Safe Care Bulletin

Starship Child Health
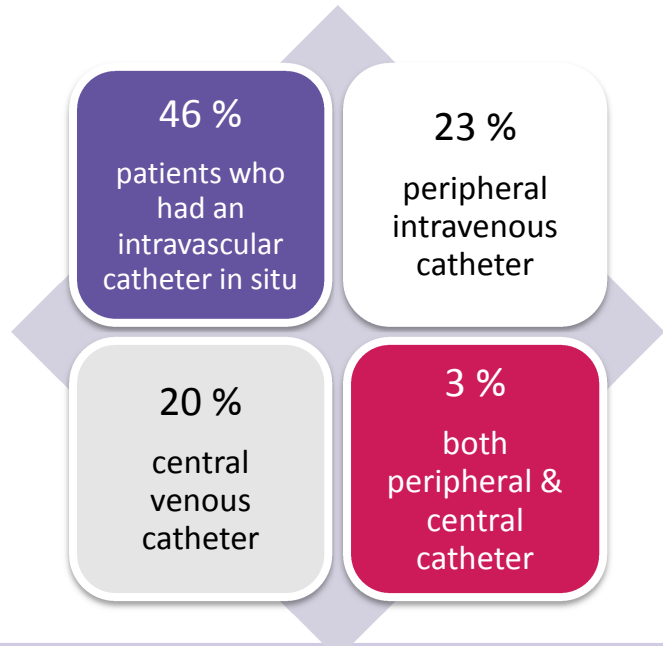October 2019

Point Prevalence Survey: Intravascular catheters

AIMS

- define the proportion of inpatients at Starship Children's Hospital who have a peripheral intravascular catheter (PIVC) at a specified point in time (July 2019)
- measure the presence of PIVC infection or early signs of infection
- assess the indication for PIVC
- collect the number of central venous catheters (CVC) in situ.

46 % patients who had an intravascular catheter in situ

23 % peripheral intravenous catheter

20 % central venous catheter

3 % both peripheral & central catheter

Peripheral intravenous catheters

No catheter had signs of phlebitis as indicated by a visual infusion phlebitis (VIP) score of ≥ 2

10% of catheters had no known clinical indication*

80% of catheters had no date documented on the PIVC dressing site as recommended by the ADHB PIV clinical guideline

**patient currently receiving an intravenous medication and/or fluid, currently receiving an as required intravenous medication (must have received this at least once in the previous 24 hours), patient has an unstable condition (e.g. GI bleeding, seizures, cardiac instability) or patient is waiting for a procedure requiring intravenous access within the next 24 hours.

Recommendations
Teams to review the necessity of intravascular catheters during daily ward round (Idle PIVCs have been implicated in adverse patient outcomes, including phlebitis and healthcare-associated bloodstream infections)

Child Health Nurse Consultant to amend wording in ADHB guideline to acknowledge limited ability to document date on an infant/child dressing

Teams to ensure where it is not possible to document the date on the dressing there is clear documentation in the clinical record

Appreciative thanks to the survey team members from Microbiology, Infection Prevention and Control and Child Health