



Improving Pediatric Patient IV Insertion Satisfaction

Meagan Wouda, BSN, RN, CPAN; Erika Fenimore, MSN/ED., RN, CPN;
Valerie Lapp, PhD (Candidate), MSN, RN, CPN



Background

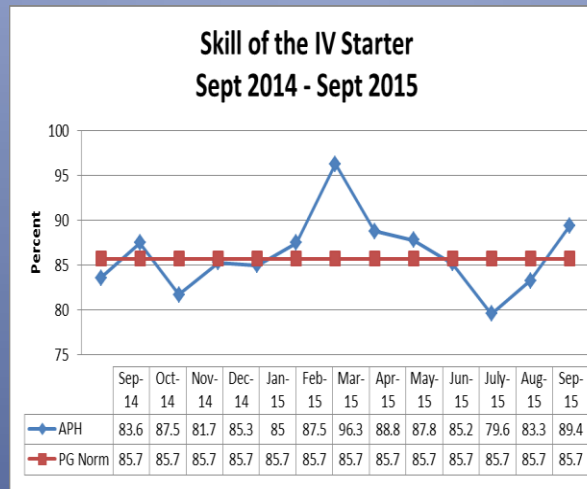
- ❖ Parents evaluate quality of pediatric care in the United States by way of surveys mailed following discharge
- ❖ Perception of the skill of the IV starter is one question posed
- ❖ Advanced practice registered nurses and clinical registered nurses trained in pediatric ultrasound guided peripheral IV and PICC insertions worked in various departments with a team of patients and were not immediately available to provide advanced skilled access for the pediatric population throughout the hospital
- ❖ Nursing administration at Arnold Palmer Hospital for Children noted that the responses to this question fell below the Press Ganey survey mean scores and recognized the need for a dedicated Vascular Access Team

Significance

- ❖ Pediatric IV insertions cause distress and anxiety for the child and parent/caregiver
- ❖ Nine to fourteen year-olds identified examples of poor technical expertise as being on their list of 'worse aspects' of care¹
- ❖ "Poking me for an IV if they are doubtful they can get it in the first place. If they are really good and are confident. I don't mind"²
- ❖ "My child was poked too many times"³

Purpose

- ❖ To increase child and parent satisfaction with IV insertions in pediatric patients



Methods

- ❖ A business plan was developed with the creation of a two-nurse team dedicated solely to advanced vascular access
- ❖ Algorithms and processes were developed for the clinical nurses to utilize when consulting the vascular team
- ❖ The implementation of the advanced vascular access team was piloted in January 2015



Outcomes

- ❖ Following initiation of the vascular access team pilot in January 2014, the patient survey scores for "Skill of the IV Starter" increased from 85.3% to 96.3%
- ❖ Word of mouth reached the families that there was a vascular access team with expert nurses, and parents began asking for this team
- ❖ The amount of requests for IV starts from this team were unable to be fulfilled and patient satisfaction with the skill of the IV starter decreased
- ❖ With this increased demand for expert IV starters, survey results were used as evidence to advocate for two more IV team members who were hired in August 2015
- ❖ This may reflect the upward turn in patient scores in September 2015
- ❖ Ongoing evaluation of the program may require additional vascular access team members

References

1. Moules, T. (2009). 'They wouldn't know how it feels . . .' Characteristics of quality care from young people's perspectives: A participatory research project. *Journal of Child Health Care*, 13(4), 322-332.
2. Schmidt, C., Bernaix, L., Koski, A., Weese, J., Chiappetta, M., & Sandrik, K. (2007). Hospitalized children's perceptions of nurses and nurse behaviors. *MCN: The American Journal of Maternal Child Nursing*, 32(6), 336-344.
3. MacPhee, M. (2002). Using evidence-based practice to create a venous access team. *Journal of Pediatric Nursing*, 17(6), 450-454.