Novel Intervention* Designed To Reduce Incidence Of Hospital Acquired Pressure Ulcers (HAPU’s) Results In Improved QALY And Cost Savings

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INTRODUCTION & METHODS

This analysis was designed to measure the cost effectiveness of a novel intervention* designed to reduce the incidence of PU’s, when used as an adjunct to standard of care (SOC)

• Incremental Cost-Effective Ratio’s (ICER) evaluate cost effectiveness of medical interventions

• EQ-5D method utilised; uses 5 health-outcome dimensions reported by the patient: Mobility; Self Care; Pain/Discomfort; Anxiety/ Depression; Usual Activities

• Universal Prevention Pathway (SOC) for PU Prevention was identified, costed and compared to the SOC with novel intervention* as an adjunct. Inputs were derived from published data; NICE protocols; PU prevention expert’s guidance

MODEL SCENARIO

210 bed Acute Care hospital scenario

- 10 inpatient wards, each with 21 beds
- 12,181 Admissions per year
- 5.6 Average Length of Stay
- 147 Nurses; 3 shifts; 5 beds per nurse
- 14% buffer/headroom
- 80% PU Incidence rate reduction
- 1.6% PU Incidence Rate Category 2-4

Costs included:
- Costs for universal prevention e.g. heel off loading
- Cost of the novel intervention*
- Healthcare Professional training time
- Healthcare Professional time to scan
- Novel intervention* cleaning time

RESULTS

1.6% Current Universal Prevention Pathway

Prevention (£870k) + Treatment (£1,020k) = £1.69m

Vs.

5.3% SEM as Adjunct to Universal Prevention Pathway

Prevention (£810k) + Treatment (£200k) = £1.01m

Cost savings of £680k (£1.69m - £1.01m)

CONCLUSIONS

1. Universal Care Pathway (SOC) is associated with existing cost
2. Universal prevention focuses on a whole-body rather than anatomically targeted approach
3. Novel Intervention as adjunct to SOC indicates a dominant QI, as it is more effective and less costly than the current SOC

UNIVERSAL PREVENTION PATHWAY BASED ON NICE CG 179

On Admission Risk Assessment

No Risk Identified

High Risk Foam Mattress

Daisy ISA

During Stay Change of Status

Risk Assessment

End Universal Prevention

End

Education every 8 hours

Pressure relieving chair

High Risk Foam Mattress

Daily ISA

Care Planning

Patient and Carer Info

Daily VSA

End

Change of Status

Pressure relieving chair

High Risk Foam Mattress

Daily ISA

Care Planning

Patient and Carer Info

Daily VSA

End