

# Collaborative Working in Wound Care

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*(Tissue Viability Nurse at the time of completing this case study)*

## Background

Patients who suffer from lymphoedema or a combination of lymphoedema and venous disease often report their condition as not being recognised, with mistakes being made in differential diagnosis leading to incorrect management. This incorrect management can lead to significant quality of life issues, complex clinical issues and huge treatment costs. Comprehensive guidelines exist (*Lymphoedema Framework, 2006*) but still Tissue Viability Nurses, Lymphoedema nurses, and many other healthcare professionals see examples of poorly managed patients being passed from pillar to post.

Utilising Best Practice guidelines and using the concept of assess, dress, compress, a patient case study is presented that demonstrates the possible patient and clinical outcomes with collaborative working and correct management. It also highlights significant cost savings, for the General Practice (GP) dressing's budget when this approach is utilised.



**Figure 1** The left leg of Mrs X at initial assessment

## Assess

Mrs X is a 46 year old lady who has lymphoedema, a history of deep vein thrombosis and venous leg ulcers since 2007. She had a number of issues that impacted on her quality of life including; pain, reduced mobility, re-occurring infection and cellulitis, and social isolation. Mrs X was referred to the Tissue Viability team and a full holistic assessment was undertaken (*Figure 1*).

## Dress

Her treatment plan included superabsorbent dressings to absorb exudate and antibiotics as per the revised British Lymphology Society Consensus document (*2010*).

## Compress

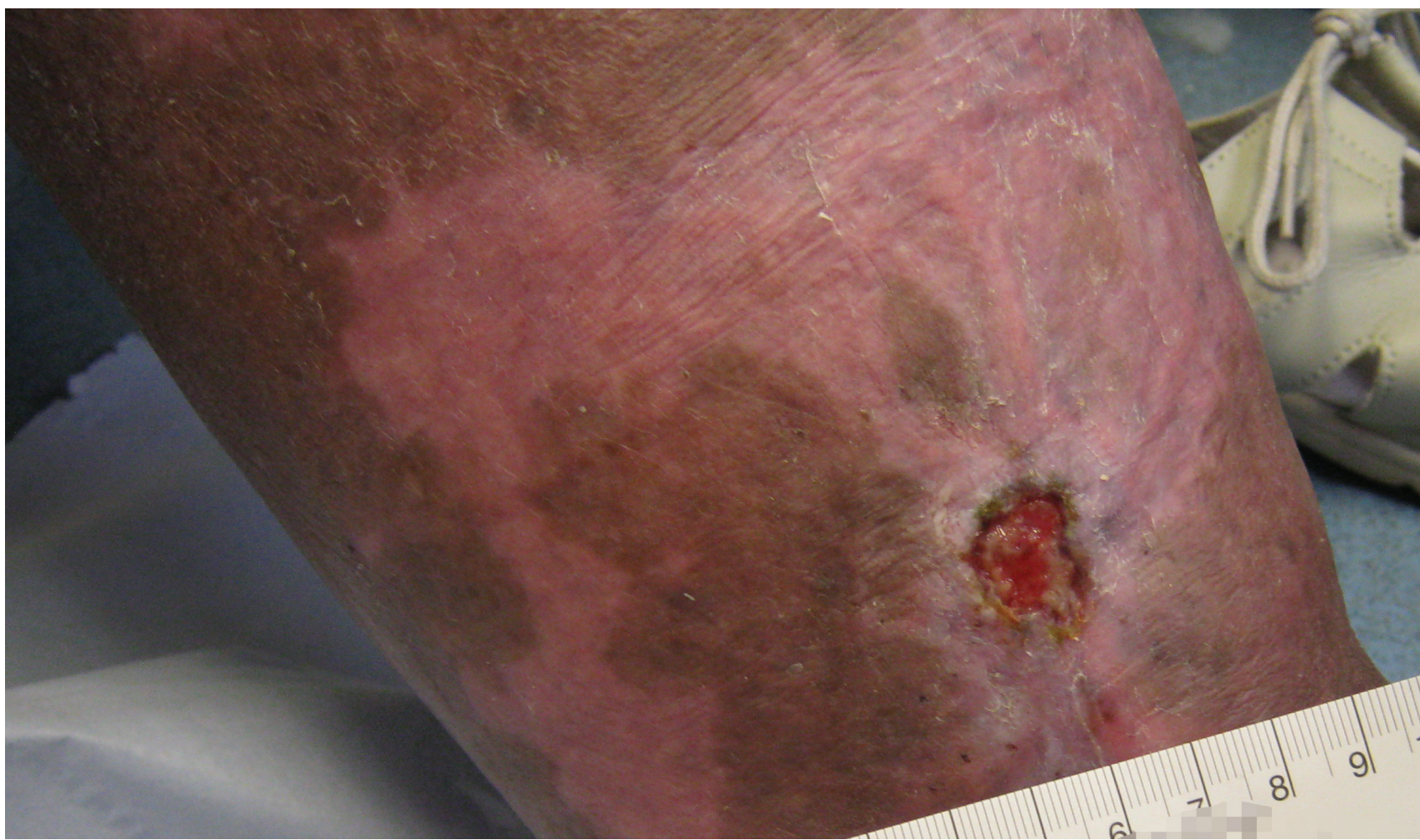
Initial compression therapy using cohesive short stretch\* bandages (*Lymphoedema Framework, 2006*) was initiated and was followed by full leg hosiery for maintenance. In addition, an educational programme was initiated including collaboration with industry, to educate and train the Practice Nurses and District Nurses involved. This included the management of chronic oedema, lymphoedema, correct application of cohesive short stretch bandages and follow up management with hosiery.

## Outcomes and conclusion

Following specialist assessment, treatment and an educational programme, Mrs X went on to make huge improvements - both clinically and in her quality of life (*Figure 2 & 3*). A basic cost analysis within the GP practice also highlighted that treatment product costs for Mrs X in one month, November 2011 were £2,930 and for November 2012 this reduced to £236 (*Table 1*).

Following the successful outcome with Mrs X the improvements were implemented in other patients within the GP surgery. This led to the overall cost of wound care products for the practice reducing from £27,500 from April to November 2011 to £10,500 in the same period in 2012 (*Table 1*).

With the focus on care closer to home, cost reduction targets and the increasing complexity of wound care within primary care, there has never been a greater need for effective management and collaborative working.



**Figure 2** the left leg of Mrs X following correct assessment and management



**Figure 3** the left leg of Mrs X with healed ulcer

|                                                           | 2011    | 2012    |
|-----------------------------------------------------------|---------|---------|
| Woundcare costs for Mrs X in November                     | £2,930  | £236    |
| Saving £2,694                                             |         |         |
| Woundcare costs for the GP surgery from April to November | £27,500 | £10,500 |
| Saving £17,000                                            |         |         |

**Table 1** Basic Cost Analysis

## References

Lymphoedema Framework. Best Practice for the Management of Lymphoedema. International consensus. London: MEP Ltd, 2006  
British Lymphology Society and Lymphoedema Support Network. Consensus Document on the Management of Cellulitis in Lymphoedema. 2010.  
Available at <http://www.lymphoedema.org/bls> accessed 17th March 2014

\* Actico Cohesive Inelastic Bandage by Activa Healthcare.