



Australian Government

Department of Veterans' Affairs



Utilising a health promotion based
quality improvement program to
**put the pressure on venous leg ulcers
and prevent skin tears**

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Wounds Australia 2018

ADVANCING HEALING HORIZONS:
TOWARDS THE CUTTING EDGE IN WOUND CARE



Declaration of Financial Interests or Relationships

Speaker Name: Associate Professor Michael Woodward

I have no financial interest or relationship(s) to disclose

So what is the Evidence - Practice Gap?



Venous leg ulcers and skin tears are among the most common wounds treated in General Practice.



Up to 50% of venous leg ulcers are not healed at 9 months and most people with recurrent ulcers experience the condition for an average of 15 years



Between 40% and 60% of patients with venous leg ulcers do not receive recommended treatment



43% of residents in aged care facilities experience a skin tear



Source:

Walker N, et al. New Zeal Med J. 2002.
Callam MJ, et al. Br Med J (Clin Res Ed). 1987.
Kruger A, Raptis S, Fitridge R. Aust NZ J Surg. 2003.
Woodward M. Primary Intention. 2002.
Hahnel E, et al. Journal of Tissue Viability. 2016.

And in the veteran population.....

5,000+

In a 1 year period
5000+ veterans were
hospitalised with an
ulcerous wound



Almost 1 in 5 of those
hospitalised were
hospitalised more than
once in the same year

87%

Up to 87% of veterans at high risk
of a skin tear due to regular use of a
potent topical corticosteroid, did not
receive an emollient dispensing

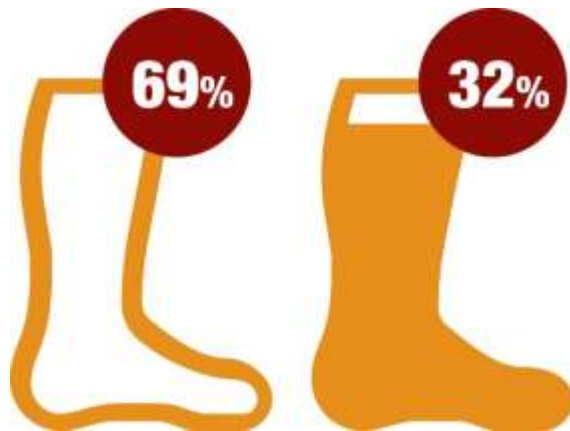


Source:
DVA Health Claims Database, University of South Australia, QUMPRC. [Accessed July 2016]

Best practice results in the prevention of skin tears and faster healing times for venous leg ulcers.



73% of venous leg ulcers will be healed at 12 weeks with compression therapy, compared to 31% without



In patients who regularly wear a compression stocking recurrent venous leg ulcers can be reduced to 32% at 5 years compared to 69% in those who do not



The application of an appropriate skin moisturiser twice daily reduces skin tears by between 34% to 46%



Source:

So W, et al. Hong Kong Med J. 2014.

Nelson EA, et al. J Vasc Surg 2006.

Dinn E, Henry M. Phlebology. 1992.

Carville K, et al. International Wound Journal. 2014.

Finch K, et al. Wound Practice and Research. 2016.

Translating the evidence into practice: The Veterans' MATES approach



Veterans' MATES Since 2004

We use the Australian Government Department of Veterans' Affairs routinely collected health claims data



Contains hospital records including diagnosis and procedures



Includes pharmacy, medical and allied health records including doctor visits, radiology and pathology claims



Client data are updated weekly, health claims data are updated monthly



Four times a year GPs receive information about the veterans they treat who may have the targeted medication or health-related problem. The information includes:



A list of the patient's relevant medicines and health services



Notes identifying the potential problems



The opportunity for GPs to note the actions they will take



Supportive evidence based educational material



Access to a clinical support phone line staffed by pharmacists, and the Veterans' MATES website www.veteransmates.net.au



Veterans receive information specifically tailored for the veteran community



And pharmacists and other members of the health care team receive supportive evidence based information



And then the intervention is evaluated



Stakeholder surveys assess participant satisfaction, changes in awareness, knowledge and self-reported behaviour change



Cohort studies and time series analyses assess changes in use of medicines and health services



Cohort studies assess changes in health outcomes, such as changes in rates of hospital admissions



The approach includes significant stakeholder engagement



A veteran and practitioner reference group provide advice, guidance, and feedback.



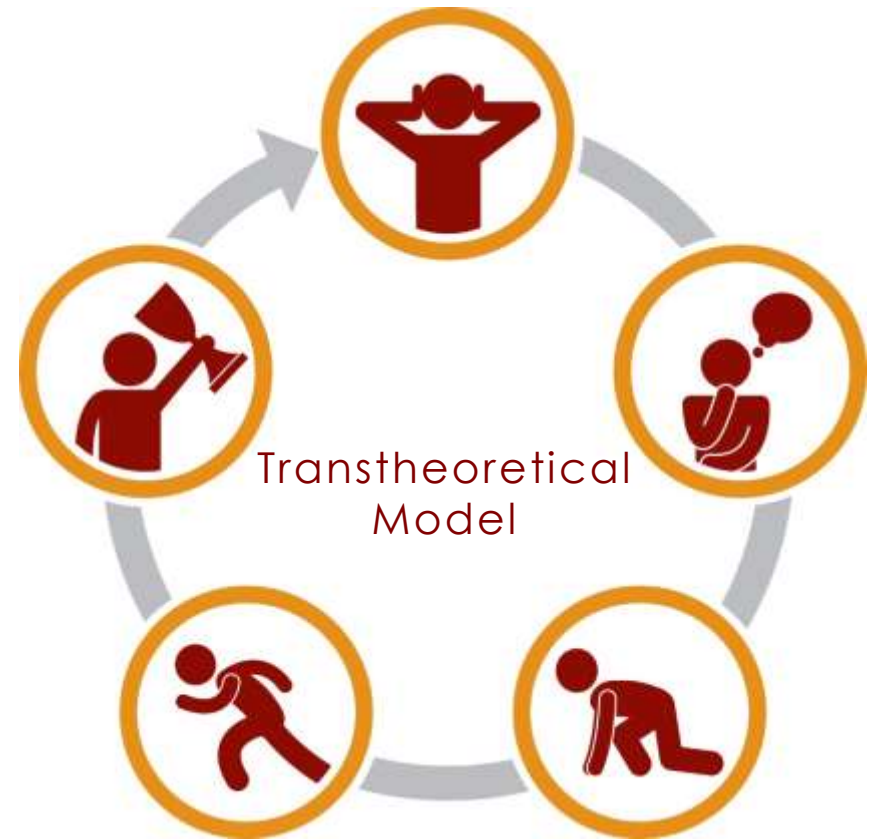
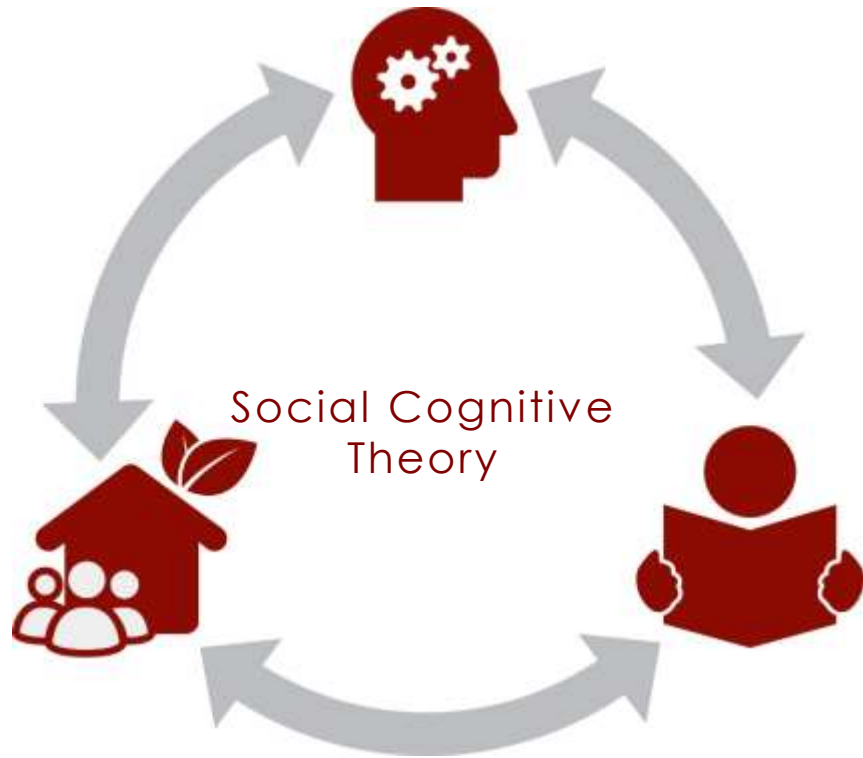
Educational materials are developed with the support of a multidisciplinary clinical reference group and peer reviewed.



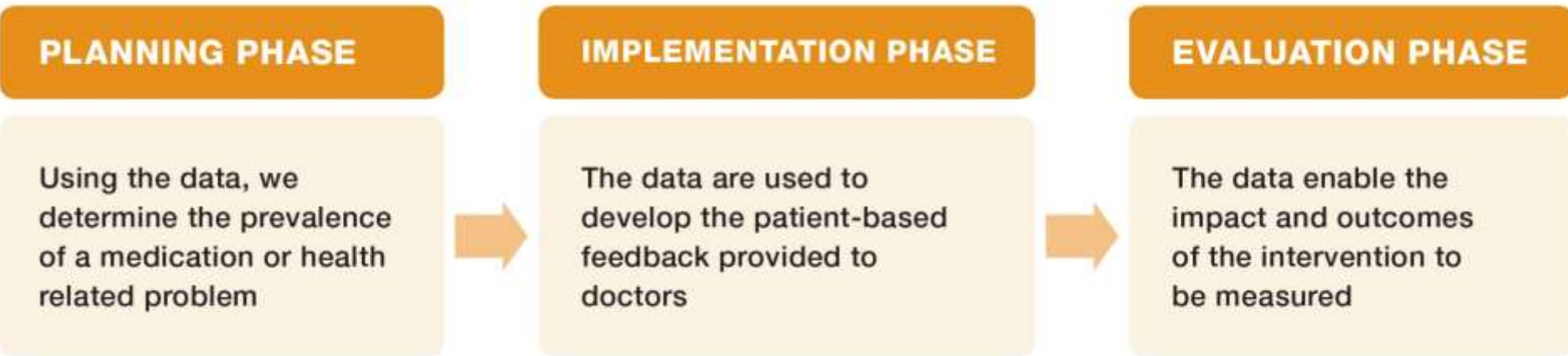
Topics and materials are endorsed by a national representative editorial committee.



Is underpinned by behavioural theories and models



And the data are used to inform every phase of the program



So can Veterans' MATES make a difference to the management of venous leg ulcers & skin tears?



The intervention commenced in June 2017 and targeted....



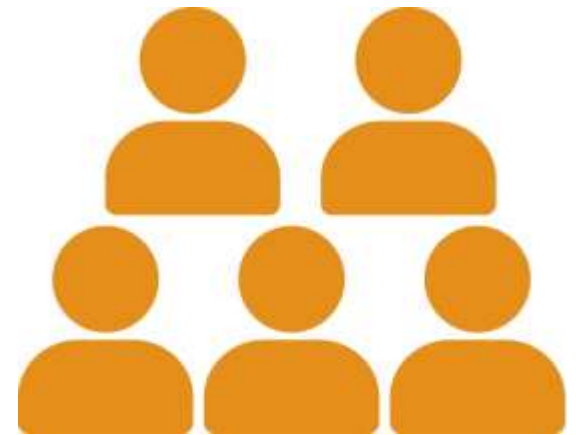
14,000⁺
GPs



8,000⁺
Pharmacists



2,500⁺
RCFs



52,000⁺
Veterans



Advice to health professionals included:



The benefits of
compression
therapy



Strategies to
encourage
patients to
persist with
treatment



Where to
refer
patients

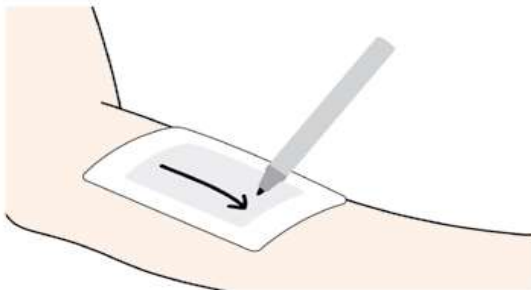


Diagram 1: Dressing your skin tear

Cover the wound with a non-stick dressing pad. Draw an arrow on the top of the dressing to indicate the direction for removing. The arrow should be pointing in the same direction as the edge of the skin flap.

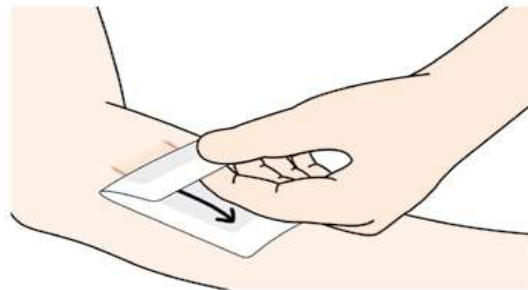


Diagram 2: Safe removal of the dressing

Remove the dressing slowly and close to the skin, using the arrow to guide you. **Never pull against the direction of the skin flap.**

Information for
veterans included a
guide to looking
after skin tears

What did we achieve?

Filling the evidence- practice gap

Responding health professionals were not previously aware that the majority of venous leg ulcers heal within 12 weeks with compression therapy



1/3

**GPs were
not aware**



1/4

**Practice
nurses were
not aware**



2/3

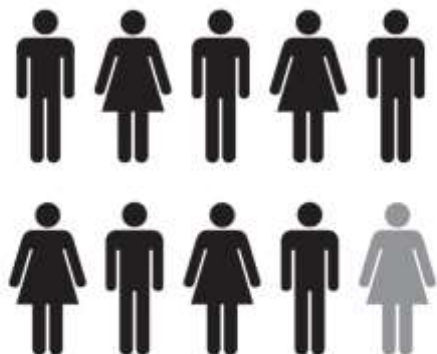
**Pharmacists
were not
aware**



1/4

**RACFs were
not aware**

What did we achieve?

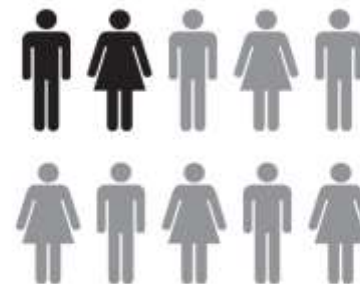


9 out of 10 veterans found the skin tear tips helpful

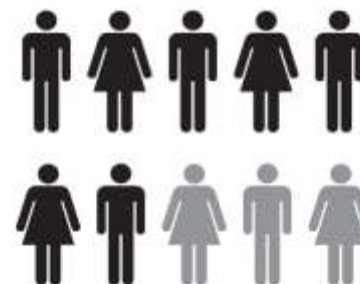
99%

99% GPs said they were likely to use compression therapy

BEFORE



AFTER

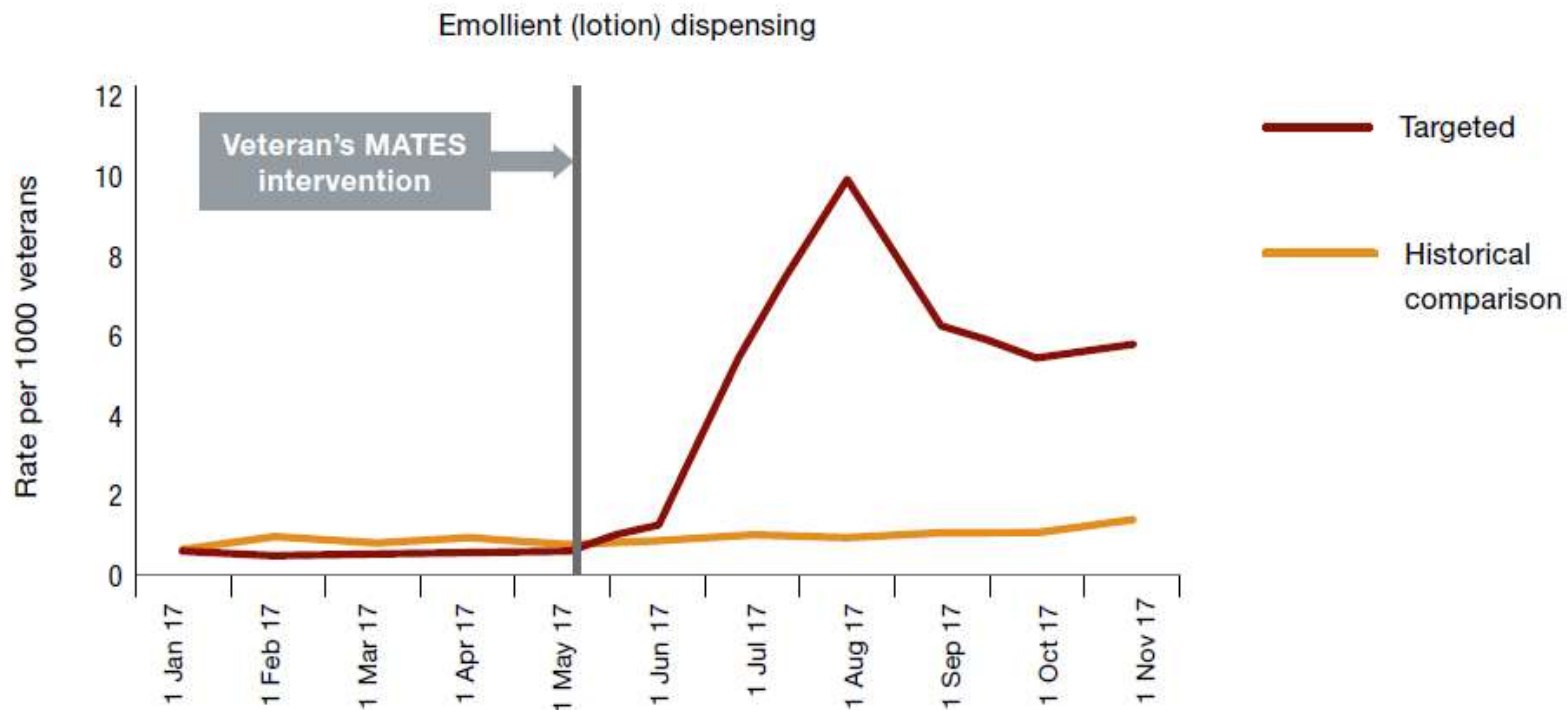


GPs became more confident in coordinating care for venous leg ulcer



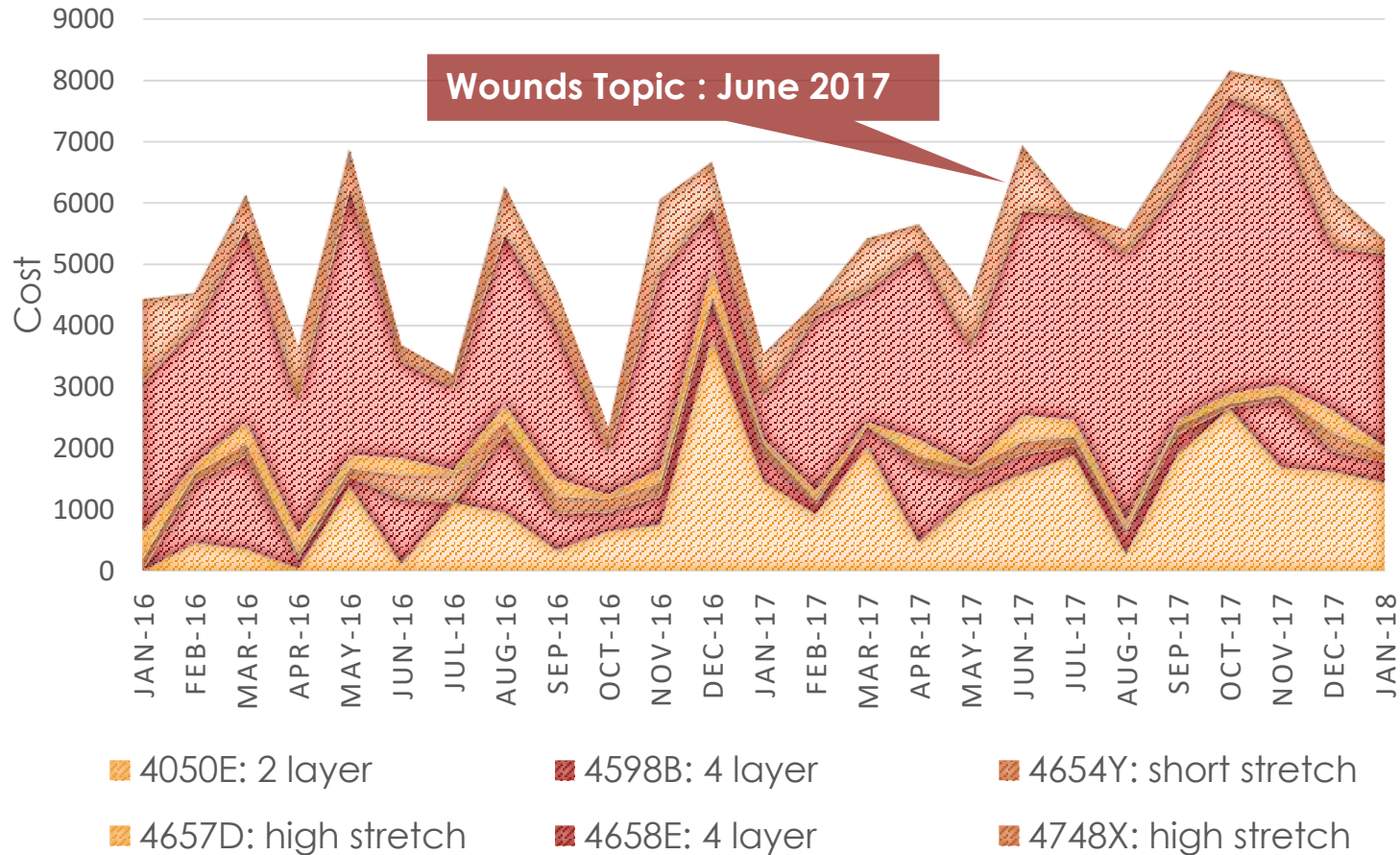
What did we achieve?

INCREASE IN THE DISPENSING OF APPROPRIATE MOISTURISER



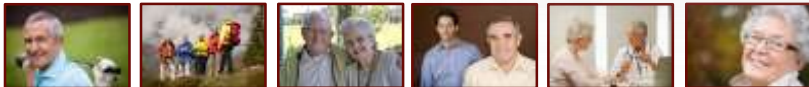
What did we achieve?

COST OF COMPRESSION BANDAGES



This represents a 10% increase in people receiving compression bandages after the intervention

So what has contributed to
Veterans' MATES success?



The contributing factors



A multidisciplinary,
collaborative approach



Significant
stakeholder
engagement



Grounded in
behavioural
theories and
models

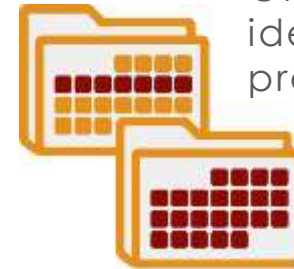


Clinical
information
is evidence
based



Methodologically
rigorous analytics

Independently
audited data and
security standards



Only target
identified
problems

Veterans' MATES
is funded by the
Australian Government
Department of Veterans' Affairs
and provided by
The University of South Australia



www.veteransmates.net.au

Declaration of Financial Interests or Relationships

Speaker Name: Associate Professor Michael Woodward

I have no financial interest or relationship(s) to disclose

