

Observation: 1

Clinical Practice Process Improvement Tool : Peripheral Vascular Device (PVD) Insertion

Functional Area: Start Date: Overall Auditors:

Page 1 of 2

Module: Peripheral Line Device Management

Date: Auditors:

Standard: Evidence based best practice is being consistently applied to prevent peripheral vascular device infections

Question Set: Peripheral Line Device Management - Insertion Process

	Question	Guidance	Yes	No	N/A	Comment
1	Has the clinical need for the peripheral vascular device been confirmed?	Review documentation for the patient/resident who is undergoing a peripheral vascular device insertion.				
2	Is the trolley/tray/surface cleaned with detergent and water or detergent wipes and then dried? (84, 85, 86)	Observe whether the trolley/tray/surface is cleaned.				
3	Is hand hygiene performed prior to the procedure? (20, 90)	Observe practice. Moment 2 - before an aseptic task.				
4	Are tourniquets single use or decontaminated between uses? (77, 78, 82)	Visually check.				
5	Are sterile gloves worn during the procedure? (20)	Observe practice.				
6	Is Chlorhexidine 2% in 70% alcohol applied to the insertion site and allowed to dry before insertion?	Observe practice, where there is sensitivity check povidone lodine is used.				
7	Is the integrity of sterile packs checked prior to use?	Observe practice.				
8	Is asepsis maintained throughout the procedure?	Check: Sterile Items are intact. Sterile Packs integrity. Equipment is in date. No unsterile items are touched. Contaminated items are replaced.				
9	Is a sterile, semi permeable, transparent dressing placed over the insertion site?	Observe practice or ask a member of staff to describe procedure.				
10	Is date, time, site and insertion documented and signed by the person inserting the device?	Check documentation.				
11	Is a care plan commenced following the procedure?	Check documentation.				
12	Are sharps disposed of safely and at the point of use? (20, 81)	Observe practice or ask a member of staff to describe procedure. Also check that clean trays/bins are available and are compatible with the bins in use.				
13	Is hand hygiene performed immediately following removal of personal protective equipment? (90)	Observe practice. Moment 3 - after body fluid exposure.				



Infection Prevention Quality Improvement Tools

Clinical Practice Process Improvement Tool : Peripheral Vascular Device (PVD) Insertion



Question Set Comments/Recommendations for Peripheral Line Device Management - Insertion Process

- 20 Pratt RJ, Pellowe C, Wilson JA, Loveday HP, Harper PJ, Jones SRLJ, McDougall CM, Wilcox MH. (2007) Epic2: National Evidence Based Guidelines for preventing Healthcare-Associated Infection in NHS Hospitals in England. Journal of Hospital Infection. 65 (1) Supplement 1.
- 77 Standards March 2008 Healthcare Associated Infection (HAI): Quality Improvement Scotland, 2008.
- 78 Draft Infection Prevention and Control Standards: A Consultation Document: Health Information and Quality Authority, Republic of Ireland 2009
- 81 Department of Health (1998) Guidance for Clinical Health Care Workers: Protection Against Infection with Blood-borne Virus Recommendations of the Expert Advisory Group on AIDS and the Advisory Group on Hepatitis
- 82 Department of Health (2009) Code of Practice for the NHS on the prevention and control of healthcare associated infections and related guidance: Department of Health.
- 84 Control of the Environment Policy and Procedure. In: Infection Control Team HPS, editor: NHS National Services Scotland, 2009 www.documents.hps.scot.nhs.uk/hai/infection-control/sicp/environment/mic-p-environment-2009-02.pdf
- 85 The NHS Cleaning Manual: NPSA, 2009
- 86 The NHS Scotland National Cleaning Services Specification. In: Force HAIT, editor: NHS National Services Scotland www.scotland.gov.uk/Publications/2004/05/19319/36643
- 90 World Health Organisation (2009) Guidelines on hand hygiene in health care. Geneva, Switzerland: World Health Organisation