

How have Tissue Viability Nurses organised themselves and has it worked?



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There is so much happening in Tissue Viability at the moment, it seems that there are new initiatives and activities on almost a daily basis. This is very exciting but may make people feel swamped and overwhelmed. It may also seem difficult to keep up to date, about the work of the National Wound Care Strategy Programme (NWCSP) for example, and what is happening in each of the clinical workstreams, amendments within NHS Supplies and the category towers as well as any broader changes in clinical practice. A lot of these groups are doing amazing work but it can be difficult to share and spread that information across the UK in a unified way.

What is frustrating is that we don't have a central way of communicating — there is no 'send to all' for Tissue Viability Nurses (TVNs). Messages are sent via multiple routes to a variety of factions. As a result, some people are inundated with the same message multiple times, yet others still don't receive them.

A BRIEF HISTORY

Was this easier when there were far fewer TVNs? I don't think so. In the early 1990s, when there were only three regional groups (London, North West and North East) compared with eleven groups now (*Figure 1*), the same problem was identified and attempts were made to join them up to create one unified national voice. The Tissue Viability Nurses Association (TVNA) was born and the three regional chairs met regularly to share information (Fletcher, 1995). At the time, there was much discussion about how the TVNA would work; should it be formalised, should it be aligned with the Royal College of Nursing (RCN), Wound Care Society or the Tissue Viability Society (TVS)? But none of these seem to have the right focus to represent TVNs; primarily, because it was felt that they were too broad and multidisciplinary, and would not best serve the needs of the specialist nurse population, therefore, the informal arrangement continued. As the speciality grew and more TVNs came into post, more regional groups were formed

with eventually eight regions attempting to remain in contact — this led to fragmentation and we somewhat lost our ways.

COMBATING CRITICISM

In 2006, TVNs met a major national challenge when the All Parliamentary Skin Committee published a paper that criticised the role of TVNs, stating there was no evidence that they made a difference to patient care. It proved extremely challenging to put forward a robust argument to say otherwise (Fletcher, 2006a; 2006b). However, we did and a rapid round of emails and call for evidence resulted in a robust response demonstrating the difference TVNs made to both patient outcomes and Trust finances (Fletcher, 2006c).

In 2009, there was a renewed attempt to join the TVNA with the Wound Care Society to form the Wound Care Alliance (Wound Care Alliance UK, 2019). At the time, the TVS was also invited to become part of the Wound Care Alliance but declined. This has allowed the TVS to become a broader society with a multidisciplinary membership from many different countries.

ENGAGING THROUGH SOCIAL MEDIA

2017 saw the foundation of the transformative Tissue Viability Nurses UK Facebook group, set up by Amy Verdon and Louise McKeeney, which now has 961 members (accessed 17th October 2019) and is a safe closed space for TVNs to share information, pose questions and get advice and support. It has spawned a related group: the Lower Limb Facebook group but it has less strict barriers to entry. However wonderful it is, even the Facebook groups still don't capture all TVNs as some people simply do not like social media and get their information in other ways (Schofield et al, 2019).

Another social media-based group, #TVN2gether, was formed in 2018 by Alison Schofield and Jenni MacDonald. It sees itself as a social movement bringing UK TVNs together with much energy and empowerment.

A NATIONAL WOUND CARE STRATEGY

2018 also saw the launch of the National Wound Care Strategy Programme (NWCSP) which has a stakeholder council and forums as its way of collecting and disseminating information (Academic Health and Science Networks (AHSN, 2018).

Other regional tissue viability-related groups have been formed — apologies if I have missed anyone and please do let me know — but there still seem to be areas with no coverage.

We also have a variety of wound care journals that are widely used to disseminate information and updates relevant to UK-based TVNs. However, if the Department of Health wanted to contact every TVN in England, let alone the UK, there is no way to do it. Both societies (TVS and WCA) based their mission statements around raising the national profile and influencing policy, i.e. “A desire to provide a professional voice for significant national and international tissue viability issues” (WCA) and “to actively engage with key national and international policymakers and stakeholders by providing advice and, where appropriate, seek to influence national policy and legislative processes relating to skin health and wound healing” (TVS), expressing a desire to be the voice of tissue viability. However, they do not mention TVNs and this

is crucial. In times where once again jobs and reputations are on the line, TVNs need to support each other, collaborate and do all they can to improve the care of their patients. They need to be as up to date as possible with what is happening nationally — whether with the hugely positive initiatives of the NWCSP or the more challenging activities such as those related to NHS Supplies and the procurement towers.

I don’t think we need yet another society, group or organisation as we have plenty already (Figure 1). Should we just have a more robust mechanism of communication between the regional groups? Although this frequently falls down if something is urgent with at least one chair out of office, delaying the group. Maybe we need to get a more up-to-date method of communication between them or a double chain/back up contact if an out-of-office message is received?

LAST BUT NOT LEAST

What are you doing for Stop the Pressure Day on 21st November? Hopefully, you have all received our range of red dots (Figure 2). I’d like to encourage you to get as many people in your organisation as possible to tweet about your red dot event so that we have a real multidisciplinary day. If you haven’t got your dots, please do email me.



Figure 2. Some of red dots available for Stop the Pressure Day on 21st November

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Figure 1. Breakdown of the different strands organising and informing tissue viability in the UK

