

IMPROVING PATIENT AND NURSE EXPERIENCE

A SIMPLE MEASURABLE GRADUATED COMPRESSION DEVICE

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Introduction

District nursing services have been in existence for more than 150 years. While the foundation of the specialist practitioner district nurse role remains the same, the level of complexity of care needs in the community has changed (RCN, 2013). The Department of Health (DH) England's document 'Care in local communities; A new vision and model for district nursing 2013' also states clearly that district nurses have a key role to provide care and support in the community by:

- population and case management
- supporting and caring for patients who are unwell, recovering at home and at end of life
- facilitating independence

The introduction of a simple, instantly adjustable inelastic compression device for the first-line treatment of venous leg ulcers, from a district nursing point of view, has been shown to:

- save nurse time
- cut the number of visits
- be cost effective
- facilitate patient independence.

From the patient point of view, the benefits are as follows:

- found to be more comfortable to wear
- Patient able to wear normal clothing and everyday shoes
- Patient able to go on holiday without involving another team (which in some instances means the team get billed for the appointments at a medical practice).

Method

The patients with venous leg ulceration who were currently being treated with compression bandages were invited to change to this instantly adjustable inelastic compression. This therapy enabled these patients to continue 'gold standard' compression therapy treatment whilst facilitating a higher degree of independence.



Patient wearing Juxta CURES™ and conventional foot wear

Results

Measurable reduction in wound size and leg oedema, improved patient concordance and wellbeing, along with a heightened sense of achievement for the nurses. A noticeable reduction in costs and nursing time has been another important aspect of this treatment.



Discussion



The district nurses observed considerable impact on their day-to-day practice in terms of time spent with the patient, prescribing costs, materials costs and travel time saved by reduced visits.

Nurses experienced a significant reduction in the time needed with the patient. The new system was quicker to apply and remove than conventional bandages.

Patient concordance was found to be much higher than with comparable bandaging systems; ease of use, the ability to reduce the pressure at night and to remove the device to take a shower being among the perceived benefits.

Considerable cost reductions were noted as the new system is guaranteed to provide 6 months of effective compression when the care instructions are followed.

The enhanced possibilities for patient self-management also resulted in a lower number of visits being required, bringing further reductions in cost.

Conclusion

The use of this simple, instantly adjustable inelastic garment delivered significant benefits for both patient and nursing staff in terms of heightened concordance, clinical effectiveness and cost reduction, thus exceeding the requirements of the Department of Health (2013) document, not least in facilitating patient independence.

References

- Department of Health England (2013) Care in local communities A new vision and model for district nursing, London: DH. Available at www.dh.gov.uk
- Royal College of Nursing (2013) District nursing – harnessing the potential. The RCN's UK Position on District Nursing

Acknowledgment to medi UK