

## **PRIORITIZE WOUND CARE TO REDUCE HOSPITALIZATIONS AND HEALTH-CARE COSTS**

***Wound care costs Canada at least \$3.9 billion annually in direct costs<sup>i</sup>***

**RECOMMENDATION:** Wounds Canada urges Governments across Canada to prioritize wound care, ensuring that patient care is equitable, timely, non-fragmented and accessible across jurisdictions.

To improve patient care, reduce hospitalizations and lower spending on wounds, key actions must include:

- Developing policies that prevent wounds such as pressure injuries (bed sores) and infected wounds in acute and home care settings
- Providing access to wound care products and technology that are evidence-based and improve patient outcomes
- Increasing wound-related education for health-care providers, patients and families
- Ensuring interprofessional teams include wound experts
- Implementing wound care pathways from hospitals to home and community care with set measurables, monitoring and evaluation

### **Implementing these key actions would improve patient outcomes and reduce spending on wounds**

- On a daily basis, people are admitted to hospitals for infected wounds and are dying from pressure-related injuries (bed sores). Excluding Quebec, over 5,000 amputations happen annually across Canada due to diabetic foot ulcers, and new research shows this number is on the rise.
- In Canada evidence-based wound care is not integrated and equitably accessible to patients. For example, interprofessional teams often do not have access to basic wound care products such as advanced dressings. Health-care professionals do not have access to standard-of-care technology and practices that could detect and prevent pressure injuries from developing.
- With investment in better wound prevention and management earlier on in the patient journey, governments across Canada could improve patient outcomes, reduce hospitalizations and readmissions, and quickly cut health-care costs related to wounds.
  - For example, **adoption of best practices could reduce wound costs in home care by 40–50%.**<sup>ii</sup> Approximately 50 per cent of home care visits involve wound care.

### **A person's hospitalization and home care needs increase with complex or severe wounds.**

- A person with a diabetic foot ulcer that heals as expected spends an average of 5 days in the hospital, emergency rooms and clinics, whereas a diabetic foot ulcer that results in an amputation increases this time to an average of 70 days.<sup>iii</sup>
- A surgical wound that becomes infected increases a person's hospitalization by 11 days in Canada.
- Despite the fact that at least 70 per cent of all pressure injuries are preventable, 25 per cent of people in any care setting have a pressure injury on any given day. Pressure injuries can extend a hospital stay by 4 to 11 days.<sup>iv</sup>

### **Wound care has not been prioritized across Canada. We can do better.**

- The Government of Alberta has implemented a diabetic foot care pathway and reduced their amputation rate. The Government of Ontario has taken initial steps: draft wound care pathways are currently being developed, and funding for offloading devices has been provided to help prevent amputations due to diabetic foot ulcers. **However, more must be done.**

- Wound care pathways, education and other supports are standard in many nations such as the United Kingdom, Spain, Netherlands and Sweden. Yet Canada has fallen far behind its peers by not keeping up with advances in standard-of-care technology and implementing best practices.
- Canada needs better wound care policies to support best practice and pathways to ensure appropriate outcomes, access to wound care experts and basic education for patients and health-care professionals (from nurses and family physicians to surgeons and chiropodists) and access to evidence-based technology and products.

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<sup>i</sup> CIHI National Health Expenditure Trends, 1975 to 2011.

<sup>ii</sup> Ontario Wound Care Interest Group. "Fewer Wounds, Faster Healing: Framework for an Ontario Wound Care Strategy. October 2012.

<sup>iii</sup> Diabetes Canada and the Centre for Spatial Economics. "The Economic Impact of Offloading Devices for the Prevention of Amputations in Ontario." 2015.

<sup>iv</sup> Leaf Healthcare Inc, "The Financial Impact of Pressure Ulcers." 2016.