

Regional IV Advisory Group

Minutes

Meeting Date: 29 August 2018 at 10.00 am

Venue: Karamea Room, New Zealand Blood Service, 15 Lester Lane, Christchurch

1. **Welcome:** Neil Hellewell (Chair), Susan Mercer (Secretary), Cate Fluitsma, Ally Hale, Elizabeth Culverwell, Robyn Carruth, Sheena McLeod, Julie Hedley, Rebecca Bell, Rhonda Roberson.
2. **Apologies:** Robyn Cumings, Edna Byron, Joy McNulty, Jo Tiller, Michael McIlhone, Kerry Davies, Janetta Skiba, Peter Boon, Ellen Jones, Jo Butfield, Tina Hewitt.
3. **Minutes of last meeting:** The Minutes of 20 June 2018 were confirm as a true and accurate record. [Moved by Neil Hellewell](#)
[Carried](#)
4. **Matters Arising:**
 - a. **IV Link Education review:** Responses from CDHB and Southern Cross Charge Nurse Managers to Elizabeth's email were not abundant nor committal with thoughts and comments on the current IV Link training programme. It was hoped that responses would comment on IV Link roles and audits, difficult situations and other practice enhancements. Given the poor response, the inference is to assume that everyone is happy with the status quo. There was no input received from Forte Health nor St Georges Hospital.


Feedback for
Minutes August 201
 - b. **Feedback on programme content for IV Link study days:** Elizabeth, Julie and Robyn met since last meeting to discuss the role description of the IV Link Nurse and changes to next year's programme. Elizabeth presented the following comments to the Committee –
 - i. **Initial IV Link programme:** This programme will remain the same with changes to the 1400-1500 time slot where a presentation on the IV Link Health Forum (Healthlearn) could be introduced. Elizabeth also reflected on how Michael (DON) likes to participate from time to time, suggestive that he wants a voice despite not always being available.
 - ii. **Recertification IV Link Course:** A new session between 0935-1100 hours is to be introduced to replace Robyn's presentation on assessments, given that this is already taught in the initial IV Link programme. Elizabeth suggested that the focus of this new session could be a white board exercise discussing the challenges around the IV Link role eg. environment, behaviours and leadership. When approached, the DONs determined that Charge Nurse Managers need to make time for the IV Link nurse responsibilities however staffing shortages and workloads particularly in MedSurg

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areas always proves to challenge available time. With approximately 230 IV Link staff, some areas try to do the role very well, but generally it is not done well and often Nurse Educators are completing audits for IV Link nurses, particularly in busier clinical areas.

- iii. Elizabeth and Julie reported that their evaluation of the current recertification programme confirmed retaining -
 - Victoria Whitter's presentation from Interventional Radiology. It links in well with the introduction of ultrasound-assisted cannulation course that CTC nurses and Oncology staff are currently undertaking.
 - Presentation on Clinical Practice, observations, survey monkey.
 - Infection Prevention, cannula and CVAD surveillance; DHB reporting results
 - Healthlearn - introducing lanyards as a visual prompt for accessing Healthlearn.
- iv. Audits: Neil advised the meeting that Roxanne Mckerrashas developed a smartphone App for audits. This will have many benefits, especially access to templates providing the ability to complete assessments in real time. The initiative is currently awaiting approval, will be available to any organisation across the region and able to pool data. Neil identified that it is an exciting development that could be piloted within the IV Link nurse group, with training embedded into the Initial IV Link training programme.
- v. Role and Responsibility Agreement: Elizabeth suggested that more clarity should be given in the IV Link Agreement to identify that the role has an educational component and an expectation that nurses will know the IV Policy, show leadership in teaching and participate in education.



Review of the
current IV link Educ

Meeting was interrupted by an external phone call (unrelated)

- c. **Healthlearn**: Better utilisation could be made of Healthlearn to provide links to journal articles (copyright laws determine that only links can be added, not full text) and other IV forums. Neil advised that 'a dedicated driver' is needed to get this started and maintained, that the wide ranging potential is to provide regular distribution eg. IV newsletter that pushes information out, provides for feedback, and thereby promote discussion. Ideas could be brought to future RIVAG meetings to discuss suitability for inclusion.

Meeting interrupted by phone call to Elizabeth

5. Standing items:

a. **Healthlearn update:**

- i. Log-ins: Sheena commented on ongoing problems with passwords. Consensus agreed that it was often user error with staff using their wrong email address or forgetting their passwords.

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- b. **IV Link Training:** Neil asked that Elizabeth publish the IV Link training dates for 2019 on the IV Link webpage.

[Plan of Action](#)

[Elizabeth to publish 2019 IV Link training dates](#)

- c. **CVAD update:** Elizabeth advised the committee that there has been no reported issues with the change in practice concerning routine heparin locks. All adult Ports are now locked with 0.9% sodium chloride rather than heparin.

Robyn reported that she is aware of some requests by Medical staff to continue using heparin locks for patients with previous history of issues around blocked lumens. Elizabeth clarified that heparin acts as a blood thinner not an antithrombotic.

6. New Business

- a. **New IV focus at West Coast DHB:** It was hoped to welcome Jo Tiller to the committee however in her absence, Neil confirmed her new appointment at WCDHB and hoped that we would get to meet her in Christchurch soon. Jo replaces Kayla Brown on the committee.
- b. **New Community Infusion Service:** Susan gave a quick briefing on the commencement of a new Community based Infusion Service operated by Better Health. This venture was successfully tendered from Christchurch Public Hospital, aimed to reduce the Medical Day Unit workload. Strict criteria surrounds identified patients suitable for community blood transfusions. Sandra Jacobs from Blood Bank and Susan have been quite involved with transportation and storage of blood components, administration policy and documentation. A powerpoint presentation prepared for the recent Hospital Transfusion Committee meeting was attached to the Agenda and circulated prior to this meeting for individual information on establishing the Service and on-going support and evaluation. Neil wondered if the Practice Nurses have undertaken the Healthlearn blood administration package. Susan recalls discussion around competencies and has been assured that the Clinical Nurse Specialist appointed to lead the Service is aware of this training. Practice Nurses are accessing both peripheral and central lines.



HTC July 18.pptx

- c. **NZBS Revised Adverse Transfusion Reaction** clinical management algorithm, notification form and lanyards are due for release 4 September 2018. Susan is actively promoting posters of the new forms and algorithm which contains a change in practice for management of mild adverse events. This involves the whole Canterbury DHB geographical region including private and community healthcare facilities that transfuse blood and blood products.



New ATR
communication.doc

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- d. **National IV Course development:** Neil reported a large turnout at a recent forum with representation from every DHB region with exception of Waikato. IVNNZ members are driving course development with longstanding work being recognised and the South Island model utilised as a basis for the national model and development of a national “IV passport” that will be transferrable between all DHBs. This will ultimately save time and duplication, sharing of knowledge and recognising specialisation around the country rather than individual DHBs. Five courses will be used to trial this venture once confirmation of commitment has been received from people who have offered to assist. Other courses have also been identified including Pressure Injuries (funded by ACC), Cultural Safety and Falls Prevention.
- e. **E-Portfolios:** “Learning Works” can provide an interface on the Mahana platform that will link into Healthlearn. Based in Hamilton, similar packages have previously been designed for multiple organisations. It will provide the ability to submit PDRP portfolios online with a consistent format that could be rolled out to midwives (whose current QLP appraisal – located on the CDHB iPerform, is unable to integrate with Healthlearn), allied health and any new groups that can access the template. Once approved, Neil and the PDRP educator will then attend a Train the Trainer course. Julie was interested to know the projected time frame till implementation to which Neil provided further information. Moving forward, a tentative copy of a contract has been sent to the legal team for review and identifying who would own the contract for the South Island still needs to be clarified including funding to maintain the package (approx. \$6,000 pa). Neil advised that once the contract is accepted and the political context of ownership is sorted, the platform should be available early 2019 at which time the PDRP educator will schedule training sessions. The new Manawa building has purpose built computer labs that may be used to facilitate training to all south island staff. Sheena is to find a contact within Pegasus PHO, so that she can keep the 24hr surgery up to date with updates from the PDRP team.
- f. **New Manawa Clinical Education facility:** Neil provided an update on the relocation to the new Manawa learning facility, reflecting that it was fostering good communication between ARA and CDHB and that the two organisations were working well together.
- g. **Dates and venues for meetings for the remainder of 2018:** Dates for remaining meetings for 2019 to be identified and added to the Minutes retrospectively.

There being no further business, the meeting closed at 10.58 am.

Next meeting – October 25, 2018 at 11.00am

Venue: Room 303, Level 3, Manawa Building, 276 Antigua Street, Christchurch.

Can people indicate if they prefer a VC to be available or Zoom (we can set up either - but not both)

Parking options: 180 minute car parks at the Hagley Oval, and Tennis Courts

Lichfield St Carpark (1st hour free) 10 minute walk to hospital or use shuttle

Some parks on Moorhouse Avenue and surrounding streets.