

# Evaluating Supported Self-Management and Cost-Effectiveness in a newly established Wound Care Clinic: A Comprehensive Analysis of 3 patient's journeys

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## Introduction

The establishment of a wound care clinic presents an opportunity to enhance patient outcomes through supported self-management while also addressing healthcare costs. This study evaluates the impact of a newly formed wound care clinic on both clinical effectiveness and economic efficiency. The clinic implemented a supported self-management approach, empowering patients to manage their wounds effectively at home, thereby reducing the frequency of clinical visits and associated healthcare costs.

Preliminary results indicate improved patient outcomes with a reduction in healthcare costs, highlighting the value of supported self-management in wound care. This provides evidence supporting the integration of self-management practices in specialised clinics, demonstrating that such models can be both clinically beneficial and cost-effective.

## Method

The newly established wound care clinic operates once a week for a 4-hour session. The three patients discussed were triaged prior to their clinic visit to determine their suitability for attendance based on wound type, severity, and overall health status. During each clinic session, a Tissue Viability Nurse (TVN) performed holistic assessments, which included evaluating the patient's wound, overall health, lifestyle factors, and psychosocial needs.

The assessment process aimed to identify patients who could engage in self-management practices. For those deemed appropriate, the TVN provided tailored education, guidance, and resources to empower the patients to manage specific aspects of their wound care independently at home. The self-management plan included instructions on wound dressing, hygiene, monitoring for signs of infection, and when to seek further medical attention.

Data was collected on patient outcomes, including wound healing progress and frequency of clinic visits. Cost-effectiveness was evaluated by comparing healthcare resource utilisation and associated costs before and after the implementation of the clinic's supported self-management approach. The results were analysed to assess the effectiveness of the clinic model in improving patient outcomes and reducing healthcare costs.

## Discussion

The results from the three patient cases demonstrate the effectiveness and cost-efficiency of the wound care clinic's supported self-management approach.



**Improved Healing:** All three patients experienced better healing rates after transitioning to supported self-management, indicating that a combination of specialised TVN assessments and patient empowerment enhances wound healing more effectively than traditional care.



**Reduced Healthcare Visits:** were recorded, easing healthcare burden and enhancing patient satisfaction. Baseline data prior to SSM commencement was as follows: Patient 1: 17 PN visits, Patient 2 - 120, and Patient 3 - 40.



**Cost Savings:** Supported self-management led to significant savings, with the three patients collectively saving £3,620, demonstrating the financial benefits for both healthcare providers and patients.



**Patient Empowerment:** Patients managing their wound care highlights the importance of education and engagement. TVN-tailored self-management plans can potentially boost patient confidence and adherence, contributing to positive outcomes.



**Scalability:** The success of the clinic suggests it could be scaled to other patient populations and wound types, potentially improving healthcare efficiency and outcomes, especially in chronic wound management.



**Long-Term Benefits:** While focused on short-term outcomes, supported self-management may offer long-term benefits like sustained healing, reduced recurrence, and continued cost savings, warranting further study

## Results

### Patient 1

- **Cellulitis that progressed into a leg ulcer** – Initially treated by the Practice Nurse (PN) for 12 weeks without significant improvement. The patient was referred to the wound care clinic and assessed as capable of engaging in Supported Self-Management. Patient attended the clinic four times over the next 7 weeks, during which the ulcer fully healed.  
**If the patient had continued treatment based on previous PN regime, it is estimated a minimum of 21 additional appointments to achieve the same outcome, incurring a total cost of £420.**

### Patient 2

- **Haematoma resulting from antiphospholipid syndrome** – Receiving daily care from PN for 20 weeks with limited progress. The patient was referred to the wound clinic and transitioned to a supported self-management plan as soon as they were capable. In 19 weeks, the patient attended the clinic 7 times, during which time the haematoma fully healed.  
**If the patient had continued daily PN visits, it would have required an additional 120 appointments, resulting in a projected cost of £2,400**

### Patient 3

- **Non healing wound following an abdominal appendectomy** – PN had been treating the wound for 12 weeks with minimal progress before referring to the wound clinic where a supported self-management was initiated. Over 12 weeks, the patient attended 6 TVN clinic appointments, during which the wound fully healed.  
**If the patient had continued with the PN, it would have required an additional 40 appointments, with an estimated cost of £800.**

**The transition to the wound care clinic and supported self-management approach led to quicker healing and a substantial reduction in the number of healthcare visits, resulting in significant cost savings.**

## Conclusion

The wound care clinic's focus on supported self-management has shown significant clinical and cost benefits. The three cases demonstrate that empowering patients to manage their care has potentially accelerated healing, reduced healthcare visits, and reduced costs, essentially releasing capacity. The success of this model highlights the value of holistic assessments and personalised care

