

Improving Clinical, Economic and Risk Outcomes with WoundRounds: A Case Study at Wexner Heritage Village

Background

Wexner Heritage Village is one of Central Ohio's most diverse and comprehensive senior housing and healthcare organizations. With services spanning in-home care, rehabilitation, long term care, and hospice; Wexner Heritage Village is fortunate to play a role in the lives of tens of thousands of people each year.

Challenge

The wound care situation at Wexner had been described as “too many cooks in the kitchen,” according to Thomas Widney, Executive Director of Rehabilitation and Long-Term Care. Wound management was disorganized and did not meet the organizations standard for quality of care and survey outcomes.

Approach

Wexner reached out to WoundRounds with the primary objective to better organize wound care and address survey issues. The facility was already in the process of implementing an EMR and decided do work on both projects simultaneously. Wexner decided a wound management system couldn't wait on the EMR because wounds were an area of risk to the patients and to the facility. Widney says, “Every day we allocate and reallocate resources. We diverted funding to WoundRounds because we understood the need. There's always the risk for a pressure-related wound in the building—with or without an EMR. We didn't want to delay a wound management solution because without it, we were shooting blind on wounds.”

WoundRounds was implemented right on schedule. User training was provided by WoundRounds clinical experts and the wound management system was connected to the IT network. As the EMR project unfolds, the Wexner IT plan is to integrate WoundRounds with the enterprise system and to share the wound data as part of the medical record.

Results

WoundRounds is providing great clinical outcomes to Wexner. “Wounds are healing, and the whole wound management system is more organized,” according to Widney. The wound care team has reports to track overall wounds and individual patient progress that make it easy to identify patients with challenges. Widney explains, “The clinical team can see that a patient has a Braden score of 18 and receive prompts from the WoundRounds system on appropriate interventions. As a non-clinician, I use the overall reporting functions to see facility-wide trends with easy-to-understand red or green arrows which gives me confidence that we're continually improving wound management.”

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Wexner centralized the wound assessment process after receiving training from WoundRounds. Now wounds are being consistently staged, which solved a problem previously identified during state surveys.

Widney reports that WoundRounds has financially benefited Wexner by reducing spending on wound care supplies, better utilizing nursing resources, and treating more wound patients in-house. Wexner is sending fewer patients offsite to wound centers, and better capturing these revenues.

Besides clinical and financial outcomes, WoundRounds has reduced the risk profile for the facility. Wexner has received no survey citations since WoundRounds has been implemented. Widney also adds that family communication surrounding wounds has improved. He explains, "We photograph wounds upon admission and as part of the WoundRounds documentation. We share this information with family members to lay the groundwork to prevent unexpected issues down the road."

Widney shares, "WoundRounds has provided the payoff we hoped to achieve. For any LTC facility, pressure ulcers represent one of the top risk areas in terms of surveys, patients, and overall liability. But with WoundRounds, this risk is controllable. We're tracking and addressing pressure ulcers with proper protocols, care coordination and management. We have a direct payoff with pressure ulcers thanks to WoundRounds."

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