're doing a radio interview (pre-recorded or live) by phone, do it standing up, rather than sitting at a desk. Media trainers agree this will improve focus and the quality of your performance.

Again, if in doubt contact Margo Asimus, president of AWMA through our secretariat at info.nsw@awma.com.au or phone 03-9696 1210.

Questions & Answers

Q: What is the Australian Wound Management Association, and what is the purpose of Wound Awareness Week?

A: This is the seventh annual Wound Awareness Week, coordinated by the Australian Wound Management Association. The Association is the peak not-for-profit body representing the nation's 3000 nurses, doctors and allied health professionals working in wound care.

The aim of the Week is two-fold

1. To make the broader community more aware of how many Australians (300,000+) suffer from chronic wounds. We want this issue to be talked about – it is very common, mostly unavoidable, and should not be an "elephant in the room". Wounds, such as leg ulcers in the elderly, greatly impact on a person's mobility – it makes it difficult to go shopping, or to a movie, or even to take a walk for exercise. So it can be very socially isolating and painful.

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People can even feel fearful of having their grandkids on their knee, in case their leg wound gets kicked, or starts to weep or bleed.

2. To raise awareness at the community level that wound experts are available to help improve the quality of life and possibly heal faster. Best practice wound management may reduce the healing time of leg ulcers to within 12 weeks. Without proper treatment, chronic wounds can last for months, even years. But the fact is that they are not for life. They have the potential to be healed.

Q: Who usually takes care of a patient with a chronic wound? Doctors, nurses? Can a patient, spouse or carer manage it themselves?

A: Both doctors and nurses have a role to play in treating chronic wounds. In some cases, following education, a patient, spouse or carer can manage this themselves. But, care by specially trained health professionals is often required. This is important if bandages are being used for venous leg ulcer management because specific bandages need to be used and there is a special way the bandages should be applied.

Key Messages

Approximately 300,000 Australians suffer from chronic wounds at any one time. They can be painful, messy, embarrassing and isolating.

Wound care constitutes greater than 70% of community nurses caseload.

In general practice, 3 of the 5 frequently performed procedures involve wounds.

Wounds cost the health system \$10,000/patient. Estimated at \$3 billion/year. This represents 3% of the national health budget.

Best Practice treatment can heal many chronic wounds and the good news is, there are many wound experts throughout the state who can help improve practice and potentially heal wounds faster.

If you've got a wound that won't go, get a Wound Expert.

Find one near you at www.woundexperts.com.au