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# MACOVA 2020

15<sup>th</sup> – 17<sup>th</sup> JANUARY | EDINBURGH, SCOTLAND



Royal Berkshire  
NHS Foundation Trust

## Hospital management view of the importance of Vascular Access

Steve McManus  
Chief Executive

Royal Berkshire Hospitals NHS Foundation Trust  
United Kingdom





# **hello** my name is...  
😊

# Steve McManus Chief Executive

# What we will cover

- Background
  - Royal Berkshire Hospitals
- Patient Safety-national context
- Meet the RBFT Vascular Access team
- Strategic value of vascular access support
- Interventions for a positive safety culture
  - Safety-a strategic intent
  - Learning-at the heart of a safety culture
- Next steps for VA in Berkshire West

# Who we are



Royal Berkshire  
NHS Foundation Trust

‘Working together to provide outstanding care for our community’



Compassionate | Aspirational | Resourceful | Excellent



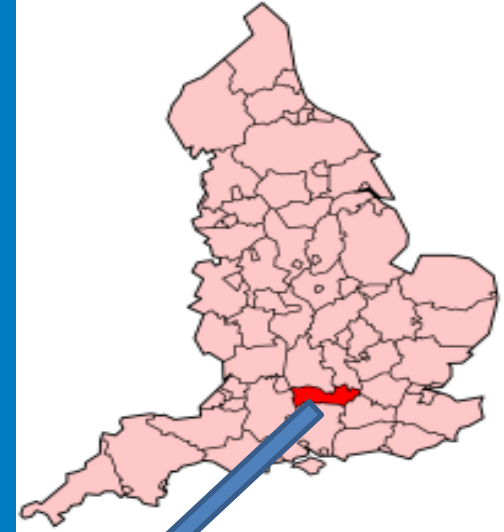
# Serving our community

## Across six sites we serve a population of 1million people

- In 18/19 we had:
  - 111488 attendances through our Accident and Emergency
  - 17561 attendances through our Eye Casualties
  - 5491 attendances to our GP led unit
  - 4861 Births
  - Just under 600,000 Outpatient attendances
  - Just over 50,000 Planned operations (44k Day Cases , 7000 inpatients)



# Where we are



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# Proud to be rated 'Good'

## Overview and CQC inspection ratings

<b>Overall Good</b> <a href="#">Read overall summary</a>	Safe	Good ●
	Effective	Good ●
	Caring	Good ●
	Responsive	Good ●
	Well-led	Good ●
	Use of Resources	Good ●
<b>Good</b>	Combined rating <a href="#">Combined rating summary</a>	



# Our values guide everything we do



Royal Berkshire  
NHS Foundation Trust

Compassionate | Aspirational | Resourceful | Excellent



Compassionate | Aspirational | Resourceful | Excellent



# RBFT's 5 'true north' objectives

Provide the highest  
quality care

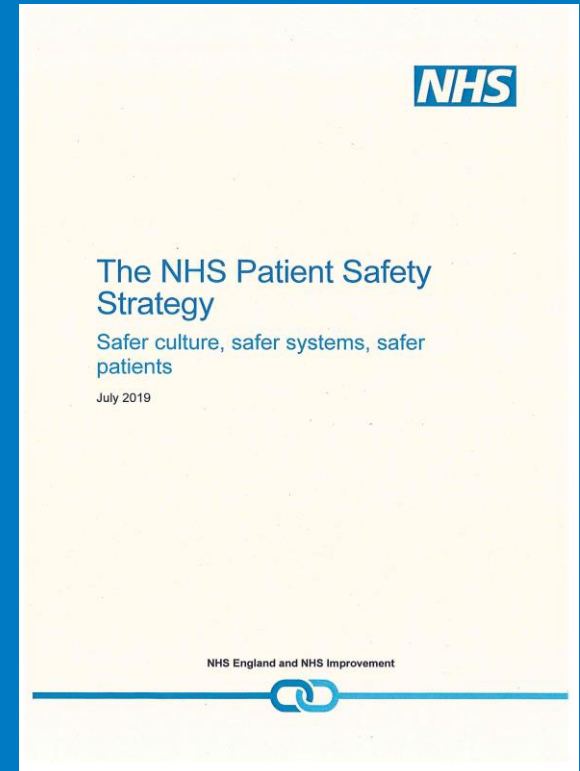
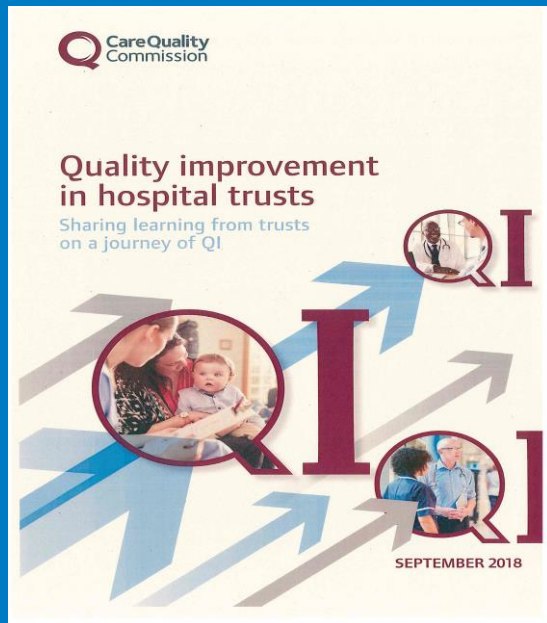
Drive the development  
of integrated  
care

Invest in our staff and  
live out our values

Cultivate innovation  
and transformation

Achieve long term  
financial sustainability

# Patient Safety-national context



# Meet the RBFT VA team

Vascular Access is an integrated service within Interventional Radiology



**Leanne**  
Lead Nurse  
Radiology and  
Vascular



**Louise**  
Vascular  
Access Sister



**Christiana**  
Vascular  
Access  
Practitioner



**Jill**  
Vascular  
Access  
Practitioner

# Our Vascular Access service

Integrated links with  
Oncology , Nutrition,  
IPC, Clinical skills,  
Practice Educators  
and Community  
Teams

Out of hours  
Outreach Team  
provide US  
cannulation

Vascular Access  
service  
0800-1800 Mon-Fri  
X1 PICC Practitioner  
X1 AP / band 5  
Practitioner

Inpatient bedside  
placement - PICC ,  
Midline and US long  
dwell cannula

Oncology outpatient  
PICC insertion clinic  
Mon – Fri 09:00 -15:00

# Safety: a strategic intent



Royal Berkshire  
NHS Foundation Trust

**By 2025 our health system will be in the top 20 in the world for how we manage patient safety**

- Saving Lives**
- Improving Lives**



# Impact of poor VA management



# VA team-delivering on our strategic priorities

## Central approach to the co-ordination of VAD care

- Standardisation of clinical performance and policy compliance
- Evaluate up to date products and technology
- Lead Trust wide education and training
- Promote patient education
- Promote greater insertion success and reduce complications
- Dedicated point of care resource to troubleshoot issues or respond to patient queries

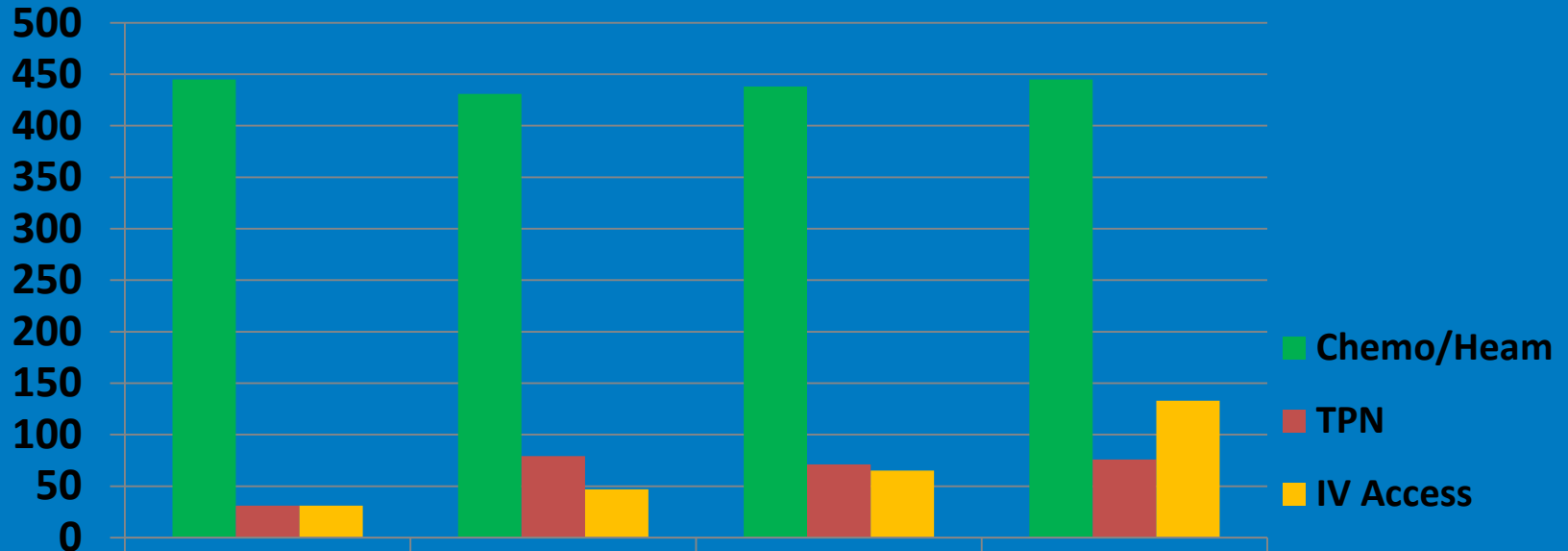
## Improved the patient experience

- Patients will have their VAD assessment and insertion performed by an experienced practitioner
- Shared care approach, where patients are included in the decision-making process, understanding alternative devices, ensuring the right device is used for each individual patient
- Increased success rate insertion on the first attempt is very high
- Post-insertion complications will be reduced leading to uninterrupted therapy (SEPSIS)



# VA team activity 2016 - 2019

❖ Significant growth for central line / midline requirement for IV access, over the last four years



	2016	2017	2018	2019
Chemo/Heam	445	431	438	445
TPN	31	79	71	76
IV Access	31	47	65	133

# Learning - at the heart of a safety culture

Our mission is to be an enquiring organisation where each day our people are considering how we can be:

“Better than Yesterday”

# Learning-at the heart of a safety culture



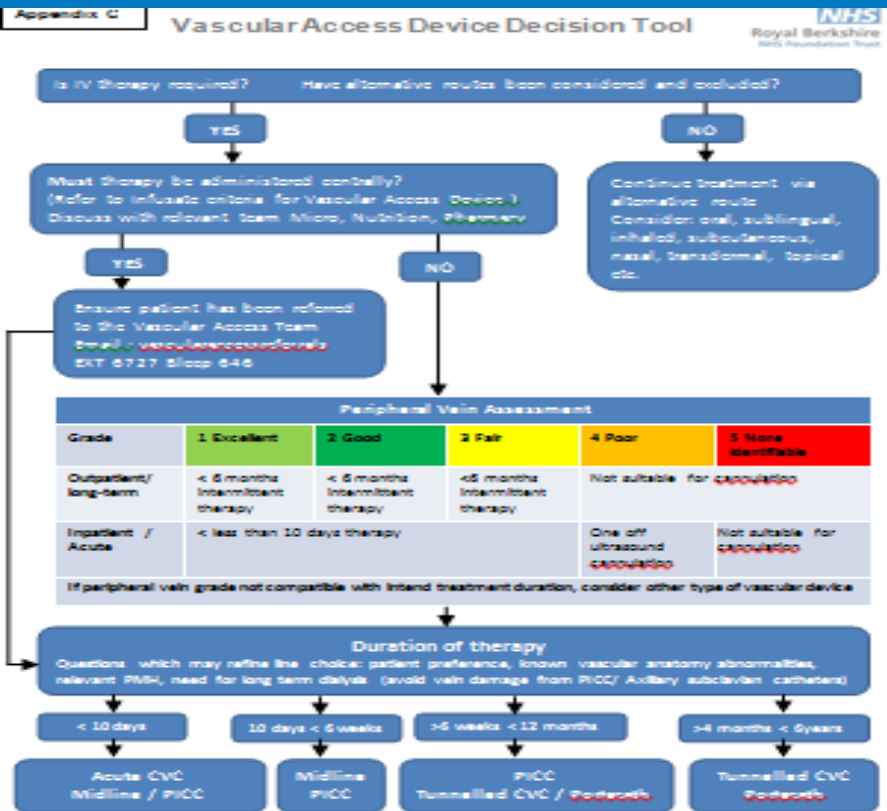
## Health Education England



# Vascular Access teaching tools (1)

## Based upon UK Vessel Health and Preservation Tool (VHP)

- \* Vessel health and assessment tool
- \* Infusate criteria for vascular device
- \* Incorporated into protocols
- \* Vascular Access device decision tool



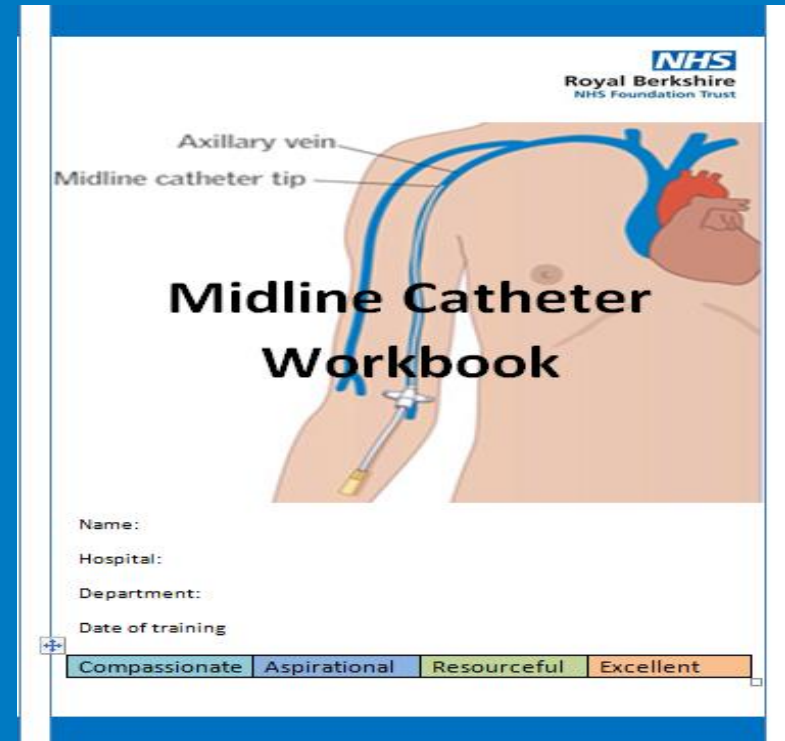
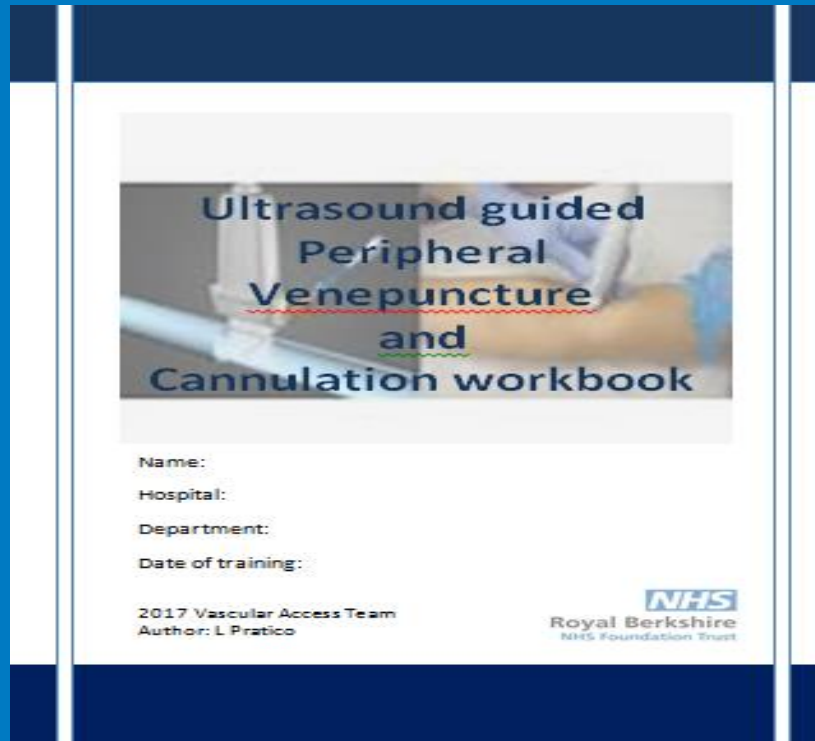
**Appendix B - Vessel Health and Assessment Tool**

**Peripheral Vein Assessment**

Grade	Vein Quality	Definition of vein quality	Insertion management
1	Excellent	4-5 Palpable / easily visible veins suitable for cannulation	Cannula to be inserted by trained competent healthcare practitioner
2	Good	2-3 Palpable / easily visible veins suitable for cannulation	Cannula to be inserted by trained competent healthcare practitioner
3	Fair	1-2 Palpable / easily visible veins suitable for cannulation (veins may be small, difficult to assess and require heat packs to aid vasodilation)	Cannula to be inserted by trained competent healthcare practitioner with experience and may require ultrasound guidance
4	Poor	No veins are palpable / easily visible veins and are not suitable for cannulation without visualisation aids such as ultrasound	Cannula to be inserted by trained competent healthcare practitioner with experience. Refer to vascular access team, Ext 6727, bleep 646
5	None identifiable	No visible veins (naked eye or use of visualisation aids)	Peripheral cannulation should not be performed. Refer to vascular access team, Ext 6727, bleep 646

# Vascular Access teaching tools (2)

- Training packages alongside vascular access device insertion protocols
- Ultrasound cannulation training booklet
- Midline training booklet



Summer 2019

## Vascular Access News Letter



Firstly I wanted to introduce myself as the new Vascular Access Sister at Royal Berkshire, I am based in Radiology level 1, you will see me out on the wards please do not hesitate to say "Hi" (especially if I look lost), alternatively you can contact me on Ext. 6727 Bleep 646.

### Proactive versus Reactive

In line with best practice and research I would like us to work towards a more proactive approach to vascular access, for patients that are difficult to access for phlebotomy or cannulation please refer these patients straight away to Vascular Access for assessment, it will improve both the patients experience by preventing multiple needle sticks and reduce missed doses and improve you as the nurses day as you will have reliable access for medication delivery or bloody sampling.



### 'PICC isn't Working'

I have had a few bleeps recently for PICCs not bleeding back or lumens being blocked completely. If this has happened to you please do not hesitate to bleep as soon as you are aware – 646.

There is a close link between thrombosis/fibrin formation and infection so we never want to leave a blocked/partially blocked catheter.

### LOVE your PICC

If you have a patient with PICC on the ward and you are unsure of how to perform a dressing change, take bloods, change a needle free bung or are wondering what the "weird orange thing" is under the dressing, or maybe you have been asked to remove the PICC which is attached to the "weird orange thing". Please call 6727 and/or bleep 646, or speak to your practice educator. We are always happy to come and support you.

# Working alongside our Patients

## Vascular Access Team

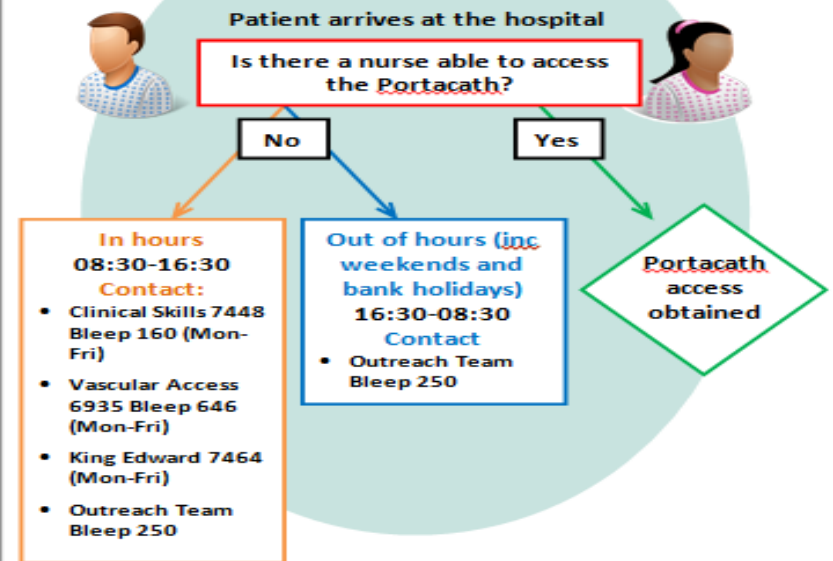


I am known to the Vascular Access Team, please inform them of my admission. Ultrasound cannulation ONLY. EXT 6727 Blp 646/250

Compassion, Aspirational, Resourceful, Excellent



## Portacath Access: A Patient Pathway

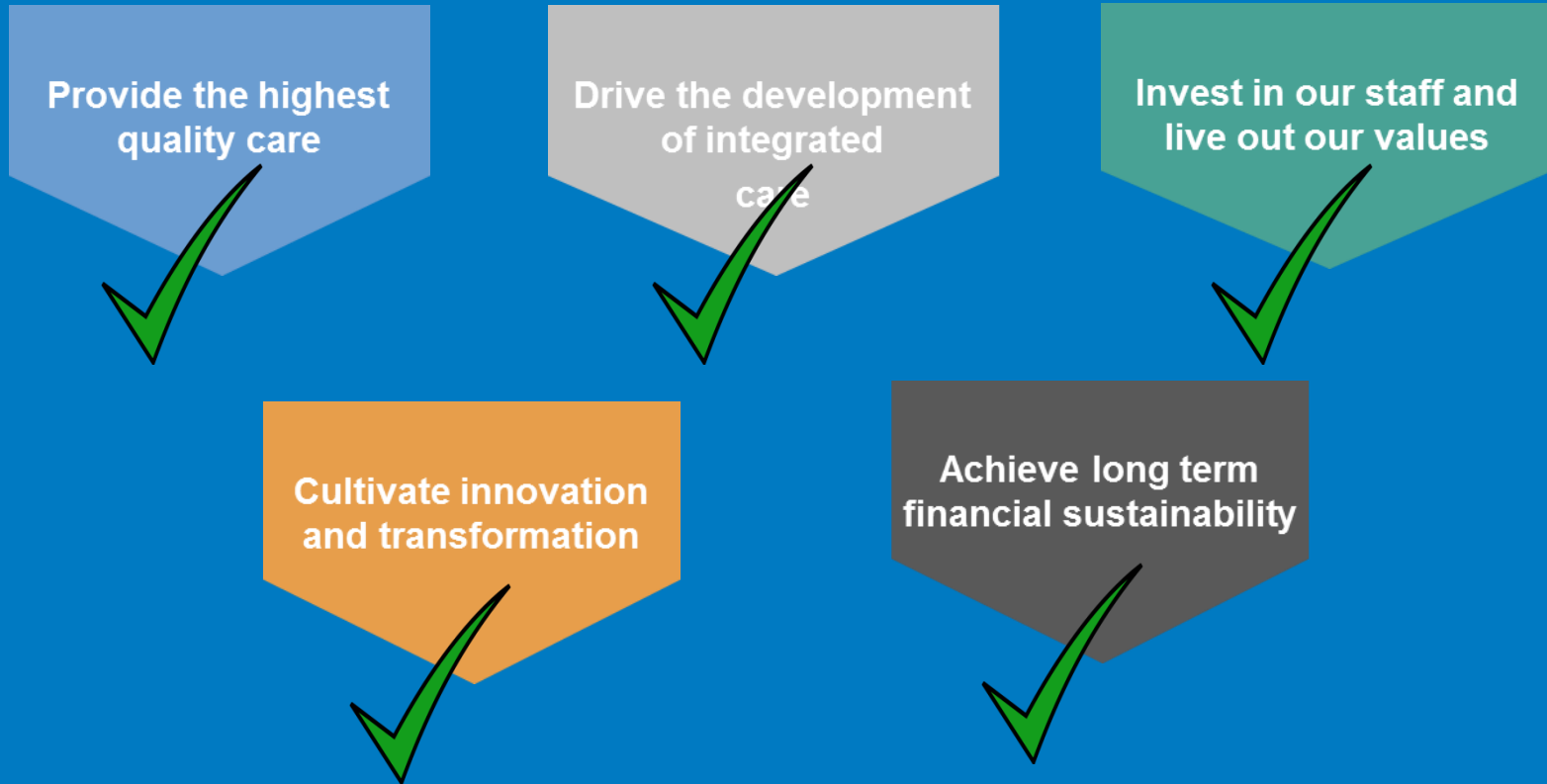


# The future of VA service at RBFT

- Introduction of OPAT service
- Identify specific areas for US cannula training
- Trust wide update of care and maintenance training
- Vascular access Trust webpage for easy access information
- Develop Nurse Led Arm Port service
- Permanent clinical area for PICC Oncology outpatient clinic
- Oncology department PICC practitioner



# VA and RBFT's 5 'true north' objectives



Create the condition for outstanding patient care that values safety through having a learning culture at the heart of what we do each day

# Thank you

# Questions