Acute to Community VAC Discharge Process

Oxford University Hospitals Tissue Viability Team

Referral sent by OUH TV to the relevant community team. Oxford Health Tissue Viability notified

If patient remaining under consultant care, all dressings should be provided by the OUH, and the consultant will decide when to discontinue VAC therapy

Oxford Health TV can only fund VAC for diabetic foot or surgical abdo wounds

Community Team

Training Requirements?

OUH responsible for contacting rep to indicate training need (copy OH TV in)

NO

YES

**Option 1**: Solventum representative provide training support

**Option 2:** Competent ADNS/TV Ren provide training support

Patient discharged to community (OUH funds VAC 2 weeks post discharge)

Oxford Health TVN to add patient to VAC database

Two-week supply of dressings and canisters discharged with the patient

TVN cancel VAC pump by emailing or phoning Solventum: [**ukcustserv@solventum.com**](mailto:ukcustserv@solventum.com) **or 080098088807** with ATV number, collection address & patient contact number

Update VAC database

Notify OUH TV of cancellation & reference number - [tissueviabilityteam@ouh.nhs.uk](mailto:tissueviabilityteam@ouh.nhs.uk)

NO

Oxford Health TVN to review 2 weeks post discharge

Continue VAC?

YES

Oxford Health Tissue Viability will supply further dressings and canisters

TVN to email/phone Solventum: [**ukcustserv@solventum.com**](mailto:ukcustserv@solventum.com) or **080098088807** to request funding transfer - send date, ATV number & current PO number (starts with ASE)

Notify OUH TV of funding transfer

Oxford Health TVN to continue to review VAC therapy until it is appropriate to discontinue

If clinically indicated, further surgical review may be required - refer to the patient’s named consultant (directly or via GP)

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| **VAC DISCHARGE PROCESS** | |
| **Oxford University Hospitals** | **Other Trusts** |
| The **ACELITY NPWT** system that should be used for VAC in Oxfordshire community is also used by the OUH.  This means the patient can be discharged from the OUH with the pump and 2 weeks supply of dressings.  The inpatient tissue viability team will liaise with the community team regarding discharge process.  The community tissue viability team are notified of the patient and will contact the community team to review the VAC therapy 2 weeks post discharge. At review we will decide if VAC therapy should continue or not and supply further dressings if required.  Patients remaining under consultant care are not reviewed by the community tissue viability team as it is the consultant’s decision when to discontinue VAC therapy. | The **ACELITY NPWT** system still needs to be used for patients requiring VAC who are being discharged from other trusts. It is the only system we use in Oxfordshire and the one that staff will have competence in.  If they have been on an alternative VAC system in hospital, then the patient needs to be switched to conventional dressings on discharge. They should NOT be discharged with a VAC pump that is different to the Acelity NPWT system.  The community team accepting the referral should contact the community tissue viability team ASAP so an Acelity NPWT pump can be ordered and commenced once the patient is discharged home.  The community tissue viability team will provide the required dressings and be point of contact for review of therapy. |
| Please note that **single use NPWT (e.g. PICO)** is different as it is an all-in-one disposable system. If the discharging team are sending the patient with further supply of the single use NPWT, the community team can continue the therapy.  The Smith & Nephew website has plenty of educational resources for PICO including [Application Guide](https://smith-nephew.stylelabs.cloud/api/public/content/3ba4321a6454450eb4dea190559b13ac?v=57ca3ce9). The Tissue Viability Team can also be contacted for advice. | |