

Reducing human factors in IV care by using passive disinfection caps



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Introduction

If decontamination of a vascular access port is performed incorrectly there is a risk of microbiological contamination when it is accessed. The use of alcohol and CHG wipes is the most widely adopted process for decontaminating hub. However, to ensure adequate disinfection is achieved this must be done for a minimum of 15 seconds and allowed to dry for a further 30 seconds.⁽¹⁾ Employing this multi-stepped approach is open to human variation and potential error.

Method

To gauge the incidence for phlebitis rates caused by vascular access devices (VADs) within the South Warwickshire Foundation Trust (SWFT), in depth prevalence audits and Datix incident reporting for suspected infections were introduced in 2015. This was further accompanied by a Trust-wide IV audit in 2016, in the form of a questionnaire to staff around port cleaning.

Results

The audit results demonstrated that there is a wide variation in cleaning practice across the departments. The knowledge base of staff was also inconsistent. 59% of IV hubs were being cleaned for 10 seconds or less, with 64% of IV hubs being accessed within 25 seconds or less.

Discussion & Conclusion

To reduce infection risk and human factor variation in practice, the proposal was to introduce 3M™ Curoso™ disinfecting port protectors from Vygon (UK) Ltd, which would be applied to the port of every needleless connector or vascular access device (VAD) used within the Trust. Since the introduction of Curoso disinfecting caps for passive disinfection in June 2017, there is now one disinfection method for all access of IV lines at SWFT.

(NB; Compliance levels, the reduction in Datix relating to VADs and time saving results continue to be tracked. These will be reported back to the Trust later in 2018 with expected improvements in all areas.)



Scrubbing the hub
should last for a minimum of 15 seconds.



Allowing to dry
should last for a further 30 seconds.⁽¹⁾

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