

# Removing barriers to care – a successful nursing model for managing Difficult Venous Access (DVA)



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## Method

Recent evaluation of the RPAH liver clinic standard of care for patients with DVA included a

- 3-month clinical audit
- patient satisfaction surveys
- qualitative interviews with 10 patients engaging with external jugular venepuncture (EJV) to better understand its acceptability.

*"the whole experience (is) ...full of trepidation. (John)*

Patient stories of the trauma of routine blood collection

*Before it was an hour, or two hour session where two or three people would be having a go ... each one two attempts... I could walk out with eight holes in my arm and no blood and then... the next day three or four people- having another go at me... The doctor came in and she had a couple of goes without ultrasound and then... another go with ultrasound and failed. Then another one come in and had a couple of goes... (Rick)*

*They won't listen, they won't believe you... And that's frustrating. 'Cause you know your body better than anybody, ... you have to just let them go, ... if you're not polite, they give you the attitude like, "Oh just shut up... and let me do my job." So you let them try. You know they're not gonna get it. So then they're frustrated... So you dread coming to hospital. (Jan)*

*They would stick it in and they'd be pushing around and hurting. I'd be nearly crying and say, "Look, don't bother wasting your time. You won't get it." "Oh, no, I'll get it," and they'd get the needle in and they wouldn't get it. They always do that to me. I just told them and they didn't listen to me. I would just have to let them do it (Anne)*

*"Do me neck"*

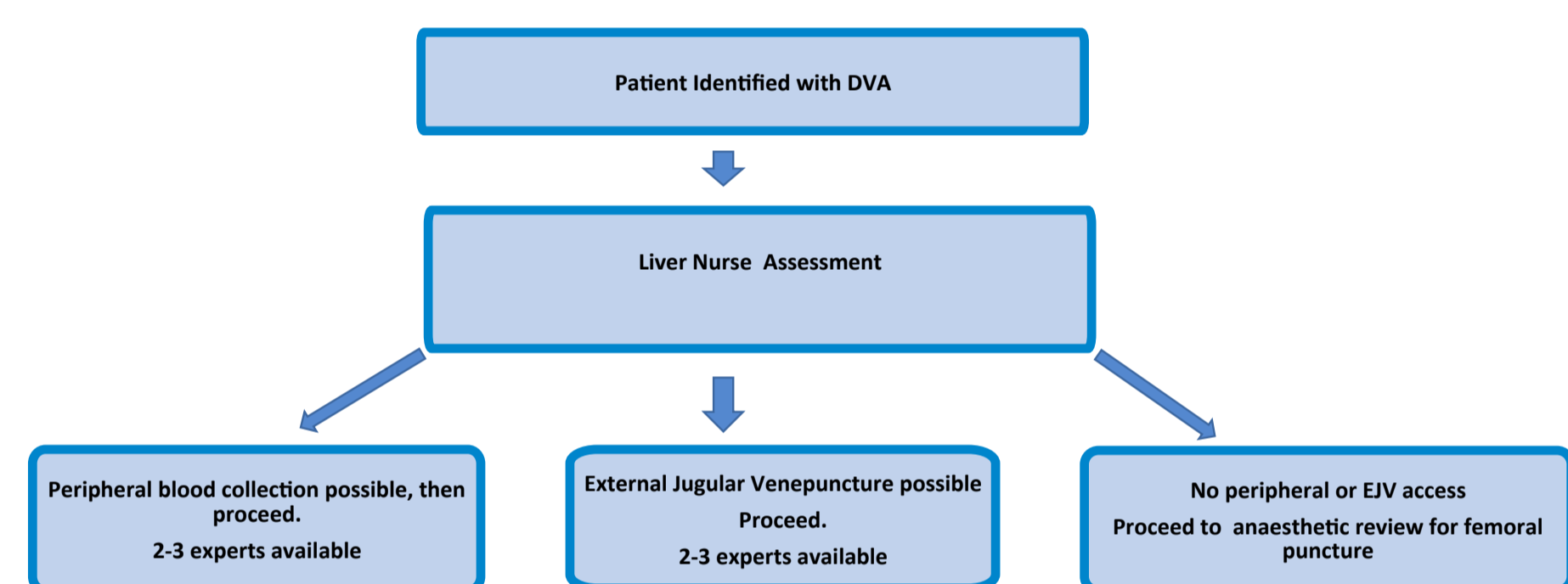
Patient stories of EJV

*It just seems to me ... from the comfort of the patient and from the efficiency of the medical system, here is a beautiful, 'kill two birds with one stone' way of dealing with those issues. It's ridiculously problem free. However squeamish you might feel about the neck thing, if you have problems with venous access, once you do it once, you're a convert, because it's pain-free and stress-free (David).*

*Well at first when you think needle in the neck, (laugh) it is a worry, it is, yeah, I was a bit afraid of the pain, but ... Once I had it done, yeah, I was surprised how, how painless it is... I'm really happy about it... it's so much less worries and about pain... And it's always on the first go. All the stress... everything's gone.' (Bill)*

\*Rick

## RPAH Liver Clinic Standard of Care for Patients with DVA



## What's External Jugular Venepuncture (EJV)?

- Blood collection via the external jugular vein is a quick, easy method to collect blood samples.



## Patient Interview Themes.

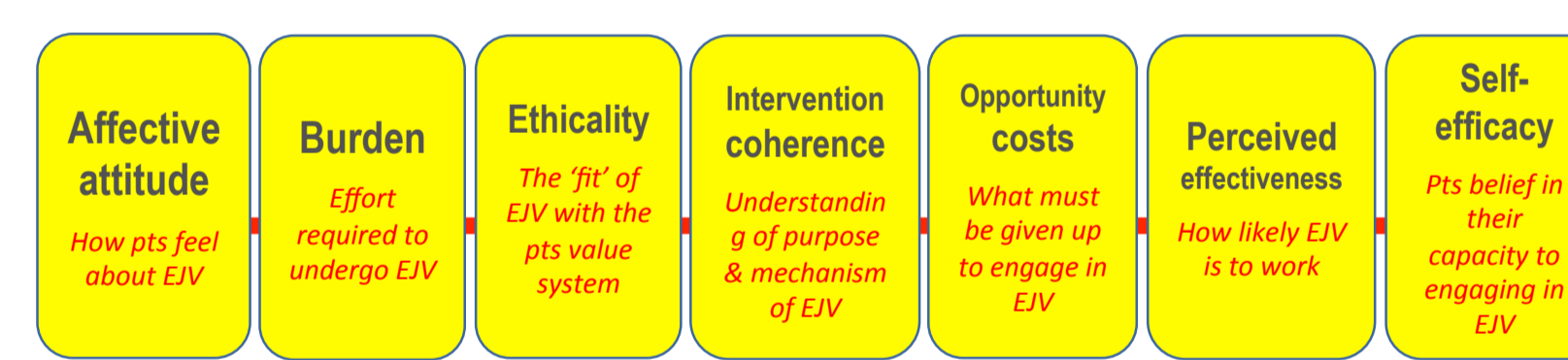
- Themes post Routine (peripheral) Blood Collection
  - Preparation required
  - Disempowerment
  - Lack of control
  - Physical pain/distress
  - Emotional distress
  - Stigma
- Themes Post EJV Blood Collection
  - Trust
  - Physical impact
  - Emotional impact
  - Advocacy

## Clinical Audit Results.

3 months Sept – Nov 2016

- 71% venepuncture via EJV
- 29% peripheral venepuncture
- 100% success rate
- 83% success on 1st attempt
- Minimal adverse events
- Time taken – 5 mins (EJV) vs 15 mins (peripheral)
- Clinicians used – 1 (EJV) vs 2 (peripheral)
- Clinical space – bed required for lie down

## Acceptability Framework



Prospective acceptability: Prior to participating in EJV  
 Concurrent acceptability: While participating in EJV  
 Retrospective acceptability: Post participating in EJV

(Sekhon et al, 2017)

## DVA is a REALLY BIG DEAL for some patients

- 1 Opportunity to raise awareness of this common clinical issue & significant impact on patient care
- 2 Venepuncture (& cannulation) can be a really BIG DEAL
- 3 Please listen & advocate to help people who report DVA to avoid unnecessary pain & distress

## Patient Satisfaction Survey.

	Agree/Strongly Agree
Timeliness/Convenience	95%
Inclusion in the planning	100%
Coordination around their needs	100%
Information provided	100%
Plan made for results discussion	100%
Physical discomfort managed	89%
Emotional support provided	95%
Family/friend inclusion welcomed	74% (26% stated N/A)
Site used	EJV 63%, arms 21%, not stated 16%

- In the model there are 7 constructs or categories, which capture all elements that should be considered when assessing if an intervention is deemed acceptable
- In addition to the 7 constructs, the model allows for acceptability to be measured at different time points in the procedure. Along the bottom of the framework diagram are the terms **Prospective acceptability**, or how acceptable is the concept of EJV BEFORE they have the procedure, **Concurrent**, DURING the procedure and/or **Retrospective acceptability** AFTER they have experienced the procedure

## Conclusions:

- EJV is successful in our hepatology setting. It is common practice in our hospital-based hepatitis clinics and is expanding into suitable community clinics.
- To complement our EJV service, since April 2018 our hepatitis nurses offer Ultrasound (US)-guided venepuncture. Training has been completed, and implementation of a small, portable US device for use in a range of community-based clinical settings is underway.

## References:

Sekhon M, Cartwright M, Francis J. (2017) Acceptability of healthcare interventions: an overview of reviews and development of a theoretical framework. BMC Health Services Research,17:88. DOI 10.1186/s12913-017-2031-8

## Disclosure of Interest Statement:

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