

DEVELOPMENT OF A SUSTAINABLE MODEL FOR A NURSE LED INTRAVENOUS ACCESS TEAM (IVAT) WITH THE ABILITY TO COVER PLANNED LEAVE WITHIN ALLOCATED FUNDING

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Introduction: In 2013 a project officer was recruited to develop a model for an Intravenous Access team for Canberra Hospital. While investigating existing Vascular Access Teams it was noted that in many models if the Vascular Access Nurse was on leave the service was not operational. To allow for a robust team, funding was sought for a team of three nurses, however was allocated for a permanent Clinical Nurse Consultant (CNC) and one RN Level 2 position.

Objectives: To provide a service with two credentialed inserters scheduled daily to enable the ability to cover planned leave, within the allocated funding.

Methods: A permanent CNC was appointed. To allow for growth in credentialed inserters an expression of interest for a fulltime RN 2 position for a six month rotation was advertised. A training and credentialing program utilising adult learning principles was developed for the secondment.

Successful candidates work closely with the CNC to develop PICC placement skills under Ultrasound guidance and ECG Tip navigation and confirmation. Following the six month placement RN's return to their unit with advanced skills in CVAD management.

Results: Currently three RN's have been trained in the program and are proficient in PICC insertions. To enable their continuing competence inserters return to the IVAT to cover planned days off and scheduled leave.

Conclusion: Canberra Hospital IVAT is able to provide leave cover for credentialed staff with competent PICC inserters within a limited funding model. As the service expands an additional permanent RN 2 position is anticipated.