



Using a facilitated monitoring and feedback approach combined with educational outreach ILUMIN helped community nursing teams make sustained changes to practice, enhancing the quality of patient care delivered.



Overall, a far greater proportion of patients were seen to be treated with some sort of compression therapy compared to the wound audit data collected in June 2016.



Figure 1. Proportion of ulcers specified as venous or mixed aetiology being treated with compression, Wound audit June 2016 and ILUMIN project October 2017 to October 2018

Improvements to clinical practice were shown throughout the course of ILUMIN. There was a gradual increase in the proportion of patients



Working in partnership with ELHT, the Leg Ulcer Quality Improvement Programme (ILUMIN) team designed an evidence-based improvement strategy focused on enhancing delivery of the three evidence-based quality standards for leg ulcer management:

- **1.** Measurement and recording of ankle-brachial pressure index (ABPI).
- 2. Use of the highest level of compression therapy possible where clinically appropriate.
- 3. Use of high compression two-layer hosiery kits, where clinically appropriate.

In addition there were also increases observed in the proportion of patients in full compression (as opposed to reduced).



The management of complex wounds is a significant yet often neglected area of care in the NHS. A 2015/16 region wide survey of complex wound care by NIHR CLAHRC Greater Manchester revealed a number

> of opportunities where care could be enhanced particularly for patients with leg ulcers.

> > 4

PATIENTS

CARED FOR^{**}

LEG ULCERS TREATED

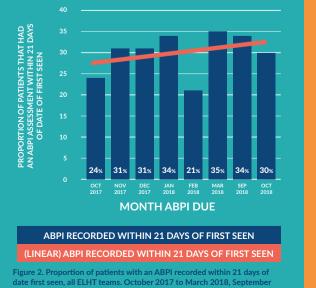
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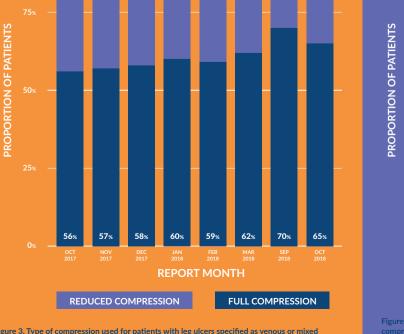
* DURING ELHT ILUMIN PROJECT **WITH ONE OR MORE LEG ULCERS

For those patients suitable for full compression, increases in the proportion of patients being treated with two-layer hosiery kits were shown.

100%

being given an ABPI assessment within 21 days of first seen.





This study/project is funded by the National Institute for Health Research (NIHR) Collaboration for Leadership in Applied Health Research Greater Manchester. The views expressed are those of the author(s) and not necessarily those of the Dipartment of Health and Social Care

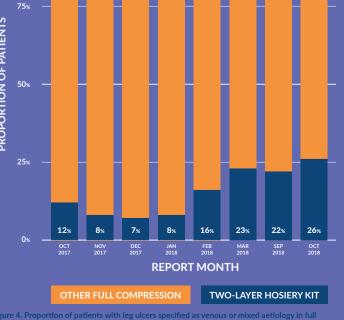


Figure 3. Type of compression used for patients with leg ulcers specified as venous or mixed aetiology, all ELHT teams. October 2017 to March 2018 and September and October 2018.