



WoundsAustralia
Healing Wounds Together

11 Point Plan to fight Australia's hidden epidemic of **Chronic Wounds**

The Solution is Bleeding Obvious



Australia's peak body for
wound prevention and management

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Every year more than 420,000 Australians suffer from chronic wounds.

Australian governments spend over \$3 billion of their health and aged care budgets to treat them.

Despite this, the health crisis is largely unknown. It is also preventable.

Australia's hidden epidemic of chronic wounds prevents people from working, studying, exercising and doing simple daily tasks everyone else takes for granted.

The social stigma can also lead to deep mental health complications. The financial impact is severe.

Patients face average out-of-pocket costs of around \$340 per month. With most patients over 65, that places unbearable pressure on pensioners and retirees.

But it doesn't have to be this way.

Wounds Australia's 11 Point Plan is a clear and effective blueprint for governments to follow.

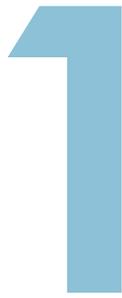
It draws on the knowledge and skills of Australia's top wound care experts to dramatically cut patient numbers and the funds to treat them.

Most importantly, **Wounds Australia's 11 Point Plan** solves the problem caused by the tangle of state and federal government responsibilities.

The complications of delivering treatment across primary care, community care, hospital and aged care settings can become a straightforward process.

Wound care will actually cost less and deliver better care to more people.

**The solution
is bleeding
obvious**



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

Wound care needs a dedicated MBS item.

A dedicated MBS item will allow GPs, nurses and allied health professionals to deliver best practice multidisciplinary care.

It will deliver savings to government and alleviate financial pressures on individual patients.

Conservative estimates of potential savings for venous leg ulcers alone are over \$166 million annually.

2

Subsidise wound products for people at risk of venous leg ulcers, diabetic foot ulcers and people aged 65+.

Subsidising good quality wound products will reduce costs and treatment time.

Modern wound dressings are extremely effective and keep patients out of hospital as they can be treated in the community setting.

Research shows cheap, low quality dressings actually increases costs.

The wrong dressing needs to be changed more often, the wound takes longer to heal, and the risk of complications increase.

3

Raise awareness of chronic wounds through a public health campaign.

Raising community awareness and improving health literacy means the warning signs of chronic wounds will be recognised.

Australians will know how to seek early and effective treatment.

A public health campaign will cut the number of patients and healing time.

It will deliver savings to government and individuals while improving the health of thousands of Australians each year.

Just \$2 million over four years will deliver a national campaign that focusses on prevention and early access to treatment.

The results and benefits of other similar public health campaigns are well documented and understood, making this a risk-free investment.

Wounds Australia already has a public education campaign framework, including materials and resources to make an immediate start.

4

Introduce wound care training for primary health care and aged care workforces, particularly in rural and remote areas.

Wound care training is non-existent or inadequate in tertiary and vocational training courses.

Evidence-based training will deliver large savings to governments by keeping people out of hospital, reducing healing time and ensure best practice wound care is available to all Australians.

An investment of just \$750,000 will allow Wounds Australia to expand its professional development and wound care training programs to primary health care, aged care and rural and remote workforces.

5

Map care pathways for chronic wound care.

Access to specialist wound care across Australia is patchy and almost non-existent in rural and remote areas.

It is complex and confusing for patients and their families.

To make things worse, the supply and availability of wound products is extremely variable.

A national mapping exercise will identify pathways between primary health care and specialist services.

Mapping pathways will improve service planning, address access issues and reduce costly delays in referrals to specialist services.

Wounds Australia can deliver this vital project quickly and affordably because we already have the policy experts, clinicians and stakeholder relationships in place that would otherwise need to be developed from scratch.

An investment of just \$650,000 will allow Wounds Australia to complete this project.



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.

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 an incomplete knowledge means we cannot deliver the best prevention, treatment, education and savings.

A comprehensive, peer reviewed study using the country's wound experts, researchers and health economists will cost just \$500,000 for Wounds Australia to complete and deliver.

To put that into perspective, if the study prevents just one foot amputation caused by a diabetic leg ulcer, it has already paid for itself.

Wounds Australia and health policy experts estimate savings can be several hundred million dollars annually.

However, only a comprehensive and robust study will allow Australia's wound care policies and programs to be reshaped accurately and confidently.

The Royal Commission into Aged Care Quality and Safety highlighted shortcomings and failures in the aged care system.

However, costly and far-reaching physical and mental health problems caused by chronic wounds were largely ignored.

Thankfully there is a simple solution that will allow the Federal Government to fulfill its promises of reform and remedy.

By committing to the four easily implemented Recommendations* in the Report, the incidence and expense of chronic wounds seen in Aged Care can be cut dramatically.

With deadlines established by the Royal Commission already surpassed or looming, the implementation of Wounds Australia's 11 Point Plan is now a priority if the Federal Government is to make effective and affordable change.

**Recommendations have been abbreviated to focus on wound care while maintaining accuracy and context.*

7

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

The recommended timeframe to meet this recommendation has already lapsed.

While this represents a major government failure, it can be quickly remedied.

Wounds Australia already has well-developed plans and policies to deliver best practice. There is no need to delay action and benefits by just 'considering' how it might be achieved.

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.

Failure to do so in the past means the health and aged care systems have not benefitted from Australia's best wound care experts.

**Recommendation 19:
Urgent review of the
Aged Care Quality
Standards•**

By 15 July 2021 the inclusion of best practice in wound management in Aged Care Quality Standards should be considered, and how they are to be achieved.

8

By 1 January 2022, implement a model of wound care experts and specialists collaborating inside *and* outside of the hospital system to deliver high quality wound care treatment.

It's not good enough to rely on hospital staff to deliver wound care.

Generalists are usually embedded in local hospital networks, while most wound care experts treat patients outside of the hospital system.

Only by working cooperatively can patient care be improved and the financial burden for governments and individuals be reduced.

Wounds Australia has the expertise and clinicians based both inside and outside the hospital system to ensure a model is devised, implemented and works successfully.

Recommendation 58: Access to specialists and other health practitioners through Multidisciplinary Outreach Services*

By 1 January 2022
Local Hospital
Network-led
multidisciplinary
outreach services
should provide
access to
embedded wound
specialists already
salaried within the
hospital.

9

By January 2022 units of competency in wound care are included in tertiary education courses, including:

- **Certificate III in Aged Care**
- **Certificate IV in Aged Care**
- **Bachelor of Medicine**
- **Bachelor of Nursing.**

Wound care is also included in other relevant and related courses where graduates work directly with patients suffering chronic wounds.

Incredibly, there are no mandatory wound care units in tertiary courses, including for doctors and nurses.

Many courses across health and aged care do not even have optional or elective units on wound care.

The inclusion of wound care units will result in the prevention of wounds and faster healing as early warning signs are recognised.

Appropriate treatment will lead to financial savings and less suffering.

Recommendation 79: Review of certificate-based courses for aged care*

By January 2022 reviews of Certificate III and IV courses in aged care should consider additional units of competency in wound care.

10

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

Wounds Australia has the knowledge and experience to introduce appropriate wound care units across courses quickly, and in cooperation with educational institutions and governments.

In fact, the professional development and education courses already run by Wounds Australia's leaders and experts are a best practice model ready for implementation.

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.

Recommendation 79: Review of certificate- based courses for aged care*

By January 2022 reviews of Certificate III and IV courses in aged care should consider additional units of competency in wound care.

11

Immediately 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.*

Prevention is better than a cure. It is also much cheaper.

Understanding the simple things that can be done to stop pressure wounds from developing will improve standards and lead to healthier residents.

**Recommendation 114:
Immediate funding for education and training to improve the quality of care***

Commencing on 1 July 2021 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 pressure injuries and wound management should be established.

For more information on solving Australia's hidden epidemic of chronic wounds, contact WoundsAustralia and our **WOUND AWARENESS WEEK** website and resources.

The solution is bleeding obvious

23-29 AUGUST 2021



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