

# Leg Club update

## Leg Clubs in a commissioning era

In November 2006, the primary care nursing team at Stoke-on-Trent Primary Care Trust teamed up with a committee of patients and volunteers to open the Fenton Leg Club. Since then we have already seen 65 new members at the Leg Club and have evidence of the dramatic positive effects that the Leg Club concept of care has on patients' experiences and healing rates.

Since its inception Fenton Leg Club has provided a friendly and informal environment which has been seen to make a real difference for members. Previously non-concordant patients have taken on the responsibility of self-management of their condition and this has made a real impact in all areas of their lives. This has been further reinforced by the involvement of the Expert Patient Programme (EPP) in supporting people with these chronic lower-limb conditions. The club also provides an informal support network for carers, family and friends. However, what has made Fenton Leg Club different from its local medical centre counterparts is the links to secondary care which have so impressed the Leg Club founder, Ellie Lindsay.

The nursing team have built important relationships with other professionals thereby placing the patient at the centre of care delivery. This gives patients with lower-limb problems a unique pathway through their journey by delivering the right care at the right place and at the right time (DoH, 2006). For example, when the Leg Club was launched, it became apparent very quickly to the primary care nurses that frontline healthcare professionals often had a massive knowledge gap about the treatment of lymphoedema and lower-limb oedema. To combat this, links were made with the local clinical nurse specialist (CNS) in lymphoedema so that outreach clinics can take place within the Leg

Club. The CNS has also been asked to participate in the formulation of the Leg Club's lymphoedema pathway. For members who do require further intervention, valuable links have been forged with secondary care consultants so direct referrals can now be made and members can be seen promptly. The Leg Club's nursing team also have excellent relationships with podiatry and tissue viability specialists who both attend on a regular basis.

In the current climate of change within the NHS, the Leg Club model can provide significant cost savings for PCTs while reflecting government direction as set out in *Delivering A Patient-led NHS* (DoH, 2005), *The National Service Framework for Older People* (2001) and *Your Health, Your Care, Your Say* (DoH, 2006).

As the treatment of chronic leg ulcers costs between £400m and £600m per annum (Cornwall et al, 1986) this clearly highlights the need for an efficient model of care which meets the needs of our ageing population and helps meet the challenges faced by community nursing.

By providing care in a social environment, Leg Clubs not only make cost savings in terms of nursing time by cutting down on lengthy domiciliary visits, they also empower patients to become stakeholders in their own care, so increasing healing rates and providing enhanced quality of life, a lower level of recurrence, and more positive health beliefs. This can only add to the potential savings from the perspective of concordance and continued contact with health professionals.

As Stoke-on-Trent has pockets of very high levels of social deprivation, the Leg Club model has the potential for further community involvement e.g. community policing, guest speakers from other agencies and therapeutic

activities. The nursing team feel that the next challenge for Stoke-on-Trent PCT is to provide a second Leg Club in the north of the city which could possibly utilise the new district centre, which is an amalgamation of health, social care, housing and community businesses working in partnership.

As the Leg Club organisation provides an audit of each club, which involves systematic collection of demographic, clinical and financial data, the PCT will have firm evidence of the clubs efficacy. By commissioning the Leg Club model the PCT will be committed to delivering gold standard care, which provides staff with the opportunity to develop their skills and knowledge base and puts the patient at the centre of care. [WUK](http://www.woundsuk.com)

**Sally Sturge and Kelly Mellor, Primary Care Nurses in Nurse Treatment Centre, Stoke-on-Trent PCT and Fenton Leg Club leads**

*The Leg Club text and logo are registered trademarks in the UK and Australia*

Cornwall JV, Doré CJ, Lewis JD (1986) Leg ulcers: epidemiology and aetiology. *Br J Surg* 73(9): 693-6

Department of Health (2006) *Our Health, Our Care, Our Say: A New Direction for Community Services*. HMSO, London

Department of Health (2005) *Delivering a Patient-led NHS*. HMSO, London

Department of Health (2001) *National Service Framework for Older People*. HMSO, London



Figure 1. Staff and members of the Fenton Leg Club.