Lymphoedema Awards 2012

2nd Place
Marianne Delon

British Journal of Nursing Awards 2012
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The Lymphoedema Awards 2012 – 2nd Place

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Entry statement

Why should they win?

Introduction

The community based lymphoedema/chronic oedema service of an inner London community trust has not only treated patients with lymphoedema, the service has made a large contribution to the treatment of leaking legs within the community nursing services. An audit was carried out across community services, which initially identified the extent of the problem. The data was then used to develop a business case to employ a band 5 nurse. This change in service delivery has shown that with the right treatment, at the right time, excellent healing rates can be achieved, saving nursing time, dressing costs and improve quality of life for patients.

Background

A prospective audit over 6 months in 2007/08 showed that there was a high prevalence of leaking legs. The working definition used for leaking legs was: lymph fluid oozing through the skin causing maceration of the area which can be extensive, causing wet footwear, often leading to further complications such as cellulitis and wound infection.

The audit identified:

- 113 patients with swollen and leaking legs. Of these, 72 had both legs affected.
- 26% were given antibiotics due to cellulitis.
- Treatment length varied between 4-26 weeks.
- 49% received treatment before the audit started.
- 83% were still leaking at the end of the audit, indicating that treatment was ineffective in resolving the condition for the majority.
- Manpower cost totalled £96,904 (£20.00 per hour), £857.00 per patient episode.
- Average dressing costs were estimated at £25.00/ visit/leg = £2,160 per episode.
Introduction of new service and results

The audit raised awareness of lymphoedema and its complications within the district nursing service; supporting Moffatt et al’s1 (2003) findings that lymphoedema is an underestimated health problem. A business case to change the model of service delivery was successful and a band 5 nurse was employed to treat this population group with the following outcome:

- During the first phase 45 treatment episodes were completed over a 10-month period.
- Average age was 77 years (range 42-94).
- The contributing factors in the cohort included leg dependency, paralysis, poor mobility, frequent episodes of cellulitis, obesity and renal/heart failure.

- On average 11 treatments were required per patient per episode (range 2-42) thus healing rates rose from 15% pre-intervention to 89%.
- The nursing cost per patient episode reduced from £857.00 to £220.00, a saving to the nursing budget of £28,665.
- The cost of consumables such as bandages and dressings reduced to £121.00 on average per patient episode, a saving of £91,755.

Reason for winning the award

The model of care used was not only innovative but effective for both patients and practitioners, it delivered considerable service improvements whilst making the best of available resources, not only in nursing times but impacting on better usage of wound care and bandaging products, plus a reduction in hospital admission due to associated cellulitis. Therefore, the lymphoedema service should win the BJN Lymphoedema Award as they have improved the service to patients with leaking legs, a vulnerable patient group, and shown that with audit data to support a business case, it is still possible to get financial backing in a challenging economic climate.

Supporting statement

I support wholeheartedly the application for a BJN Lymphoedema Award by the lymphoedema team. By collecting audit data they have raised awareness within the trust of the large problem of leaking legs and the high personal and financial cost associated with it. Many community nurses, as well as medical colleagues, view the management of people with oedematous and leaking legs as an unrewarding, chronic problem which cannot be managed effectively. However the change in the model of delivery of care to this patient group managed by the lymphoedema service has shown excellent results, which has resulted in improvement in patient’s quality of life, reduced nursing costs and an impact in the reduction of spend in inappropriate dressings.

Claire Davis - Team Manager - Whittington Health -
Tissue Viability and Lymphoedema Service

Lymphoedema: an underestimated health problem QJ Med 2003, 96, 731-738