## Wound Care Stakeholders

October 15, 2010

Nancy Wilson Agency for Healthcare Research and Quality Room 3216 540 Gaither Road Rockville, MD 20850

Dear Ms. Wilson,

On behalf of the Alliance of Wound Care Stakeholders ("Alliance"), I am submitting recommendations to the National Health Care Quality Strategy and Plan. We understand that HHS is seeking feedback around a framework for developing the National Quality Strategy, including the identification of guiding principles and specific priorities and goals, strategies for stakeholder engagement, and defining the role states play. The Alliance of Wound Care Stakeholders is a multidisciplinary consortium of 19 physician, clinical, provider, manufacturer, and patient organizations whose mission is to promote quality care and patient access to wound care products and services.

Our recommendations include the following:

Question 3: Using the legislative criteria for establishing national priorities, what national priorities do you think should be addressed in the initial National Health Care Quality Strategy and Plan in each of the following areas. Better Care: quality, safety, access, and reliability and Affordable Care: Care that reins in unsustainable costs for families, government, and the private sector to make it more affordable; and Healthy People/Healthy Communities: The promotion of health and wellness at all levels.

Wound care issues impact all three areas listed above.

There are 6 million chronic wound patients in the United States, affecting 2% of our population. We currently spent \$8.5 billion dollars for wound care products and services, and approximately \$20 billion dollars annually for wound care treatment. Diabetic foot ulcers, which affect 15% of all diabetics, are the most common cause of non-traumatic amputation in the United States and account for 80% of wound care costs. Pressure ulcers affect 15% of the elderly and are increasing at a rate of 5% per year due to our aging population. (CMS Medicare Coverage Advisory Committee, 29 March 2005.) These patients are largely from vulnerable populations. Many are of advanced age, and many are minorities. Many if not most patients are diabetics, a high percentage are paralyzed, and many are not native English speakers. Extensive coordination of care is needed on most patients, and there is high utilization of ancillary testing.

Therefore, due to the increase of obesity in the U.S population which may manifest itself in diabetes and thus diabetic foot ulcers, the Alliance recommends that there should be national priorities to establish performance measures specifically directed at the area of WOUND CARE, and research to build the evidence base for wound care.

<u>Question 4:</u> What aspirational goals should be set for the next 5 years, and to what extent should achievable goals be identified for a shorter timeframe?

The Alliance recommends two goals for the next five years:

- 1. Measures directed at Care Coordination: Wound care issues represent a common reason for Preventable Readmissions (often due to infection and pain). Measures directed specifically at care coordination for patients with wounds would reduce preventable re-admissions.
- 2. **Measures allowing adherence to protocols:** Excellent protocols for wound care exist but are poorly implemented, in part because of the lack of appropriate measures.

<u>Question 5:</u> Are there existing, well-established, and widely used measures that can be used or adapted to assess progress towards these goals? What measures would best guide public and private sector action, as well as support assessing the nation's progress to meeting the goals in the National Quality Strategy?

Currently, there are NO current NQF measures directed at diabetic foot ulcers. However, there are guidelines that would care organizations such as the Wound Healing Society, National Pressure Ulcer Advisory Panel and Wound Ostomy Incontinence Nurses Society have that addresses those for such issues as pressure ulcers and diabetic foot ulcers. In addition, the Alliance will be releasing a paper that addresses principles of wound care research that will be able to be used.

<u>Question 6:</u> The success of the National Health Care Quality Strategy and Plan is, in large part, dependent on the ability of diverse stakeholders across both the public and private sectors to work together. Do you have recommendations on how key entities, sectors, or stakeholders can best be engaged to drive progress based on the National Health Care Quality Strategy and Plan?

The participating organizations within the Alliance would be pleased to participate. There currently are 19 diverse organizations which are listed in the Alliance website (<a href="www.woundcarestakeholders.org">www.woundcarestakeholders.org</a>). Some of these organizations are also NQF members (e.g., American Physical Therapy Association, Association for the Advancement in Wound Care, American College of Surgeons, Society for Vascular Medicine.)

The Alliance appreciates the ability to participate in this process and we look forward to work with you in the future. Please contact me if you have questions.

Sincerely,

Marcia Nusgart R.Ph. Executive Director

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