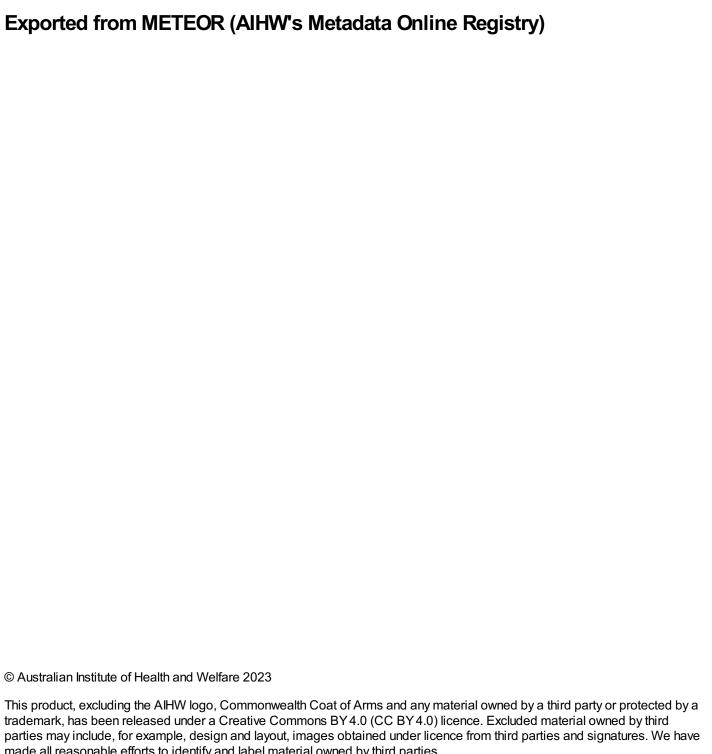
Clinical care standard indicators: Management of **Peripheral Intravenous Catheters**



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Clinical care standard indicators: Management of Peripheral Intravenous Catheters

Identifying and definitional attributes

Metadata item type: Indicator Set

Indicator set type: Other

METEOR identifier: 732513

Registration status: Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Description:

The Australian Commission on Safety and Quality in Health Care has produced these indicators to support health service organisations to monitor how well they are implementing the care recommended in the Management of Peripheral Intravenous Catheters Clinical Care Standard. The indicators included in this specification are a tool to support local clinical quality improvement and may be used to support other quality assurance and peer review activities.

The goal of the Management of Peripheral Intravenous Catheters Clinical Care Standard is to promote the judicious use of peripheral intravenous catheters (PIVCs) and to reduce complications by highlighting the importance of maintaining and preserving a patient's vessel health.

The Management of Peripheral Intravenous Catheters Clinical Care Standard relates to the care that patients of all ages, in all healthcare settings should receive to reduce complications associated with the insertion, maintenance and removal of PIVCs. This clinical care standard covers the period from when a patient is identified as requiring therapy to be administered by the peripheral IV route, to completing the therapy and removing the PIVC.

The Management of Peripheral Intravenous Catheters Clinical Care Standard applies to all healthcare settings where PIVCs may be inserted or managed, such as:

- All hospital settings, including public and private hospitals, subacute facilities, and outpatient and day procedure services
- Emergency services, such as ambulance services
- General practice and other community settings where PMCs may be used, including outreach services such as Hospital in the Home settings.

A clinical care standard contains a small number of quality statements that describe the level of clinical care expected for a specific clinical condition or procedure. Indicators are included for some quality statements to assist health service organisations monitor how well they are implementing the care recommended in the clinical care standard.

The quality statements that are included in the Management of Peripheral Intravenous Catheters Clinical Care Standard are as follows:

- Assess intravenous access needs. A patient requiring medicines or fluids is assessed to identify the most appropriate route of administration for their clinical needs.
- Inform and partner with patients. A patient requiring intravenous access receives information and education about their need for the device and the procedure. Their consent is obtained and they are advised on their role in reducing the risk of deviceIrelated complications.
- 3. **Ensure competency**. A patient's PIVC is inserted and maintained by clinicians who are trained and assessed as competent in current evidence-based practices for vessel health preservation and preventing device-related complications, relevant to their scope of practice. Insertion by a clinician working towards achieving competency is supervised by a clinician who is trained and assessed as competent.
- 4. Choose the right insertion site and PIVC. A patient requiring a PIVC is assessed to identify the most suitable insertion site and PIVC (length and gauge) to meet their clinical needs and preferences for its location.
- 5. Maximise first insertion success. The likelihood of inserting a PIVC

- successfully on the first attempt is maximised for each patient, according to the health service organisation's process for maximising first-time insertion success.
- 6. **Insert and secure**. A clinician inserting a patient's PIVC uses standard precautions, including aseptic technique. The device is secured and a sterile, transparent, semi-permeable dressing is applied unless contraindicated.
- Document decisions and care. A patient with a PIVC will have documentation of its insertion, maintenance and removal, and regular review of the insertion site.
- 8. Routine use: inspect, access and flush. A patient's PIVC and insertion site is inspected by a clinician for signs of complications at least once per shift or every eight hours, when accessing the device, and if the patient raises concerns. Standard precautions including aseptic technique are used when performing site care and accessing the PIVC. Patency is checked and flushing is performed at intervals according to local policy to assess device function and minimise risk of device failure.
- 9. **Review ongoing need**. The ongoing need for a patient's PIVC is reviewed and documented at least daily, or more often if clinically indicated.
- 10. Remove safely and replace if needed. A patient with a PIVC will have it removed when it is no longer needed or at the first sign of malfunction or local site complications. A new PIVC will be inserted only if ongoing peripheral vascular access is necessary, consistent with the replacement recommendations in the current version of the Australian Guidelines for the Prevention and Control of Infection in Healthcare.

Relational attributes

Indicators linked to this Indicator set:

Management of Peripheral Intravenous Catheters Clinical Care Standard: 01-Proportion of patients with a PIVC in situ that has not been used for a therapeutic purpose since it was inserted

<u>Australian Commission on Safety and Quality in Health Care</u>, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 02-Proportion of patients with a PIVC in situ that can identify the reason for the device

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 03-Evidence of a locally approved policy that ensures healthcare professionals are competent in PVC insertion, monitoring, and removal

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 04a-Evidence of local arrangements that provide systematic support for decisions related to the selection of an appropriate PIVC device

<u>Australian Commission on Safety and Quality in Health Care</u>, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 04b-Proportion of patients with a PIVC in situ over an area of flexion

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 05a-Evidence of a locally approved policy that defines the local protocol to support PIVC insertion on first attempt

<u>Australian Commission on Safety and Quality in Health Care</u>, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 05b-Proportion of patients with a PIVC in-situ who report their PIVC was inserted on the first attempt

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 07a-Evidence of a locally approved policy that defines the documentation for PIVC insertion, maintenance, removal, and regular review

<u>Australian Commission on Safety and Quality in Health Care</u>, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 07b-Proportion of patients with a PIVC in situ with the indication for insertion documented in their medical record

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 08a-Proportion of patients with a PIVC in situ who have their PIVC insertion site inspected for complications at least every 8 hours

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 08b-Proportion of patients with a PIVC in situ with a clean, dry and secure PIVC dressing

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 09-Proportion of patients with a PIVC in situ who have been assessed in the last 24 hours to determine the ongoing need for their PIVC

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Management of Peripheral Intravenous Catheters Clinical Care Standard: 10-Proportion of patients with a PIVC in situ that has not been used for a therapeutic purpose in 24 hours

Australian Commission on Safety and Quality in Health Care, Standard 25/05/2021

Collection and usage attributes

National reporting arrangement:

A number of the indicators are specified for collection through a point prevalence survey of patients with a PIVC in situ. Clinicians and health service organisations may choose to prioritise some of the suggested indicators based on the focus of quality improvement activities at the health service. It is important that a point prevalence survey is undertaken as part of a quality improvement cycle, and results are shared with all healthcare professionals involved in patient care. No benchmarks are set for the indicators.

Comments:

Monitoring the implementation of the Management of Peripheral Intravenous Catheters Clinical Care Standard will assist in meeting some of the requirements of the National Safety and Quality Health Service (NSQHS) Standards (ACSQHC 2017).

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: Australian Commission on Safety and Quality in Health Care 2017. National Safety

and Quality Health Service Standards. 2nd ed. Australian Commission on Safety

and Quality in Health Care, Sydney.

Australian Commission on Safety and Quality in Health Care 2021. Management of Peripheral Intravenous Catheters Clinical Care Standard. Australian Commission

on Safety and Quality in Health Care, Sydney.