As coronavirus social restrictions are gradually easing across the UK and we are re-emerging into a less locked-down society, finding ways of unpicking the effects of enforced social isolation on seniors experiencing intensified feelings of loneliness is one of the things that springs to mind for individuals involved in organising and running a Leg Club. Some Leg Clubs have remained open since the introduction of general social distancing rules by the UK Government on 23 March 2020—although in a different format from the pre-lockdown one, with appointments, reduced operating capacities and closure of the social side. Others shut temporarily, while managing to create small online communities for volunteers, and even some members, to stay in touch. Yet others had to suspend their operations, awaiting guidance from the NHS and GP consortia on the next steps. In all cases, the social element that makes Leg Clubs special was, to a large extent, lost. The very issues of loneliness and social isolation that Leg Clubs tackled (Seal, 2018) have become even more pressing to address via Leg Clubs’ responses as the enforced lockdowns are being relaxed (Day et al, 2020).

Throughout the lockdown, Ellie Lindsay, Life President of the Lindsay Leg Club Foundation, has been sharing tips and hints for older adults on how to tackle the feelings of loneliness and isolation they may have been experiencing with greater intensity, as they could no longer attend their weekly Leg Club and keep in touch with fellow members and volunteers. With hard work from Ellie and her personal assistant, Lynn Bullock, the website of the Lindsay Leg Club Foundation and its Facebook page disseminated information for members on staying healthy and connected with their loved ones, and calls for Leg Clubs to come forward and share their lockdown initiatives were made and responded to by some Leg Clubs.

Moreover, new guidance was published in June 2020 on how Leg Clubs can reopen safely, now that the rules are being loosened. It includes advice for COVID-19 infection and prevention control (IPC) for volunteers, with checklists and risk assessment information. Volunteers are urged to maintain the highest standards of hand and respiratory hygiene; keep a safe distance; safely handle packages, surfaces and materials; and look after themselves in line with the latest government guidelines if they become unwell. Calls have also been made for Leg Clubs to regularly follow the updated government guidance.

The advice came at a time when Prime Minister Boris Johnson was announcing a relaxation of the 2m physical distancing rule in England, which, in late June 2020, was still in place in other nations in the UK. In the dynamic and ever-changing circumstances, various Leg Clubs in the UK were engaged in considerable contingency planning to re-integrate members into the environment of collective care and treatment as soon as it would be deemed safe to do so. ‘What can we do to keep up a collective spirit?’ has been a question on the minds of creative and entrepreneurial individuals involved in organising and running Leg Clubs, whose imagination was reignited by the challenge of the coronavirus lockdown. Some fantastic examples of different responses have come from two UK Leg Clubs.

In Weymouth, the lead nurse running five Leg Clubs managed to keep the service open to members throughout the lockdown five times a week, although all Leg Clubs were run from a single community venue and operated under new safety measures and reduced treatment capacity. At any time, only two nurses and two members were allowed in the venue, working at a safe distance of 2.5 m from each other. Members were given an appointment slot and had to wait outside the venue until they were called in by a nurse. The social side of the Leg Clubs was closed, but in line with the holistic care principles, whole-person care continued to be provided. For example, food boxes were prepared for members who were struggling to help themselves, and a telephone raffle was run in April 2020. Moreover, as time went on, the lead nurse began making plans for reintroducing at least some of the social activities to make up to the members for socialisation opportunities lost under the lockdown. The appointment system would remain. However, willing volunteers would be welcomed back, too, helping with serving refreshments, although under a new sanitary regime with only two members allowed to enjoy a socially distanced coffee and a cake at a time.

In Nailsea, the Leg Club had to temporarily close in an immediate reaction to the introduction of the restrictions, but a scaled-down substitute for social interaction between volunteers and members was maintained. A WhatsApp group was set up for some volunteers and nurses to keep in touch, and newsletters for volunteers were also organised. A fantastic idea developed around an initiative to keep some members...
connected with the volunteers. Every week, two Leg Club volunteers called a handful of members who had given written consent to have their telephone number securely stored on the Leg Club’s documentation to liaison between their members and DBS-checked volunteer drivers in relation to Leg Club pick-up and drop-off times. Given the success of this initiative, the Leg Club Chair began planning the introduction of a consent form to register members’ preferred modes of contact in case of any future temporary closures.

Now that the lockdown rules have loosened slightly in some parts of the country, individuals involved in organising and running the Leg Clubs can begin cautiously exploring new ways of restarting, while following social distancing guidelines. The desire to get Leg Clubs back up and running again is understandable, as the feelings of loneliness and social isolation among senior adults may be intensifying under enforced lockdown. Although, at the moment, it may not be entirely clear what is and is not possible, Leg Club nurses and volunteers are hard at work, looking for creative solutions to reassure members about the benefits of returning into a new, safe collective social and treatment environment.

Positive comments from Leg Club staff

We have received some very positive comments from the clinical team of Leg Clubs:

‘Many Leg Clubs are currently undergoing an inspection of the Club venue with their NHS provider Infection Control Specialist as part of their role reviewing their NHS wound clinic sites.’

‘Some Leg Clubs are in the planning stage to reopen in early September. As it’s a public venue some teams have submitted an enhanced Infection Control Risk Assessment to the venues owners and waiting for their response.’

‘The rationale for waiting until October for one Leg Club team is that they have 6 separate surgeries under a newish PCN and have to get a rota out to all of them for when their staff should be manning the Club.’

‘Another proactive Leg Club team looking to reopen have invited their infection control nurse specialist is visit the venue to ascertain how many members can be accommodated at the current social distancing rule.’

‘I would like to update you regarding the plans for our Leg Club. The St John Hall which is the venue for our Leg Club is being refurbished over the summer. As a team we organised a meeting with the person who is doing the refurbishment the hall. It has had a lot of updating with a new kitchen and removal of hazards highlighted in the last risk assessment. Our Leg Club is contributing to the cost of all over safety flooring which will be much better than the current carpet. We have gone through the Leg Club Foundation risk assessment and our TVNs risk assessment and it should be possible to re start the leg Club with 4 stations and timed appointments. We are hoping it will be possible to restart in October. Once the flooring is done, we will ask for a Health Board risk assessment and hopefully get the go ahead to restart.’

‘The members are keen to go back to the Leg Club.’

Day P, Gould J, Hazelby G. A public health approach to social isolation in the elderly J Community Nurs. 2020; 34
Seal P. Leg Clubs are helping us tackle loneliness 2018. https://tinyurl.com/y2lj3v4w (accessed 1 August 2020)

Dermatology Differential Diagnosis

By Jean Watkins

Skin problems are one of the most common reasons for people to seek help from a nurse or GP in general practice. This handy reference guide is the essential collection of common dermatological cases encountered in everyday practice with concise content on the aetiology, diagnosis, management and prevention so that healthcare practitioners can effectively treat their patients. Importantly, this book also examines other issues that impact patient care, with consideration for how social and psychological factors impact patients and treatment of skin conditions.

This book comprises articles from a long running and highly popular series published in the Practice Nursing journal on the differential diagnosis of dermatological conditions. It has been highly illustrated with colour pictures provided throughout to aid diagnosis.

The chapters have been presented in a user-friendly format making this a highly practical text for nurses and GPs.


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