

# A privilege to fundraise for the Lindsay Leg Club Foundation



**H**aving fundraised for wound healing projects in the charitable sector for the past 13 years, I felt that my next assignment should be to raise funds for a 'more popular' cause. Fundraising for any cause is challenging; however, 'wounds' are far from appealing—in fact, the word itself conveys negativity. Why would a potential donor choose to support a wounds charity when there are so many equally good, but more attractive and 'feel good' charities around? It would take a very special charity to entice me to stay in the wound care sector ... and The Lindsay Leg Club Foundation (LLCF) certainly did this for me.

Initially, I thought I was sufficiently knowledgeable about leg ulcers. How wrong was I! I was fortunate to talk to some Leg Club® members who gave me insight into the traumas associated with leg ulcers. One tends to forget that the pain and utter discomfort lasts 24 hours a day, and I can recognise how this can sometimes lead to social isolation and depression. These member stories helped me to see how the Leg Clubs are really giving these patients their quality of life back. To me, this says it all.

## Working at LLCF

I have been working with the LLCF for just over a year, and it has been a privilege. Every team member, be it a trustee, patron, advisor, friend, or project consultant is committed to the cause, and the patient is always at the forefront of their minds. The LLCF offers valuable support to Leg Clubs; most see approximately 12000 members regularly. The Leg Club model works in partnership with commissioners, nurses, GPs, patients, and the community to run leg clinics in nonclinical settings.

In addition to treatment and advice on leg-related problems, Leg Clubs also provide the perfect catalyst for members to get together, which is essential and contributes to the healing process. For some members, this is their only social interaction in the week. Members also have access to other medical services such as flu jabs and so on.

## Amanda Bailey

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## My work as a fundraiser

As a fundraiser, I was keen to explore the finances, and I was impressed to see that the trustees run an extremely tight ship—every penny spent is accounted for, resulting in low expenditure. This financial focus has contributed to the amazing achievements to date. The LLCF has formed strong relationships with the health-care industry, and many companies have joined the Foundation's group of Industry Partners, which provide valuable financial support. In fact, the Foundation would not have achieved so much without this crucial support. The trustees identified, quite rightly, that the future of the LLCF should not depend entirely on just one source of income. My role is to secure funding from alternative sources, which will run in parallel with support from Industry Partners. My aim is to increase current levels of funding and secure funding for the future. The trustees are currently formulating their business plan for the next 5 years; this includes exciting projects with the aim of making the Leg Club model accessible to a larger number of patients. These projects can begin only once part of the cost of this work has been pledged/secured.

I work two days a week with the LLCF and spend approximately 80% of my time researching and submitting funding applications to trusts and foundations. There are approximately 10000 trusts and foundations in the UK, and they give away approximately £2 billion in grants each year. We are hugely grateful to the trusts and foundations that have supported us to date by contributing to our core and project costs, as well as the purchase of equipment for use by the Leg Clubs. We are delighted to be building good working relationships with this new group of supporters and are keeping them informed of how their contributions are making a difference.

The remaining 20% of my time is spent advising Leg Clubs on fundraising techniques and forwarding preresearched funding opportunities. Leg Clubs need to raise funds for things such as the hire of premises and purchase of equipment, for example, digital cameras and Doppler blood flow monitoring devices.

## To conclude

I am honoured to be part of the LLCF team and look forward to the year ahead, which promises to deliver a better quality of life to patients with leg ulcers who are currently suffering so much.

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# Case study: Frome Leg Club



**T**he nurses at Frome Leg Club in Somerset, England, see a number of patients with various types of leg ulcers and conditions. This is a case study of one of their regular patients.

## Case study

### How it all started

Mr T had a serious motorcycle accident at the age of 18 years. He is unable to remember the accident, but was told that he was at a crossroads and a lorry turned straight into him. He was unconscious for 6 weeks and woke up in the intensive therapy unit with a left-side hemiplegia.

He was discharged in a wheelchair on his birthday. He immediately wheeled himself to the pub across the road, but discovered there and then that he faced two problems: crossing two busy roads and going up the step and through the springloaded door at the pub. These problems made it impossible to get to the pub to celebrate. It was here that he decided he would not be wheelchair bound, but would walk again. Mr T said his medical team protested and refused, so he carried out a 'sit down' protest until they gave in to him.

### Learning to walk again

Mr T fell several times, but eventually learned to walk safely with crutches. He successfully completed his college education and went to Exeter Rehabilitation Camp to study an Office Management course. He had to score >90% in each paper in order to apply to St Loye's Foundation—a world-class training camp for the disabled. Mr T then went on to work at the BBC for a while.

### Living with a leg ulcer

Earlier this year, Mr T visited a walk-in centre with a severe cut to his left leg caused by walking into a large shoe rack that was placed near the front door to his house. The walk-in centre directed him to Frome Leg Club.

He was diagnosed with a venous leg ulcer, followed by cellulitis. After a Doppler assessment, he was started on compression therapy. His wound healed completely in about 16 weeks, and now he only uses compression hosiery. There was oedema seen in his right leg as well, so the compression hosiery is used on both legs.

Mr T comes in regularly to get his legs washed and moisturised. He loves to talk to people and make them smile. He likes to believe that he has a role to play in how well a



Image © The Lindsay Leg Club Foundation

**Figure 1.** A Leg Club nurse putting compression garments on Mr T's legs

place like Frome Leg Club works, and so he became a club Committee Member. He also likes to think that happy people are physically better able to heal, and he feels that the idea at the Leg Club is similar to his experience at the hospital—it is fellow patients who make the difference toward one getting better. This is what Leg Clubs can do for people with a leg ulcer.

CWC

## Kate Wright

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