

Collaborative Nursing and Adjustable Compression Wraps Enhance Self-Care, Adherence, and Healing in Leg Ulcer Management

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Aim

With the implementation of a quality improvement project aiming to improve outcomes for patients with leg ulceration through innovative nursing practice that emphasised collaborative working alongside patients. This included involving patients in shared decision-making around treatment plans, co-developing goals to promote adherence to compression therapy, and using patient education to support self-management and early recognition of complications. Nurses worked collaboratively within the multidisciplinary team while valuing patients lived experience, enabling care to be individualised and responsive to clinical and their psychosocial needs. This partnership approach enhanced patient engagement, supported continuity of care, and contributed to improved healing outcomes and patient experience.

Background

Leg ulceration represents a significant challenge within nursing practice, with a substantial impact on patients' quality of life, including pain, reduced mobility, social isolation, and psychological distress. Management is complex and often prolonged, requiring consistent assessment, evidence-based interventions, and sustained patient engagement. Variability in care delivery, poor adherence to treatment, particularly compression therapy and fragmented services can contribute to delayed healing and high recurrence rates. Nurses play a central role in assessment, treatment, and ongoing management across community and outpatient settings. Effective care relies not only on clinical expertise but also on collaborative working to support shared decision-making, self-management, and concordance with treatment plans. Innovations in practice that prioritise partnership with patients, such as structured education, goal setting, and co-designed care plans, offer an opportunity to improve engagement, adherence, continuity of care, and healing outcomes.



Methods

A nursing-led quality improvement project was undertaken to enhance collaborative working with patients receiving leg ulcer care in a community setting. Baseline practice was reviewed through wound assessments, adherence, and patient feedback to identify areas for improvement. Interventions were developed collaboratively with patients and the multidisciplinary team, including structured education, shared decision-making, and individualised goal setting. Compression management was delivered using inelastic adjustable compression wraps to improve comfort, support self-management, and facilitate correct application. Care plans were reviewed regularly and adapted according to clinical progress and patient feedback. Outcomes were monitored using wound assessments, adherence tracking, and patient-reported experience measures.

Results

Implementation of a collaborative, nursing-led approach using inelastic adjustable compression wraps resulted in improved patient understanding, engagement, and adherence to treatment. Wound assessments indicated better healing trajectories, particularly where compression wrap use and self-care practices were maintained. Patients reported feeling informed, involved, and confident in managing their condition. Nursing staff observed enhanced continuity of care and stronger therapeutic relationships. Multidisciplinary collaboration improved, supporting consistent compression management and timely interventions.

Conclusions

This project demonstrated that collaborative, nursing-led approaches, supported by inelastic adjustable compression wraps, can positively influence clinical outcomes and patient experience. Structured education, co-designed care plans, and personalised goal setting enabled more individualised, responsive care. Inelastic Adjustable compression wraps improved comfort, allowed for limb size fluctuation, and supported greater patient independence. Embedding partnership working within routine care strengthens therapeutic relationships, promotes adherence, and supports sustainable improvements in leg ulcer management.

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