

An Innovative Wound Care Service Model Facilitates Overcoming Wound Care Disparities

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Introduction

A health care disparity exists when there is a higher burden of illness or injury experienced by one group compared to another. Race or ethnicity, gender, gender, education, age, disability, and geographic location all have an impact on health care outcomes. Health disparities are often linked to social and economic factors. The larger the disparity, the worse the health care outcome. It is particularly important to consider social determinants of health in the at-risk chronic wound patient population.

Methods

A recent study published in the *Journal of the American Heart Association* assessed nearly 189,000 Medicare fee-for-service patients in over 31,000 different zip codes having undergone a major lower extremity amputation between 2010-2018. The investigators found that ZIP codes with a greater population of Black residents had higher rates of amputation than ZIP codes with lower proportions of Black residents. ZIP codes of lower social economic status also exhibited higher rates of amputation compared to those of higher SES. We used this information to compile a crosswalk of the patients seen by Woundtech clinicians in the LA and Miami metropolitan areas to compare our company outcome measures.



Demographics data of Woundtech major service area in Miami metropolitan area¹ vs. Whole Miami metropolitan area²

	Avg. Income per household	Avg. persons per household	% Population 65 and older	M/F Sex ratio	% Hispanic (any race)	% Black/African American	% White, Non-Hispanic
WTN service area in Miami	44,193.27	2.44	16.6%	93.2%	44.4%	24.5%	29.7%
Whole Miami Metropolitan Area	46,893.24	2.36	16.7%	94.1%	42.8%	22.4%	33.1%

[1] defined as zip codes that WTN has at least 20 patients referrals from 2019 to 2021
[2] defined as Miami-Fort Lauderdale-West Palm Beach Metro Area with 184 zip codes

Demographics data of Woundtech major service area in Los Angeles metropolitan area³ vs. Whole Los Angeles metropolitan area⁴

	Avg. Income per household	Avg. persons per household	% Population 65 and older	M/F Sex ratio	% Hispanic (any race)	% Black/African American	% White, Non-Hispanic
WTN service area in Los Angeles	58,039.85	3.25	11.5%	97.0%	57.1%	6.3%	21.9%
Whole Los Angeles Metropolitan Area	68,230.97	2.90	12.1%	97.2%	44.9%	7.7%	30.5%

Wound Type	Woundtech Cost / Patient	Industry Average	Approx. Savings / Patient	Cost Savings %
Arterial Ulcer	\$3,455	\$11,875	\$8,420	70.9%
Diabetic Ulcer	\$3,351	\$6,651	\$3,301	49.6%
Pressure Ulcer	\$2,631	\$5,593	\$2,963	53.0%
Surgical Wound	\$2,611	\$8,438	\$5,827	69.1%
Venous Ulcer	\$3,855	\$11,092	\$7,238	65.2%

Wound Type	Woundtech Days to Heal Avg.	WoundExpert Days to Heal Avg.
Abrasion	30	36
Allergic Reaction	35	25
Arterial Ulcer	83	81
Burn	36	42
Cellulitis	48	61
Diabetic Ulcer	72	90
Hidradenitis	106	108
Incontinence Associated Dermatitis	29	41
Laceration	32	38
Lymphedema	60	70
Malignant Wound	55	88
Other	52	60
Pressure Ulcer	59	68
Radiation Wound	32	135
Skin Tear	24	30
Soft Tissue Necrosis	82	74
Surgical Wound	60	73
Trauma Wound	43	52
Vasculitic Ulcer	62	87
Venous Ulcer	64	70
Total Average Days To Heal	56	67

Woundtech patients heal **20% FASTER** on average

Results

The Woundtech approach consistently yielded better healing outcomes for the diverse patient population we serve. Based on calculations from the first 10,000 visits performed in 2022, we determined that our providers spent an average of 36.6 minutes of face-to-face interaction time with each patient at each visit. In contrast, most U.S. physicians spend between 13 and 24 minutes with patients. As a result, our patients were less likely to end up seeking care in emergency departments and had fewer in-patient hospital admissions.

Conclusion

Patients receiving care in their homes by Woundtech dedicated wound care trained advanced practice clinicians can overcome inequities in healthcare based on the geographic location. This model of care has been shown to overcome what was previously believed to be unavoidable differences in health outcomes.

Discussion

Utilization of healthcare services is often disjointed in areas where health care disparities persist thus resulting in inefficiency and poor outcomes. Given increased awareness of health care disparities, incorporating the Woundtech model of care helps to overcome obstacles to healing in an at-risk population. Chronic wounds have a significant impact on quality of life and are a drain on the health care system. The number of patients suffering with chronic wounds is increasing. Woundtech clinicians make the best use of resources to produce the greatest long-term results for each patient in need throughout the US.

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