

OASIS Alert

Wound Care: ACHIEVE BETTER OUTCOMES AND MORE SAVINGS

Is your agency still committing flaws with gauze? It's time to unravel those old bandages and switch to advanced wound care products if you're interested in generating better patient outcomes and saving loads of cash.

HHAs that use advanced wound supplies can reap big labor savings from the decreased frequency of dressing changes and home visits (see related story article 1), but these products can also benefit agencies by delivering superior wound care outcomes.

Advanced products "have features that help avoid incidences of infection, which is a significant cost," opines Dr. **Liza Ovington**, president of Pittsburgh-based **Ovington & Associates**. Using advanced care products results "in a better environment for wound healing and faster wound healing rates compared to wounds that are allowed to dry out," she explains.

In an evidence-based study published last year in Home Healthcare Nurse titled "Hanging Wet-to-Dry Dressings Out to Dry," Ovington compared the cost and effectiveness of using traditional wet-to-dry gauze requiring daily or twice daily changing versus an advanced product which called for changing three times per week (see related charts).

She found that not only did the advanced wound care supplies save substantially on labor, but they also outperformed their gauze-and-saline counterparts when one simply considered how well the wound healed over a four-week period.

Ovington concluded that even if one chose to ignore the sizable labor savings, the four-week supply costs of the advanced product was only \$1.38 for each percentage point in wound size reduction, as opposed to \$3.26 for twice daily dressings or \$1.63 for daily dressing.

The advanced products achieve faster wound reduction rates because gauze is "kind of like a jack of all trades, master of none," according to Ovington. Gauze can both manage drainage and help hydrate a wound, but it does neither particularly well, she explains.

On the other hand, advanced wound products are made with varying materials like alginates, foam or hydrogels and are specifically engineered to perform a particular function i.e., absorb or hydrate very well.

Ovington advises agencies who wish to benefit from advanced products to familiarize their clinicians with the basic functions, materials and categories of wound dressings, so that clinicians can apply and change the right product type appropriately.

Some Folks Just Don't Get It

Despite the big potential for savings and improved outcomes, the use of advanced wound care products has not caught on entirely because many HHAs still are reluctant to see past the initial cost when compared to the price of gauze, bemoans Ovington.

Materials management units often are opposed to shelling out larger amounts of money for the more expensive wound care products, but "they're not talking to the people who have to pay for the drugs that it costs to treat an infection, or for the nursing labor, or for the ancillary supplies," she states.

Ovington likens the situation to deciding between two pairs of shoes one made of leather, the other made of paper. Consumers may see that the paper shoes cost a mere fraction of the leather ones, but "the price of the product is not all they should be concerned about," she says. After all, paper shoes like gauze dressings won't last very long or perform their job well. HHAs "need to look at the overall cost-effectiveness," Ovington maintains.

For agencies that are already purchasing advanced products, the next big hurdle is to convince the physicians who are writing the orders for your patients, states Ovington.

When an agency sees a referral for twice daily gauze dressing changes, it may want to explain to the physician that it has wound care modalities that require home visits only every other day or three times per week. Emphasizing the quicker healing rates attained with advanced products should also help sway physicians away from their gauze-and-saline routines. "The patients like [using advanced wound products] because they don't want someone coming into their home every day, and the doctors like it because the outcomes are good, and I like it because it helps reduce the cost and improve outcomes," effuses **Kathy Grissom**, VP of Home and Community-Based Services at **Ouachita County Medical Center** in Camden, AK. "It's a win-win for us."

