In February, chief nursing officer for England Chris Beasley identified nurses as being at the centre of a national strategy to prevent venous thromboembolism (VTE). In June, the chief medical officer for England, Sir Liam Donaldson, and the all-party parliamentary thrombosis group held a VTE leadership summit to raise awareness of the Department of Health’s prevention strategy.

The CMO identified VTE prevention as a major safety issue and said that it had been overlooked as a priority for too long. As part of this summit, a resource document (Arya, 2009) was issued.

This looks at raising awareness and education on VTE prevention. It describes a vision of VTE risk assessment and thromboprophylaxis becoming the norm as part of routine nursing practice.

If this vision is to be realised, there is a need for awareness of the seriousness of VTE and its related morbidity and mortality among healthcare staff, patients and the public.

The challenge in raising awareness among nurses is to ensure that practitioners at all levels know what is required of them to prevent VTE.

At the summit, Dr Roopen Arya, director of the King’s Thrombosis Centre, said that VTE nurse consultant posts should be established, because of the level of nursing expertise needed.

These nurse consultants would influence national and local policy, conduct novel research on VTE prevention, establish nursing VTE metrics, set up regular audits and disseminate best practice.

The benefits of funding such posts should become evident from audits showing increased VTE risk assessment and appropriate thromboprophylaxis.

Senior nurses or VTE clinical nurse specialists can ensure that thrombosis committees are formed to provide leadership for VTE prevention; a team of VTE link nurses is formed to act as champions; and risk assessment and thromboprophylaxis are included as a key performance indicator in trust clinical scorecards. They can also apply for ‘VTE exemplar centre’ status which serves as a Kitemark for good practice (see below).

Nurses in direct contact with patients, whether on the wards or in clinics, need to be aware that they are responsible for ensuring that patients are assessed for VTE risk, and that appropriate thromboprophylaxis is prescribed by an appropriate clinician.

Education is vital. The resource document includes contributions from the Map of Medicine project (a web-based tool), which has published a VTE prevention pathway and is available via the NHS Choices website. The most exciting development in education comes from e-VTE, an excellent learning resource (www.e-vte.org). This free tool was launched at the VTE leadership summit.

VTE prevention awareness and education for nurses at all levels – including in foundation and mandatory training – are necessary for the successful and continued implementation of the strategy.

The summit and the resource document provide an excellent opportunity to review the progress of a national VTE prevention programme and to plan ways to raise awareness and tackle the problem.

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King’s Thrombosis Centre: www.kingsthrombosiscentre.org.uk

**REFERENCE**


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**This week in Nursing Practice**

12 CHANGING PRACTICE

**Exploring how to measure patients’ experience of care in hospital to improve services**

The King’s Fund’s Point of Care programme held a workshop to examine various approaches to measuring patients’ experience.

16 CASE STUDY

**Recurrent urinary tract infections**

Treating recurrent urinary tract infections is not enough – this case study illustrates why their causes should be investigated.

18 IN DEPTH

**Exploring strategies and resources to plan the nursing workforce of the future**

Examining the local, international and demographic issues around planning the nursing workforce for the future, and what senior nurses need to consider.

23 GUIDANCE IN BRIEF

**Persistent lower back pain**

NICE guidance on the management of persistent low back pain, where the pain may be linked to structures such as joints, muscles and ligaments, and nurses’ role.

24 GUIDED LEARNING

**Enhanced recovery pathway in colorectal surgery 2: post-operative complications**

An outline of the possible post-operative complications of colorectal surgery, their signs and symptoms, and how to manage and treat them.