

# The Legs Matter campaign 2020: empowering patients and communities



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I am delighted about the opportunity to update you all on the Legs Matter campaign. I've been part of Legs Matter, as part of my role as Trustee for the Tissue Viability Society, for more than a year now and I never fail to be inspired by the determination and ability of the coalition members to put personal opinion aside and work together on the common goal.

2019 was a great year and 2020 will be even better! The response to the 2019 campaign was phenomenal. As such we have launched our second Legs Matter awareness week from 8–12 June 2020, coinciding with Diabetes week. Please share your plans with us. Your innovations and dedication never fail to inspire us, and we would love to publicise your great work.

Throughout the year, the support of all our corporate partners has been invaluable and we are delighted that with their help we are in a position to drive the campaign forward.

## WHAT WILL THIS NEW DECADE BRING?

So as we enter a new decade, what can you expect from Legs Matter? A new decade always bring with it fresh resolutions for the future. Although my personal ones might get broken, looking up the Oxford Dictionary's definition of 'resolution' it states: *"The quality of being determined or resolute"* or *"A firm decision to do or not to do something"*. Both fit perfectly with Legs Matter. We are certainly determined and resolute, and have worked hard to move the campaign forward. One core aim is to make the public more aware of conditions of the lower leg and foot. This shift is needed to **empower** people, so that as patients they are able to present themselves to healthcare professionals already knowing what care to expect and to be able to question it if needed.

## PATIENT EMPOWERMENT

I recently heard about a patient who, after having had her compression removed by a staff nurse who had been concerned over a slightly raised ABPI reading, contacted the district nurses later that day and asked them to return to reapply her compression — as she knew this was needed. That

is patient empowerment! It led to the district nurses making a call to the local specialist service, where they received the support they needed to return to reapply the patient's compression. We need more patients to be able to question their care.

Terms such as 'patient harm' or 'lapses in care' are often used in relation to pressure ulcers. These terms also need to apply to patients with leg or foot problems. Standardised leg care should be policy. It should be monitored, and when the policy is not followed it should be looked into, just as we do with pressure ulcers.

In no way do I mean to suggest that already overworked, exhausted generalists and specialist clinicians do more. It is a whole system change that is required, not a longer 'to-do list' for already overburdened staff. The commissioners of care, whether it is primary care, community care, care homes or acute care, need to ensure that the correct systems and processes are in place to enable staff to have to knowledge, skills, and time to provide the care which will deliver the best patient outcomes.

## AN INTERDISCIPLINARY APPROACH

Multidisciplinary care is not new, but what if we need different disciplines to help achieve our goals? The role of the community pharmacist is one which has always seemed to be a great untapped resource in our speciality. They are commissioned to provide healthcare services to patients, so why not triage for lower leg and foot problems? They are perfectly placed to signpost to appropriate local services and even provide compression for patients. Imagine a patient wanting to purchase plasters for a lower leg trauma at their local chemist ... after a brief consultation they'd leave with an appropriate dressing, written information about self-care, class 1 hosiery and advice to book to see their practice nurse for a full assessment. We could normalise the use of hosiery with lower leg wounds within society. With properly commissioned services, that is a possibility.

Let's use 2020 to share good practice as well as empower the public to demand quality care.