

# Chronic wound audit will prove the worth of TVNs

Pauline Beldon

Since my last editorial there have been some major changes in government and while Tony Blair is no longer the prime minister, we still have a Labour party running the country. Many of us can remember working as tissue viability nurses while a conservative government was in power but as governments and their leaders have come and gone TVNs have still not clarified their position or status within the NHS.

TVNs are the only specialist nursing service without a medical colleague equivalent, but we are still not seen as a critical clinical service. The trusts that have had their TVN hours reduced are evidence enough that we need to prove the worth of TVNs, not only to the party currently in power, but also to the bureaucrats within the Department of Health and perhaps, more importantly, to the general public.

I hope that by now all TVNs, through either the Tissue Viability Nurses Association, the Tissue Viability Society or Wound Care Society, will have heard of the chronic wound audit and have received the details of how to participate. Many of you have responded already and should be applauded for appreciating the value of the audit and participating fully. I thank you for your time and efforts. Yet more of you are no doubt still completing the audit and I look forward to reading your findings.

I am sure that the results of this audit — the first since 1995 — will not only provide conclusive evidence that

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TVNs make a huge contribution to the care of many patients with chronic wounds, but will also illuminate the sheer volume of patients managed by TVNs in the UK.

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The sheer volume of people with chronic wounds has never been properly revealed and I for one hope that when the scale of the problem is identified, those in power will realise that perhaps more realistic targets should be set, for example, increasing the number of patients who receive therapeutic compression therapy for venous leg ulcers. Unfortunately, too many of these patients are cared for by practice nurses, who although possessing a wide and varied skill set, are not experts in chronic wound management.

Surely the time has arrived for patients to be cared for by those with the appropriate skills? TVNs relish the challenge of dealing with chronic wounds, pressure ulcers, leg ulcers and diabetic foot ulcers. However, while secondary care trusts are struggling to adapt to the shift of financial power to primary care, many primary care trusts do not have enough expertise to deal with the challenge of chronic wounds and, in some instances, do not employ a TVN at all.

The results of this audit will be available for everybody to use and the information can be built into business plans that will potentially strengthen the position of tissue viability in both primary and secondary care. It will also help to ensure that patients receive the standards of care that they are entitled to. It is up to all TVNs to grasp this opportunity and I only hope that enough of you will be able to participate in this audit to make the results meaningful.

I urge any TVNs who have not yet decided whether to complete the audit to join with the rest of us in making it a success. Working together we can demonstrate that setting targets is a meaningful exercise and one that will enable us to show those in power the true burden of chronic wounds in this country. We need to send out the message that given the right resources, TVNs have the expertise and knowledge to successfully manage the problem of chronic wounds in the UK. **WUK**

Further information on the audit, audit forms and guidelines can be accessed at [www.tvna.org](http://www.tvna.org) or [www.tvs.org.uk](http://www.tvs.org.uk).