



WoundsAustralia

**11 Point Plan
to fight Australia's
chronic wound epidemic**

August 2022

The Solution is Bleeding Obvious



WoundsAustralia

Australia's peak body for
wound prevention and management

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Introduction



Chronic wounds are Australia's hidden epidemic.

The figures and impacts speak for themselves:

- Each year over **420,000 Australians** suffer from a chronic wound.
- Over **\$3 billion** of the nation's aged care and health care budgets is spent on chronic wounds.
- Chronic wounds patients spend **over \$4,000** on out-of-pocket costs.

With most patients over 65, this places unbearable pressure on pensioners and retirees.

But it doesn't have to be this way.

Wounds Australia has identified solutions to chronic wounds supported by research and clinical expertise. They will address the priority issues to solve the current 'hidden' chronic wound epidemic.

Our solutions are based on the expertise of health and aged care professionals, patients and at-risk groups, and specialists in Australia's health and aged care systems.

This document is a plan that:

- delivers significant savings in the health and aged care budgets
- prevents thousands from entering the healthcare system each year
- empowers consumers to understand the wound warnings and know where to get help
- enhances Australia's tertiary education system
- improves the skills of rural and regional health and aged care workforces.

The solutions we have detailed in the following pages must be regarded as a priority for our nation's health and aged care sectors. Without urgently addressing wound treatment, Australia's 'hidden epidemic' will continue to escalate and burden the physical and emotional health of the country, while draining billions of dollars away from other vital priorities.

Wounds Australia's 11 Point Plan is a clear blueprint that will ensure wound care costs less and delivers better care to more people. We look forward to working closely with the Federal Government to develop, implement and support these important health and aged care solutions.

Hayley Ryan

Chair, Wounds Australia



11 Point Plan

1. Develop a National Wounds Framework, recognising chronic wounds as a National Health Priority Area

Current situation

- Chronic wounds are underreported in Australia and are increasing, leading to escalating treatment costs for governments and patients.
- There are serious policy and structural barriers to preventing and healing chronic wounds including:
 - poor communication across health and aged care sectors
 - lack of awareness about the significance of chronic wounds with clinicians and the broader public
 - insufficient education and training for primary, allied health and aged care clinicians and students
 - difficulties in accessing wound care expertise and wound products
 - high costs wound services and products
 - lack of incentives to invest in evidence-based wound care in the primary sector.

Proposed solution

- Develop a National Wounds Framework to create a coordinated, collaborative and cost effective response to chronic wounds.
- The National Wounds Framework would support broader government reform processes including the Strengthening Medicare Taskforce and implementation of Aged Care Royal Commission recommendations.

Benefits to government and the community

- People with chronic wounds and their families will have access to competent, affordable and timely care.
- Consumer-focused community based wound care will ensure people receive the right treatment at the right time by the right clinician, regardless of how they acquired their wound.
- Wound patients will be treated by knowledgeable and skilled wound clinicians, providing quality, cost-effective care.
- The Framework will guide adoption of evidence-based approaches, policies and practices for all wound prevention, management and treatment services.



2. Create a National Wound Services Scheme to subsidise wound products for:

- people with pressure injuries, venous leg ulcers or diabetic foot ulcers
- people aged 65+
- government concession card holders

Current situation

- Anyone can suffer a chronic wound. However, some people are more vulnerable due to their age or underlying conditions:
 - Pressure injuries are the most common type of chronic wound and mostly affect older people.
 - The majority of these painful wounds are preventable and cost the Australia health budget almost \$1 billion each year, resulting in over 500,000 lost hospital bed days.
- There are major financial and medical barriers to reducing chronic wounds:
 - Patients delay seeing a health professional because they cannot afford to get their wound treated.
 - This results in significant pain, infection and other complications, leading to avoidable hospitalisations, amputations and deaths.
- Chronic wounds reduce people's ability to work, study and enjoy the lifestyle that others take for granted.
 - Chronic wounds are extremely painful, reducing people's mobility which further increases the risk of serious complications.
 - Sufferers are at risk of mental health issues including anxiety and depression resulting from social isolation, changes to body image, and significantly decreased quality of life.
- The cost of treatment is often unaffordable. For example, venous leg ulcer patients pay \$47.2 million in annual out-of-pocket costs for wound care.

Proposed solution

- Establish a National Wound Services Scheme administered by Wounds Australia for people with pressure injuries, venous leg ulcers, diabetic foot ulcers, people over 65 and government concession card holders.
 - This Scheme would allow eligible patients to be registered by a health professional with wound care expertise such as a GP, nurse practitioner or relevant allied health professional.



- Establish a Clinical Advisory Committee for this Scheme that would:
 - develop clinical eligibility criteria for participants
 - recommend wound care consumables and treatment options that would be subsidised under the Scheme
 - identify appropriate clinical experts that could register participants.
- Wounds Australia administers the scheme, allowing people with wounds and their families to:
 - understand the wound warning signs
 - access services, support and subsidised wound care products.

Benefits to government and the community

- The National Wound Services Scheme would directly support the Federal Government's Strengthening Medicare objectives to improve access to affordable care for chronic conditions and to reduce pressure on hospitals.
- This Scheme will reduce the cost and length of healing time for people who are most at risk of chronic wounds.
 - It will remove key barriers to reducing the incidence of chronic wounds, which are the cost of treatment and receiving appropriate care.
 - It will ensure chronic wounds are healed more effectively in the community, reducing avoidable pain, infection and complications that need more costly treatment in hospitals.
- Appropriate treatment of pressure injuries could save the Federal Government \$1.2 billion and state governments \$200 million over five years.

Case Study: Cost of wound care

The typical self-funded retiree's annual income is \$44,000. For a single pensioner, it is a maximum of \$25,000. If they are one of 350,000 Australians over 65 years who suffer from a chronic wound, they will spend an average of \$4,000 each year on out-of-pocket costs. Those with venous leg ulcers and diabetic foot ulcers face even greater expenses.

Wounds Australia identified a chronic wound patient who is out of pocket on average over \$50,000 each year and this does not include the travel expenses and pain killers desperately needed to manage their debilitating condition.



3. Introduce Medicare funding for the treatment of chronic wounds in primary health care

Current situation

- Australians need equitable access to care for chronic wounds.
- Most people cannot access public funding to cover the products required to treat chronic wounds and the time required to apply them.
 - Primary care health professionals must either subsidise wound care consumables, use low quality dressings or pass full cost to patients.
 - Using low quality or inappropriate dressings increases the time required to heal chronic wounds, which leads to poorer patient outcomes.
- Patients must navigate a complex, costly system that does not prioritise early, effective healing of their wounds.

Proposed solution

- Add new items to the Medicare Benefits Schedule (MBS) to fund:
 - assessment of wounds
 - consumables required to heal a wound
 - development of wound management plans for patients
 - nursing time required to apply wound dressings.
- These MBS items should be accessible to GPs, nurse practitioners and relevant allied health professionals.
- Wound care clinics led by nurse practitioners and GPs offer an existing model that could heal chronic wounds effectively in the community.

Benefits to government and the community

- Medicare support for wound assessment, treatment and consumables would directly support the Federal Government's Strengthening Medicare objectives to improve access to affordable care for chronic conditions and to reduce pressure on hospitals.
- It will deliver significant savings to governments:
 - Fewer people would delay initial treatment for a wound.
 - The incidence, severity and healing time for chronic wounds would reduce, avoiding the need for further treatment and hospitalisation as wounds worsen.
 - Subsidising venous leg ulcer compression therapy alone could save the Federal Government \$1.2 billion and save patients \$236 million in out-of-pocket costs over five years.



- Effective wound care and patient education would free up 8.8 million wound care practitioner hours currently used for potentially unnecessary dressing changes.
- It would significantly improve patient outcomes, including their ability to engage in the workforce and broader community.

Case Study: Jenna Allen

The sting of a red back spider bite seven years ago has forced 28-year-old Jenna Allen into a life of financial hardship. To treat the consistent flare-ups and pain, Jenna has relied on financial support from family, friends and a public GoFundMe page.

The chronic nature of the painful and unsightly spider bite means Jenna can spend up to \$500 a fortnight on dressings. Living in western Victoria, the cost of travel to see a doctor with training in wound care, along with consultation fees and pain killers, are an additional burden.

With Medicare failing to cover chronic wound care costs, Jenna is one of hundreds of thousands of Australians having to choose between her treatment and day-to-day needs of her young family.

The inclusion of chronic wound treatment costs in Medicare will help Jenna step away from American-style charity healthcare. It will also prevent Australians from making the same choice between household expenses and seeking treatment for their chronic wounds.



4. Establish multidisciplinary wound care teams in hospitals and the community

Current situation

- Hospital staff do not have the capacity or specialist expertise to deliver wound care.
- Generalists are usually embedded in local hospital networks, while most wound care experts treat patients outside of the hospital system.
- Pressure injuries are a common type of chronic wound, particularly for people over 65,
- The majority of pressure injuries are preventable. Yet these painful wounds cost the Australia health budget almost \$1 billion each year and result in over 500,000 lost hospital bed days.

Proposed solution

- Implement a multidisciplinary model of wound care experts and specialists collaborating inside and outside the hospital system to deliver high quality wound care.
- Wounds Australia has the expertise and clinicians based both inside and outside the hospital system to ensure the model is designed and implemented effectively based on current best practice.

Benefits to government and the community

- This approach would directly support the Federal Government's Strengthening Medicare objectives to improve access to affordable care for chronic conditions and to reduce pressure on hospitals.
- Only by working cooperatively can patient care be improved and the financial burden for governments and individuals be reduced.



5. Raise awareness of chronic wounds through a national public health campaign

Current situation

- Australians delay treatment for wounds because they do not know the warning signs or where to seek help.
 - This significantly increases the healing time and cost of treatment.
- Health professionals often do not have the knowledge to heal chronic wounds using current best practice.
- Gaining access to health professionals who specialise in wound prevention, care and management is challenging, particularly in rural and regional areas, leaving many patients to suffer alone and in silence.
- Wounds Australia has successfully grown its member funded Wound Awareness Week to build awareness of chronic wounds with patients, health professionals and decision makers.
 - This established framework provides the perfect platform to build a successful national campaign that reaches a broader audience with tailored resources and activities.

Proposed solution

- Create a national media and digital campaign on chronic wound prevention and treatment, building on Wound Awareness Week.
 - Raise awareness with people at risk of chronic wounds through mainstream and health media, using personal stories.
 - Share wound care education and resources with health professionals and their patients via Primary Health Networks, universities, peak bodies and health professional member organisations.
 - Include federal and state Chief Nursing & Midwifery Officers to share campaign messages and resources on social media with health professionals and their networks.
 - Use health professionals as campaign ambassadors to target key wound care professions such as GPs, nurses and allied health.
- Wounds Australia has the expertise, networks and track record to successfully spearhead this ambitious project.



Benefits to government and the community

- This campaign will improve community awareness and health literacy about wounds.
 - People will know the warning signs and how to seek treatment.
 - Health professionals will know where to find the education and resources to improve their wound care expertise.
- It will deliver savings to health and aged care budgets by:
 - encouraging people to seek early treatment, avoiding lengthy and costly chronic wounds
 - improving health professionals' wound care expertise, allowing wounds to be healed more quickly in the community using best practice.
- This solution supports objectives of the *National Preventative Health Strategy 2021-2030*, particularly:
 - investment in prevention is increased
 - all Australians live in good health and wellbeing for as long as possible.

Case Study: Older Australians

More than 420,000 Australians suffer from a chronic wound each year. Over 350,000 of them are 65 years or older.

This means there are approximately 2,900 people and 2,400 seniors suffering from the painful burden in every federal electorate.

Most people hide their wounds or choose a reclusive lifestyle. This problem is a hidden epidemic that significantly impacts the sufferer as well as their partners, families and communities.

A public awareness campaign will educate people on the wound warning signs, where to seek help and how their wounds can be healed. The reduction in incidence, severity and costs will also reduce social stigma, ensuring Australians can participate in work, lead more active lifestyles and actively contribute to their communities.



6. Introduce wound care education for primary health care & aged care workforces, particularly in rural & remote regions

Current situation

- Wound care education is inadequate in courses for early and mid-career health professionals.
- Health professionals do not stay up to date with current best practice wound care, leading to poorer patient outcomes and more costly treatment.

Proposed solution

- Fund the development of minimum curriculum standards for early and mid-career health professionals' courses in aged care, medicine, nursing and relevant allied health disciplines.
- Wounds Australia is best placed to coordinate the development of these standards, as the peak body for wound prevention and management.

Benefits to government and the community

- This measure will improve wound management practice through the adoption of best practice, based on the latest research and education delivery models.
- Evidence based education will keep people out of hospital, reducing healing time and ensuring best practice wound care is available to all Australians.
- This will improve career pathways for health and aged care professionals.

Case Study: Graham Swatridge

With Bega's High Risk Foot Services clinic closing its doors five years ago, Graham Swatridge is now forced to drive a six-hour round trip every fortnight for treatment because no health care professional closer to home has the knowledge or skills to help him.

Basic wound care training that will allow health and aged care professionals to identify and treat the wounds of patients will significantly reduce the incidence of chronic wounds. It will ensure retirees, aged care residents and other at-risk Australians can receive early intervention and care in their community.



7. Introduce wound care units of competency in tertiary education courses including:

- Bachelor of Medicine
- Bachelor of Nursing
- Certificates III & IV in Aged Care
- Bachelor of Pharmacy
- Podiatry & other Allied Health degrees & courses with wound care responsibilities

Current situation

- There are very few mandatory wound care units in tertiary courses for medicine, nursing and aged care.
 - These courses include only one to two hours on wound care.
 - Most health and aged care tertiary courses do not have optional or elective units on wound care.
- Aged care, medicine, nursing and allied health students do not graduate with the right knowledge and skills to prevent and heal wounds.
- The Royal Commission into Aged Care Quality and Safety recommended that by January 2022, reviews of Certificate III and IV courses in aged care should consider additional units of competency in wound care (recommendation 79).
 - Wounds Australia recommends expanding this to include medicine, nursing and relevant allied health tertiary courses.
 - This ensures that the majority of health students who are likely to encounter a wound can heal it based on best practice.

Proposed solution

- Fund development of minimum curriculum standards for tertiary courses in aged care, medicine, nursing and relevant allied health disciplines.
- Wounds Australia is best placed to coordinate the development of these standards, as the peak body for wound prevention and management.

Benefits to government and the community

- The inclusion of wound care units in tertiary education courses will ensure that health professionals can prevent and heal wounds more effectively.
- This solution supports Stream 2 (Person-centred primary health care) of *Australia's Primary Health Care 10 Year Plan 2022-2032*.



Case Study: David Robinson

The absence of wound care modules in medical, nursing and allied healthcare degrees can result in horrific and avoidable complications.

In 2020, David Robinson almost lost his life, along with his foot, because hospital doctors and nurses lacked wound care training.

Their knowledge gap meant they failed to consider how David's diabetes caused lack of feeling in his feet, meaning he would not realise he was rubbing his foot against the hospital bedframe.

When a small wound developed on the bottom of his foot, doctors and nurses could not appreciate the risk it posed and didn't treat it. By the time he was home, the seemingly insignificant sore had developed into a diabetic leg ulcer.

David's life was saved by a chance visit to his podiatrist. Having undertaken extracurricular wound care studies, the podiatrist immediately identified the problem and initiated the treatment that prevented the loss of David's entire leg or even worse, his life. After an eight month long battle, surgeons were left with no choice other than life-saving amputations.



8. Fund a study of chronic wounds to determine incidence, financial impacts, specific pressures on the aged care and health care systems, and complications faced by patients

Current situation

- The data used by clinicians, health policy experts and governments when discussing chronic wounds in Australia is shaped mainly from overseas studies and figures.
- Gaps in our systems and incomplete knowledge means we cannot deliver the best prevention, treatment, education and savings.

Proposed solution

- Fund a comprehensive, peer reviewed study using the country's wound experts, researchers and health economists.

Benefits to government and the community

- A comprehensive and robust study will ensure the National Wound Framework and wound care programs to be based on accurate data.



9. Wounds Australia should be used as the primary resource for achieving and adopting best practice, including formal government appointments

Current situation

- Failure to include Wounds Australia in key federal health and aged care reforms has meant these processes have not benefitted from Australia's best wound care experts.
- Wounds Australia's 18,000 members and supporters have been doing the heavy lifting to raise awareness about chronic wounds.

Proposed solution

- Wounds Australia should be appointed to all future government Taskforces, Working Groups, Expert Committees and other bodies considering wound care or where chronic wounds are a prominent concern.

Benefits to government and the community

- Wounds Australia has well-developed plans and policies to deliver health and aged care reformed based on best practice.



10. Introduce a scheme to reimburse home support, home care and residential aged care providers of for the cost of education and training, including continuing education in preventing and treating pressure injuries and other wounds

Current situation

- The Royal Commission into Aged Care Quality and Safety recommended that commencing on 1 July 2021, a scheme to reimburse home support, home care and residential aged care providers for the cost of education and training, including continuing education in pressure injuries and wound management should be established (recommendation 114).

Proposed solution

- Implement a scheme to reimburse home support, home care and residential aged care providers for the cost of education, including continuing education in pressure injuries and wound management.

Benefits to government and the community

- This scheme will improve health professionals' ability to prevent, identify and manage pressure injuries and other wounds from developing, leading to healthier older Australians in home care and residential care.
 - This includes improved skills to report pressure injuries under the National Aged Care Mandatory Quality Indicator Program.
- This solution also supports Stream 2 (Person-centred primary health care) of *Australia's Primary Health Care 10 Year Plan 2022-2032*.



11. Wounds Australia is appointed to formally work with government in the design and delivery of wound care units in tertiary courses

Proposed solution

- Wounds Australia has the knowledge and experience to introduce appropriate wound care units across courses quickly, and in cooperation with educational institutions and governments.
- The professional development and education courses already run by Wounds Australia's leaders and experts are a best practice model ready for implementation.

Benefits to government and the community

- Improved education will increase the uptake of evidence-based wound care practice.
- With many of Wounds Australia's leaders comprising researchers, academics and university-based lecturers, coordination with us will ensure harmonious introduction rather than piecemeal steps.



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