



Beyond measurement

Explore the challenges in chronic wound management and discover practical solutions to integrate services, enhance community-based care, and align with the Darzi Report's focus on prevention, patient empowerment, and improved outcomes.



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Foreword

“Beyond measurement” is about looking deeper than the numbers or the size of a wound. It’s about recognising the complex challenges faced by your chronic wound care teams and equipping you with the skills and tools to act efficiently and confidently. At the same time, it’s about empowering patients to take an active role in their care.

While measuring wounds is an important step, building on from that, the goal is to create a connected care system that places patients at the centre, ensuring practices that are both sustainable and scalable.

Let’s look at the current state of chronic wound care, some of the core challenges, and how you can leverage technology to overcome them.



There is a need for innovative solutions to improve wound healing, prevent harm, increase productivity of staff, and produce financial savings.



**National Wound Care
Strategy Programme**

The current state of chronic wound care

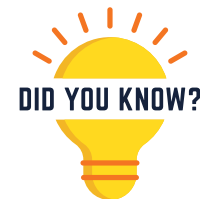
More than 3.8 million people in the UK are living with chronic wounds, and how these wounds are managed hugely impacts a person's quality of life.

Managing chronic wounds is complex and often requires ongoing care from multidisciplinary teams (MDTs) including community nurses, tissue viability specialists, podiatrists, pharmacists, and other healthcare professionals.

With a lot of chronic wound care taking place in the community, it's unsurprising that **81%** of the total annual NHS cost (£5.6 billion) is incurred there. The service is facing pressures that need to be addressed urgently.

What are chronic wounds?

A wound is considered to be chronic if it hasn't started to heal after 4 to 12 weeks despite treatment. The four main types of chronic wounds are pressure ulcers, diabetic ulcers, arterial ulcers, and venous ulcers.



About **30%** of untreated chronic wounds can lead to amputation, and five years post-amputation the mortality rate is a staggering **50%**.

3.8 million

people in the UK are living with chronic wounds

£5.6 billion

per year is spent by the NHS on unhealed wounds, with a mean cost of **£3,700** per unhealed wound

2.5 times

more costly to manage unhealed wounds vs. healed wounds



— **Stephanie Lowen**

Self-management specialist

Steph is a self-management specialist who has worked in the NHS for 15 years. She has successfully implemented self-management in both acute and community settings, and implemented the model and training nationally.



In Leeds, we began tracking discharges monthly, simply tallying each one, and after a month, and by the time we know it, we had discharged **133 people**.

In one month, we saved around £63,000 for the NHS through discharges.

Self-care is all about enabling patients to know what to do if things don't go to plan, building confidence in their own decisions.

1

Key challenges in wound care

Addressing the challenges of inequity, disconnection, disengagement, and missed opportunities in technology within chronic wound care.



Care isn't as **inclusive** as it should be

Chronic wounds affect millions of people in the UK, yet care pathways often fail to meet the needs of our diverse population. Achieving equity in care means addressing biases in detection and treatment and creating solutions that ensure consistent, inclusive outcomes.

Research by Kumbi Kariwo, Equality and Inclusion Project Lead at Birmingham Community Healthcare NHS Foundation Trust, highlighted a critical gap:

Clinicians often feel less confident detecting pressure ulcers in patients with dark skin tones.

This leads to delayed diagnosis, with ulcers on dark skin tones frequently identified only at stages three or four, increasing the risk of complications and poorer outcomes.



There is a **disconnect** in chronic wound care

Fragmented systems and communication barriers can delay treatment, hinder collaboration, and increase risk for patients.

Limited MDT collaboration

Multidisciplinary teams working across acute and community settings often lack real-time access to the same patient records, leading to duplication, miscommunication, or delays in treatment.

Fragmented patient data

Patient information is often recorded across different systems, making it difficult to track progress or respond quickly to changes.

Long healing journeys

Around **30%** of wounds in community settings are categorised as hard to heal. Without regular, coordinated updates, signs of deterioration can go unnoticed.

Variations in care

One of the primary concerns highlighted by the [NWCSP](#), is inconsistency that stems from a mix of relying on outdated approaches and not fully adopting modern, evidence-based practices.

Limited use of digital tools

Despite technological advances, fewer than **20%** of home visits and less than **6%** of GP surgery visits include digital imaging as part of wound assessment ([NWCSP](#)).



NHS workers spoke to us about feeling overstretched, undervalued and struggling to get support in a chaotic system.

— Julian McCrae, Engage Britain



62% of junior doctors said they were currently suffering from depression, anxiety, stress, burnout, emotional distress, or another mental health condition, relating to or made worse by their work or study.

— British Medical Association 2022

Technology isn't being fully leveraged to draw insights from data

Data is only as valuable as the insights it generates. Without clear, actionable insights, data risks being overwhelming rather than empowering.

Wound care generates a wealth of clinical information—photos, notes, treatment plans—but without structure, it can become a time-consuming burden to sift through rather than providing actionable insights.

Consultant nurses reported spending 16.5 hours on documentation per week in a report by Nuance.



Patients aren't as engaged as they should be

Self-care and self-management empowers patients to lead fuller lives while giving you the capacity to focus your efforts as a clinician where they're most impactful.

With the right tools and support, this model can improve patient outcomes, ease pressure on services, and benefit everyone involved.

However, misconceptions about the challenges often create unnecessary barriers, making it feel like an uphill battle to implement self-care effectively.

This means that all of the benefits of self-care aren't fully realised.



Is self-care the same thing as self-management?

The terms are often used interchangeably, but there's a slight nuance.

Self-care focuses on the everyday actions patients take to maintain their health, like keeping wounds clean or recognising when something isn't quite right.

Self-management takes this a step further, involving patients in making decisions about their care and equipping them with the tools and confidence to take action when they notice a change in their health.





Closing the gaps

Practical guidance collected from experts on steps you can start taking today to improve your chronic wound care delivery.



Understand the benefits of self-care

Let's look at some of the success stories and operational impacts of embedding self-management into your practice, shared with us by Stephanie Lowen, self-management expert.

Better outcomes, even when challenges arise

Self-management empowers patients to understand their wounds and seek support when needed. It equips them with the tools to handle setbacks effectively.

Improved mental and physical health

Patients who are self-caring often feel more in control and less restricted by their condition, allowing them to live fuller, more independent lives.

Reduced clinician workload

Programmes that support self-management ease pressure on your clinical teams and have positive organisational impacts such as more appropriate patient discharges, lower waiting times, and cost savings.



Patient success story

An elderly patient managing a diabetic foot ulcer was able to maintain his independence and tend to his allotment while confidently reaching out for guidance when he noticed his wound worsened, because he knew his own care plan.



Patient success story

A woman with bilateral leg ulcers was able to attend her son's wedding after adopting a shared self-management plan. This not only boosted her confidence but also contributed to faster wound healing allowing her to be more active and independent.

Five steps to make wound care more inclusive

1. Start the conversation

Talking about skin tone can feel awkward, but avoiding the topic may lead to missed risks and patient harm.

Kumbi Kariwo's research highlights the importance of addressing these concerns with both colleagues and patients.

2. Remove bias

You should feel confident discussing skin tone professionally and treating each patient as an individual.

Focus on skin tone, not ethnicity, to avoid unconscious bias and ensure consistent care.

3. Understand the problem

Our diverse population deserves care that reflects their needs. Current systems often vary in how care is delivered, highlighting the need for standardised approaches across providers. The [2024 Darzi Report](#) emphasises the importance of consistency in care pathways to reduce variation and ensure equitable outcomes.

4. Be part of the answer

Effective solutions are co-produced with those who have lived experience. Involving a diverse group of experts from the onset ensures care that serves all patients equitably.

5. Be an advocate

Promote inclusive training by sharing resources and advocating for educational materials that reflect your communities. Ask patients for consent to share wound images, helping to expand the collective knowledge base.

Debunk common self-care myths

MYTH

Self-care means abandoning patients.

Self-care gives back independence while keeping oversight.

TRUTH

MYTH

Self-care increases the risk of something going wrong.

The risk is always there, but it's lower when patients know how to care for themselves.

TRUTH

MYTH

Self-management adds extra workload burden.

Self-care is a shift in the way you already work, it doesn't add extra tasks.

TRUTH

There are real challenges to implementing self-care successfully. But with the right tools and approach, you can overcome them and reap the benefits of self-care for your patients and your practice.



Interested in debunking more self-management myths?

[Read our latest article](#) breaking down 8 common misconceptions and the truth behind them.

Embed self-care into your practice

To integrate self-management into wound care, specialist Steph recommends the following:

1 Start with simple, meaningful conversations

Build rapport by discussing the patient's goals and adapting care plans around their priorities.

2 Focus on education and support

Provide patients with clear, accessible information and ensure they understand the "what, why, and how" of their care plan.

3 Challenge myths about self-management

Educate colleagues and patients that self-management doesn't mean patients are left to manage alone. It's about collaboration and shared responsibility.

4 Leverage digital tools

Digital tools that enable remote wound capture and virtual consultations make it easier for patients to track their progress and stay connected with their care team.

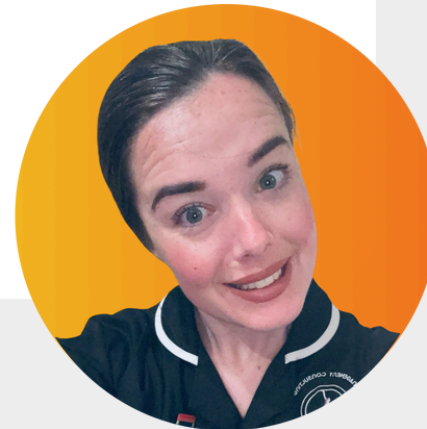




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Technology can be such a game changer for self-care, and it's not just about convenience but about adaptability to individual needs. We're able to reach more patients in ways that suit their lives, not just ours. That's key. And every success story just reinforces that we're on the right track.

— **Stephanie Lowen**

Self-management specialist





Digital pathways for the future of wound care

Embedding digital pathways into your care practice can help you align with Darzi's vision and enhance care quality, efficiency, and patient empowerment. Let's dive into what they are and how they can help.

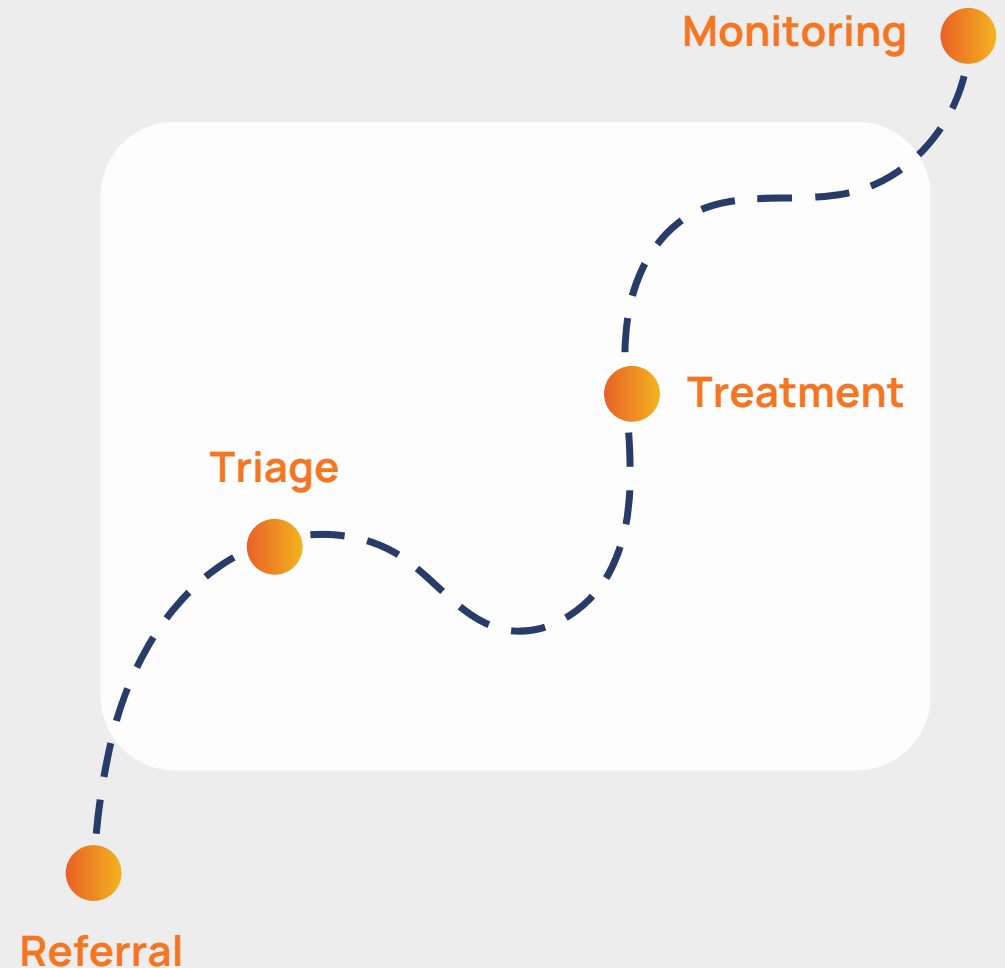
What is a digital pathway platform?

Implementing a digital pathway platform supports care delivery by integrating digital processes into the patient journey. This model allows your teams to manage clinical and administrative tasks more efficiently by combining remote data capture, automated workflows, and real-time information sharing.

A digital pathway platform that integrates with your existing systems like electronic patient records (EPRs) will ensure continuity and scalability across services.

Streamlining care delivery through technology will reduce pressure on health systems while removing clinical risk and maintaining high standards of care.

Digital pathways support healthcare providers to guide patients throughout the entire care journey.



Closing health inequalities through digital



The right digital tools are shaped by input from you and your patients to ensure that they're user-friendly and meeting the diverse needs of our communities. These are some of the capabilities that bring this to life:

Accurate wound tracking for all skin tones

High-resolution visual records provide your teams with a clear progression timeline, improving confidence in detecting subtle changes across diverse skin tones.

Image libraries for training and education

Image-sharing functionality empowers you and your clinical team to learn from real-world examples, including wounds on dark skin tones. These resources help close knowledge gaps and improve identification accuracy.

Standardising care across providers

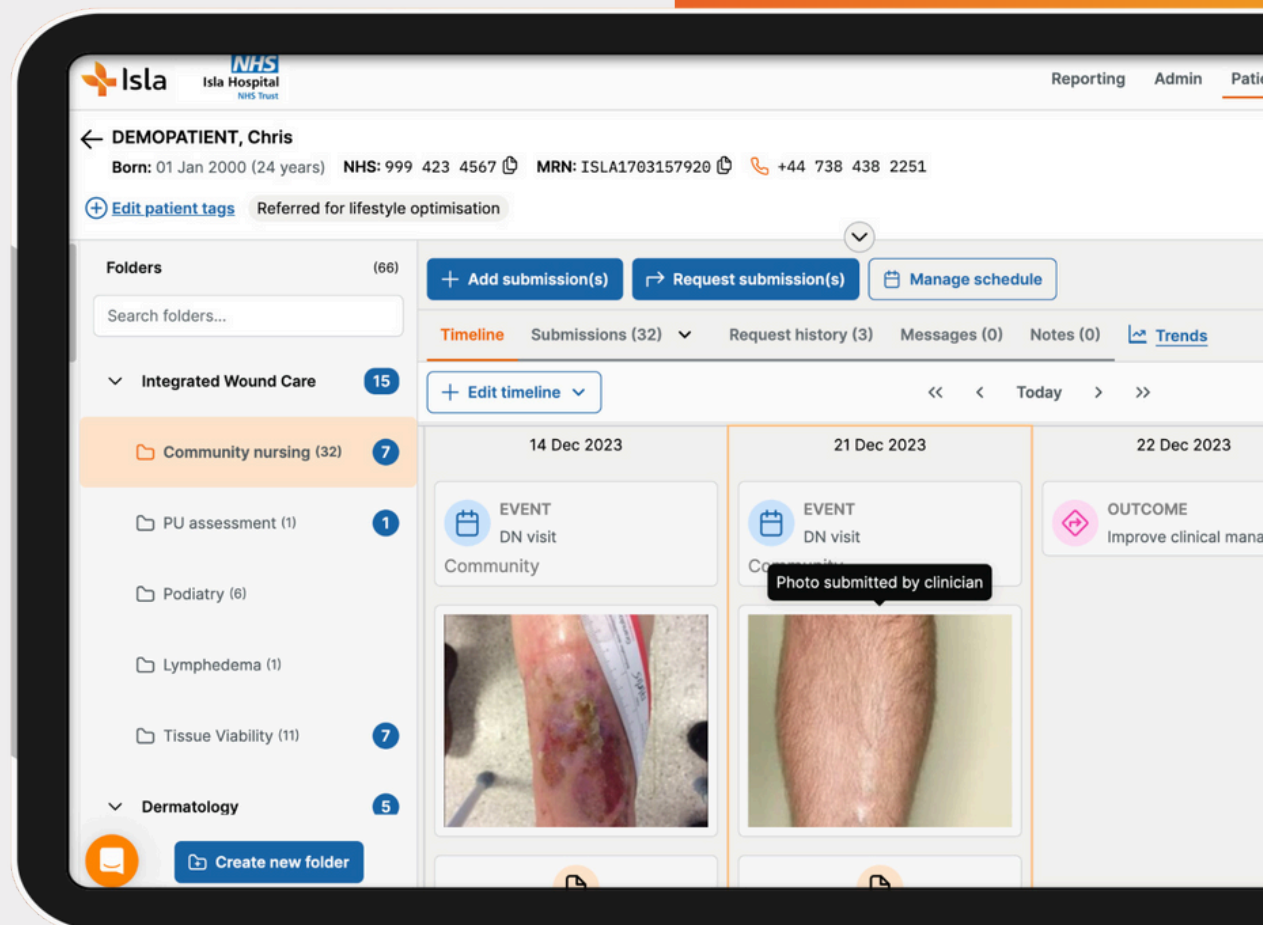
Having a unified system for wound assessment and reporting reduces disparities in care and ensures consistency across multidisciplinary teams (MDTs).

Meet Isla's integrated digital pathway platform

Isla Health is a trusted partner to over 30 NHS trusts and other healthcare providers.

Across our partners, Isla's digital pathway platform now supports over 300 digital pathways across more than 40 clinical specialties. Wound care was one of the first.

Let's look at how our technology can revolutionise your chronic wound care delivery in line with the recommendations from Darzi's 2024 report.



“

Isla's platform not only allows for the tracking of wounds but plays a vital role in education – helping clinicians recognise early signs of pressure ulcers in patients with darker skin, leading to faster treatment and better outcomes.

— **Kumbi Kariwo**

Equality and Inclusion Lead, NHS



Making **connected** wound care a reality

Isla's Digital Pathway Platforms (DPP) transforms the way MDTs collaborate by ensuring they have real-time access to accurate, up-to-date patient information, no matter where they're working from.

Unified digital wound assessments

High-quality images, capturing detailed visual records of wounds over time, are instantly accessible to all relevant team members. This ensures that every colleague has the same accurate view of a patient's progress.

Real-time information sharing

Whether it's a district nurse documenting a wound during a home visit or a TVN reviewing a case, instant data sharing reduces delays and enables faster decision-making.

Better collaboration across MDTs

Isla brings together the entire care team on one platform, allowing for seamless collaboration. For example, patients or carers can upload images and updates themselves, which are then visible for you and your team to review in real-time.

Scalable integration that fits into your existing workflow

The platform is scalable and seamlessly integrates with your existing systems, such as electronic patient records (EPRs). This makes it easier for your team to adopt without needing to overhaul current workflows.

Turning data into seamless decisions

The ability to analyse trends, track outcomes, and make evidence-based decisions is crucial for delivering high-quality care.

Inbuilt reporting to visualise progress

Tracking wound healing over time can be supported with data visualisations such as progression graphs. These provide an at-a-glance view of changes, helping teams assess whether a wound is improving, stagnating, or deteriorating.

Real-time, shared insights

When insights are available in real time—whether from a district nurse's visit, patient-submitted images, or specialist assessments—the whole care team can respond quickly. This immediate access supports timely triage and adjustments to care plans.

Insights across caseloads

Standardised reporting across an entire caseload offers a macro-level view of care. This helps identify patterns or gaps, benchmark progress, and focus resources where they're needed most.

Metadata-tagged image libraries

Searchable image libraries with photos tagged by key metadata allow clinicians to review past cases for comparison. This supports confident clinical decision-making and is especially valuable in bridging knowledge gaps, such as identifying wound grades on dark skin tones.



Better outcomes for your teams

Less admin

Reducing time-consuming admin tasks gives you more time for patient care.


Stronger collaboration

Shared access to records ensures all team members are working from the same, up-to-date information, reducing errors and duplication.

Proactive and standardised care

With a full view of each patient's healing journey, you can intervene sooner, supporting better outcomes and preventing unnecessary complications.





Chronic wound care providers
using Isla can receive specialist
input from Tissue Viability
teams the **same day**, instead of
the typical 2-3 day wait.

Better outcomes for your patients

Convenience

Unified records reduce the need for repetitive assessments. Patients can also send photos, videos, forms, and other data from home, cutting down on unnecessary in-person visits.

Improved safety

Standardised and timely assessments lower the risk of infection and help prevent complications.


Personalised care

Real-time monitoring and progress reports allow your MDTs to respond quickly to changes, ensuring patients receive the care they need when they need it.

Empowerment

Patients have the support and guidance to confidently self-care with the appropriate clinical oversight.





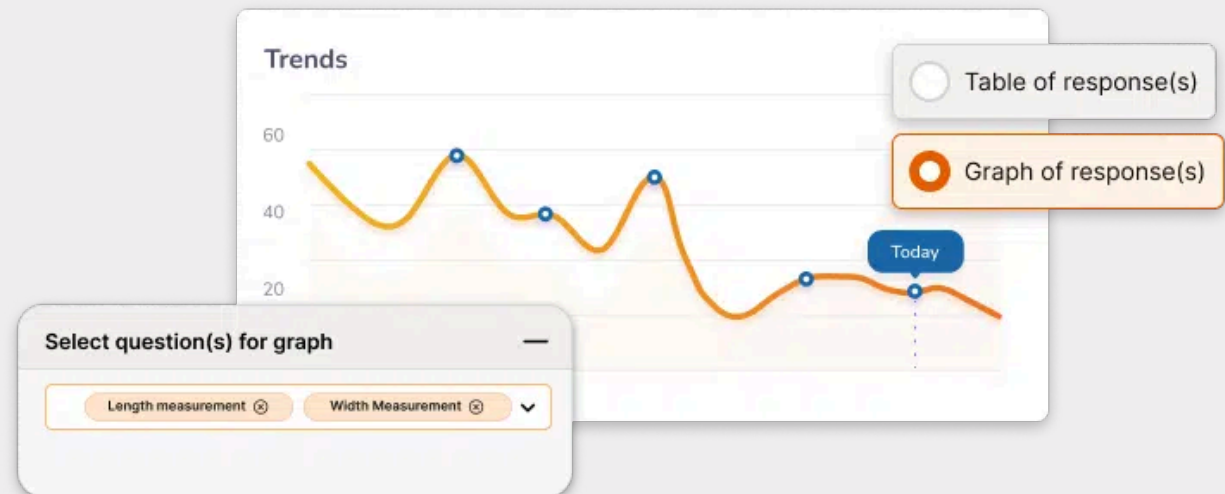
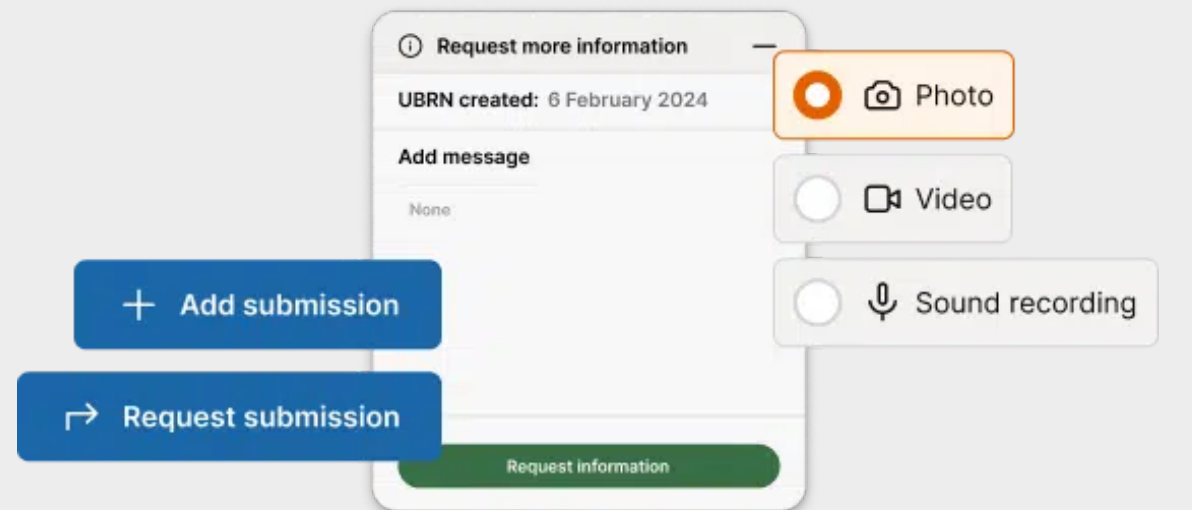
With Isla, it's
3.8* times faster for TVNs to
complete a wound review.

This releases **5.4%** of their
working day.

We've intentionally built a digital pathway platform that's highly configurable to any pathway across acute and community care, creating one system for true shared, scalable patient care.

— Lara Mason, Director of Product

[Read the interview](#)

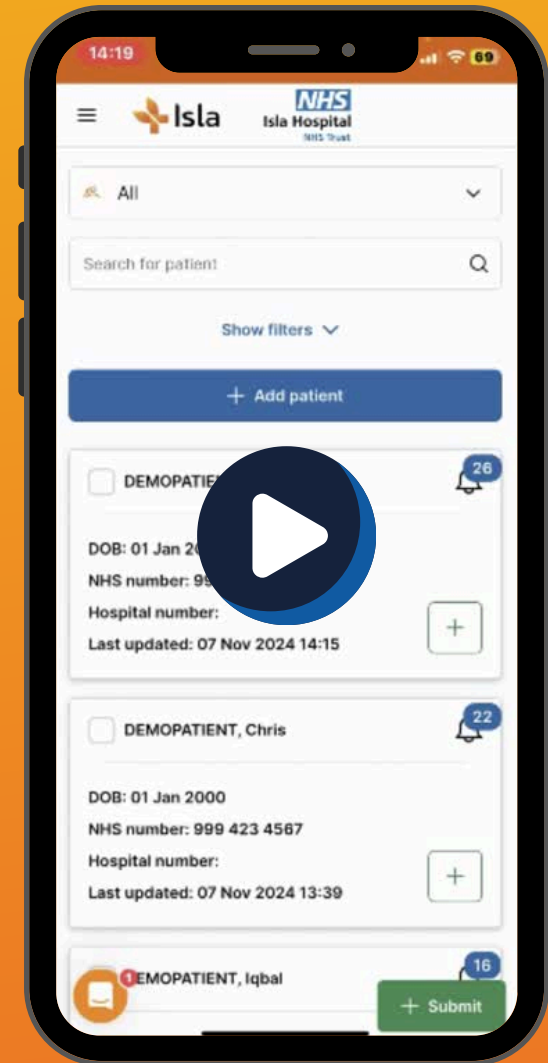


See Isla in action

Since day one, we've been working closely with you—district nurses, TVNs, and everyone else involved in managing wound care—to understand exactly what you need to make your work easier and more effective.

In this short demo, our Senior Product Manager, Tasha Watmore, shows how Isla supports everything from photo uploads straight to a patient's record, to tracking wound progress over time and sharing records with colleagues for MDT reviews, all with just a few clicks while you're on the go.

[Watch the demo](#)



Delivering impact

Improved efficiency

Nottinghamshire Healthcare NHS Foundation Trust (NHFT) saved 4,702 clinical hours annually, equivalent to 196 days per year, through faster wound reviews and better collaboration across teams.

Financial savings

The same trust saved over £155,000 annually within Adult Community Nursing by using Isla.

Timely intervention

In a partner trust, 23% of patients had early identification of wound deterioration, allowing for timely intervention and better outcomes.

Reducing bias and improving training

With built-in consent tools for patient images, Isla ensures you have access to diverse training materials, helping to reduce unconscious bias and improve confidence in wound deterioration detection, especially in dark skin tones.



4,702 hours

of clinical time equating to
196 days per year saved in
one NHS trust



£155,000+

per year saved within one
clinical specialty in NHFT



23%

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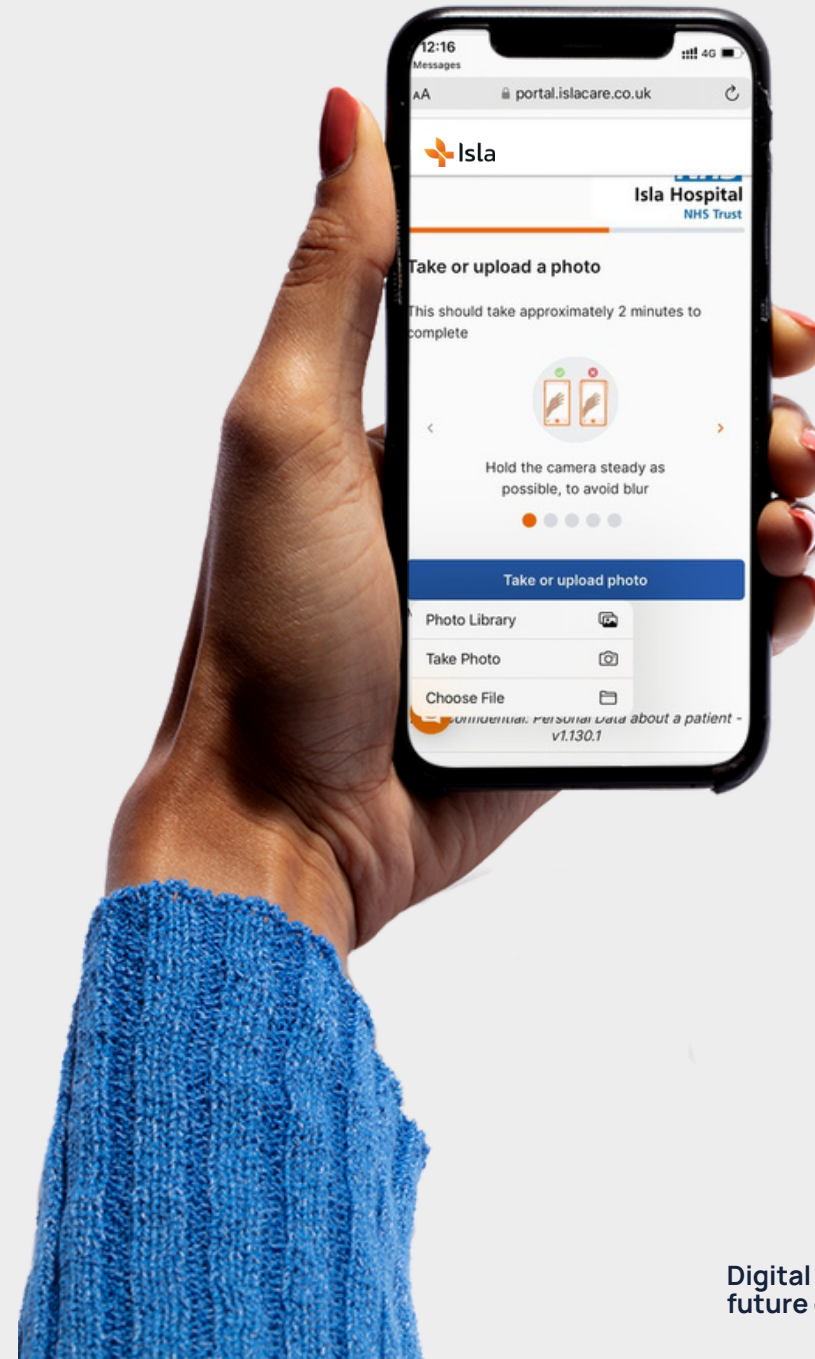
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Images can be taken and uploaded in an instant, and can be reviewed immediately from another distance.

I can still be with the patient when the wound can be reviewed and the correct treatment plan can commence in the same visit.

— Community and Care

Home Nurse



Conclusion

What next?

Chronic wound care faces significant challenges, including gaps in quality, inefficiency, and inequitable access.

However, by taking immediate steps to address these issues—such as promoting inclusivity, improving team collaboration, and leveraging technology—we can create a foundation for better outcomes, reduced clinician workload, and empowered patients.

The future of wound care lies in embracing digital pathways that enhance care quality, streamline processes, and ensure better integration across teams.

By aligning with Lord Darzi's vision for a more efficient, patient-centred NHS, we can transform chronic wound care, improving both the patient experience and clinical outcomes.

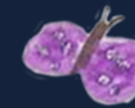


Ready to transform your chronic wound care delivery?

Get in touch for a personalised run-through of
how Isla's digital pathway platform can
support your clinical team in any pathway.

[Book a demo](#)





Additional resources

Helpful links to curated resources to keep growing your chronic wound care knowledge. Including webinars, articles, quizzes and other insights from experts in the field.



Website: Beyond Measurement



Quiz: Test your wound care knowledge



Website library: Skin deep - pictures for diagnosis



Webinar: Detecting pressure ulcers in darker skin tones



Interview: Successful self-care with Steph Lowen



Report: Darzi report



Article: Redefining inclusive chronic wound care



Article: Debunking self-management myths



Website: National Wound Care Strategy Programme



Brochure: Connecting chronic wound care teams



Website: Society of Tissue Viability



HTN Interview: Isla for inclusive wound care with Kumbi Kariwo



Interview: Actionable data insights for wound care teams with Dr Lara Mason



Article: Addressing skin tone bias in wound care



HETT article: Transforming wound care



Clinical handbook: Mind the gap

