

WOCOVA  16-18 OCTOBER MEGARON
7th World Congress on Vascular Access **2022** ATHENS
GREECE

National Vascular Access Perspectives Australia



Disclosures:

- No conflicts of interest related to this presentation
- Have been engaged (and received honoraria) to deliver educational talks, webinars and consultancy in 2022 by:
 - 3M Australia
 - Teleflex Australia
 - ITL Australia
- Have been successful in competitive investigator initiated grants applications with Eloquest (USA) and BD (Asia Pacific) – funds payable to University and Health District

Australian Vascular Access Perspectives

Demographics

- 26 million people
- Aboriginal Australians are the oldest known civilization on Earth – approximately 75,000 years
- 7,617,930 square kilometres of land
- Vast land - farms in Australia larger than small European nations
- Vast distance brings with it many health challenges



Australian Vascular Access Perspectives

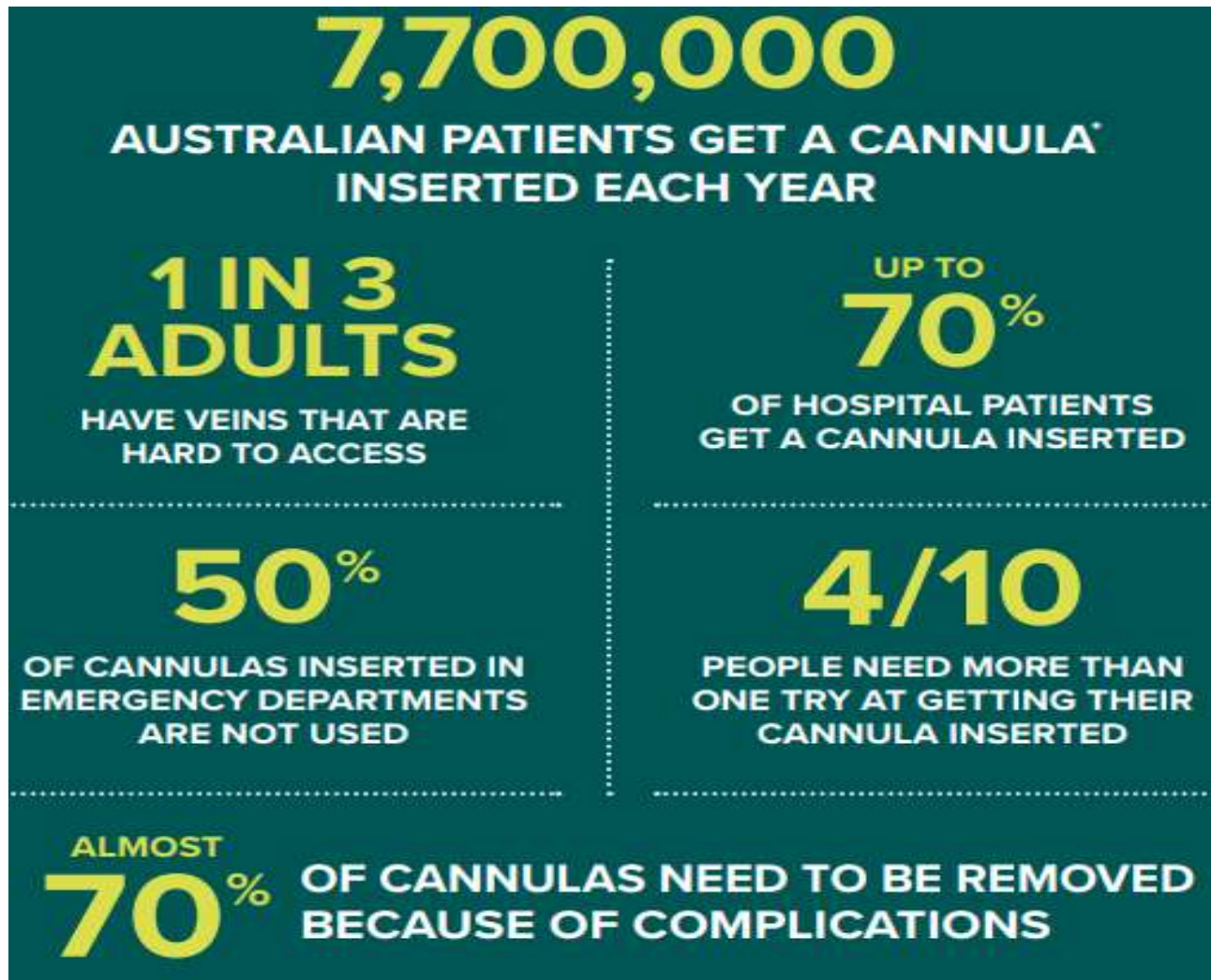
Small population big impacts in vascular access

- Australia makes up less than 1% of vascular access market
- One of the challenges with small population – many vascular access products are not available in Australia!
- Despite this Australia produces a lot of high level evidence



Australian Vascular Access Perspectives

Notable Changes – a review of PIVC insertion and management in Australia:

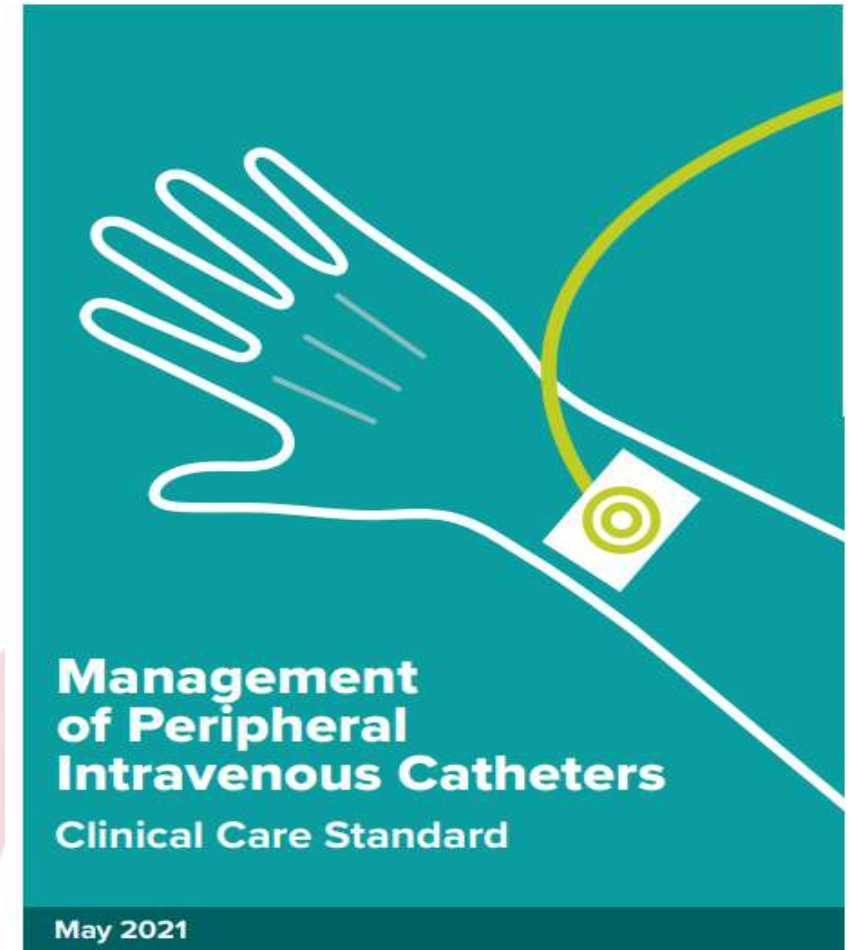


Australian Vascular Access Perspectives

World First National Clinical Standard

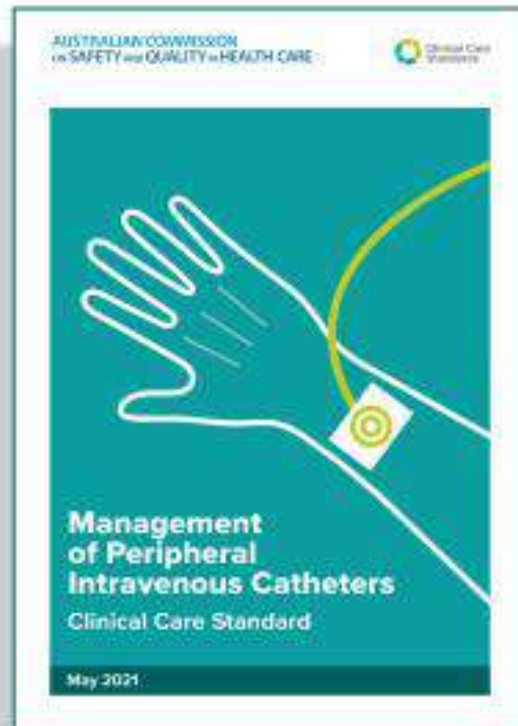
- Released in 2021
- 10 quality statements (including performance indicators) addressing many of the issues identified
- Aim is to reduce clinical variation and standardised care consumers can expect from Health Service Organisations.

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE



Australian Vascular Access Perspectives

Clinical Care Standard



- ✓ Endorsed by relevant clinical colleges, professional societies and consumer groups
- ✓ Support the delivery of evidence-based care
- ✓ Focus on high-priority areas of quality improvement

They do not replace Clinical Practice Guidelines

Australian Vascular Access Perspectives

Quality Statements

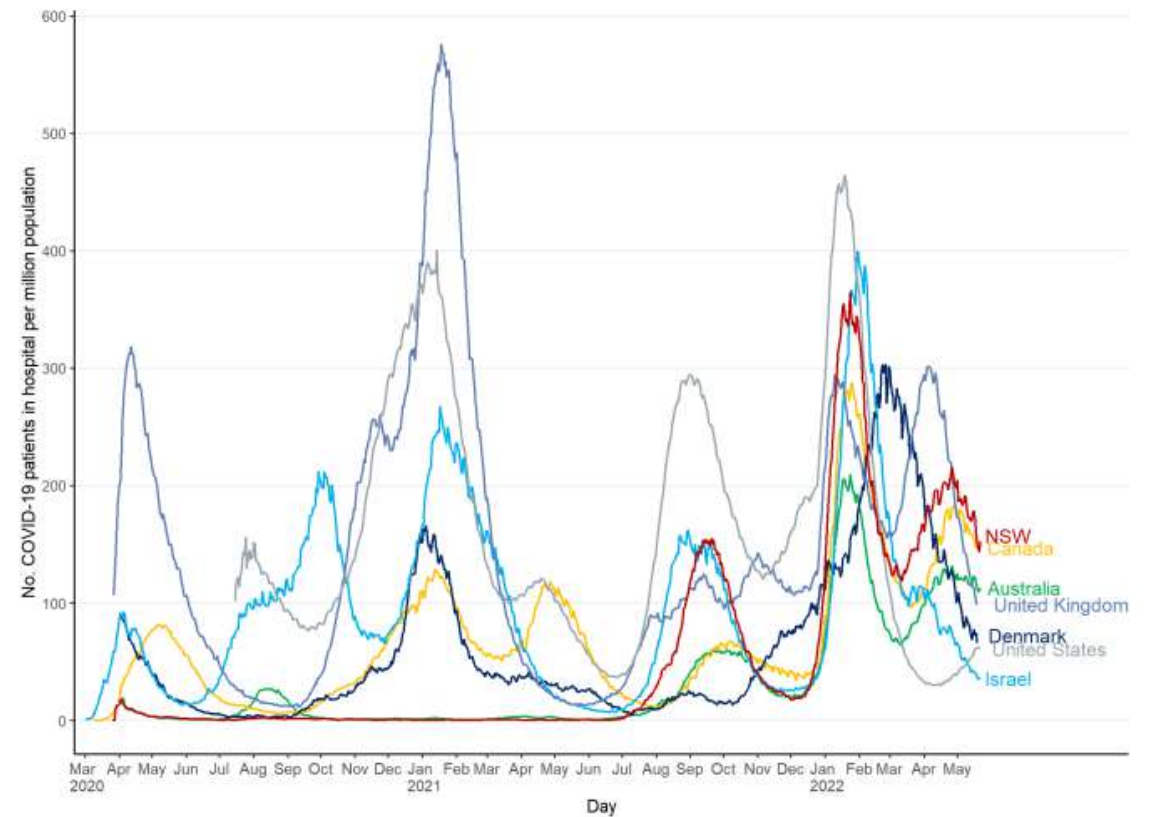
1. Assess intravenous access needs	2. Inform and partner with patients	3. Ensure competency	4. Choose the right insertion site and PIVC	5. Maximise first insertion success
6. Insert and secure	7. Document decisions and care	8. Routine use: inspect, access and flush	9. Review ongoing need	10. Remove safely and replace if needed

Australian Vascular Access Perspectives

A word on Covid Pandemic in Australia

- Australia faired comparatively well
- 10.3 million cases / 5,383 deaths

Figure 6: Number of COVID-19 patients in hospital (select countries and NSW), March 2020 – May 2022

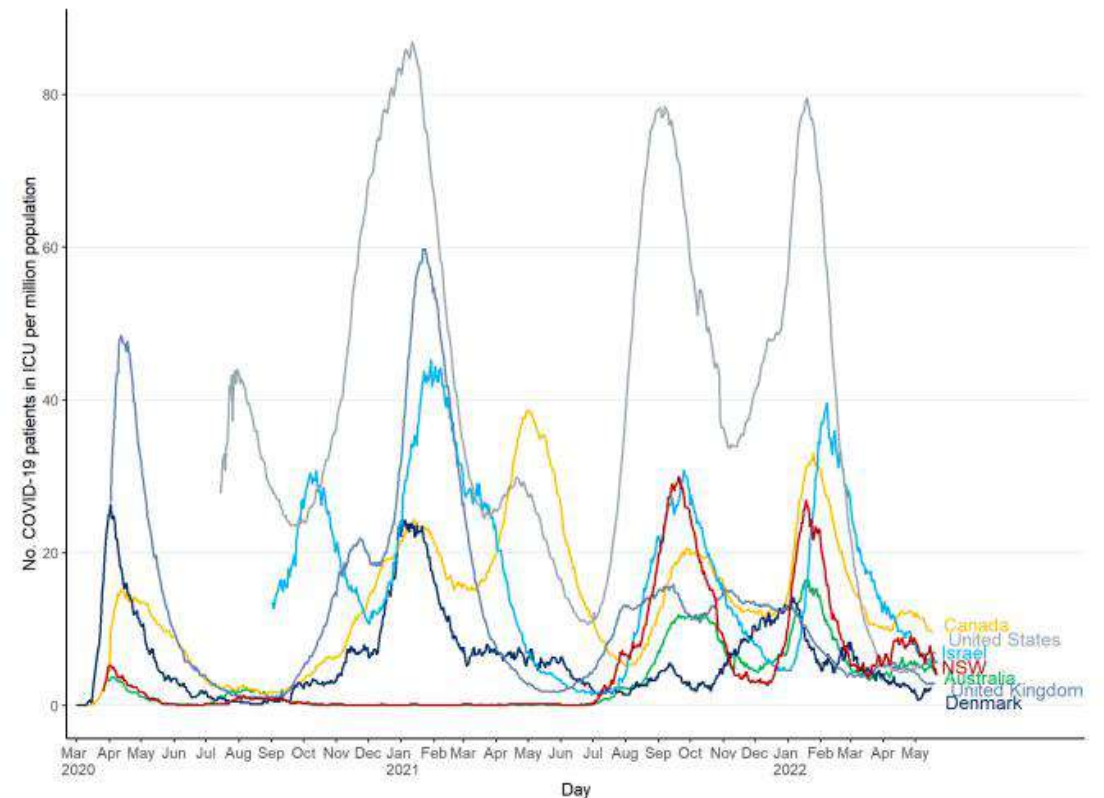


Australian Vascular Access Perspectives

A word on Covid Pandemic in Australia

- ICU bed capacity was stretched in my state
- My ICU one of the hardest hit in Australia:
 - large migrant population
 - poor health literacy
 - multi generational living
- **April 2020 to March 2021:**
Liverpool ICU cared for 1/3 of all ICU Covid cases in the state

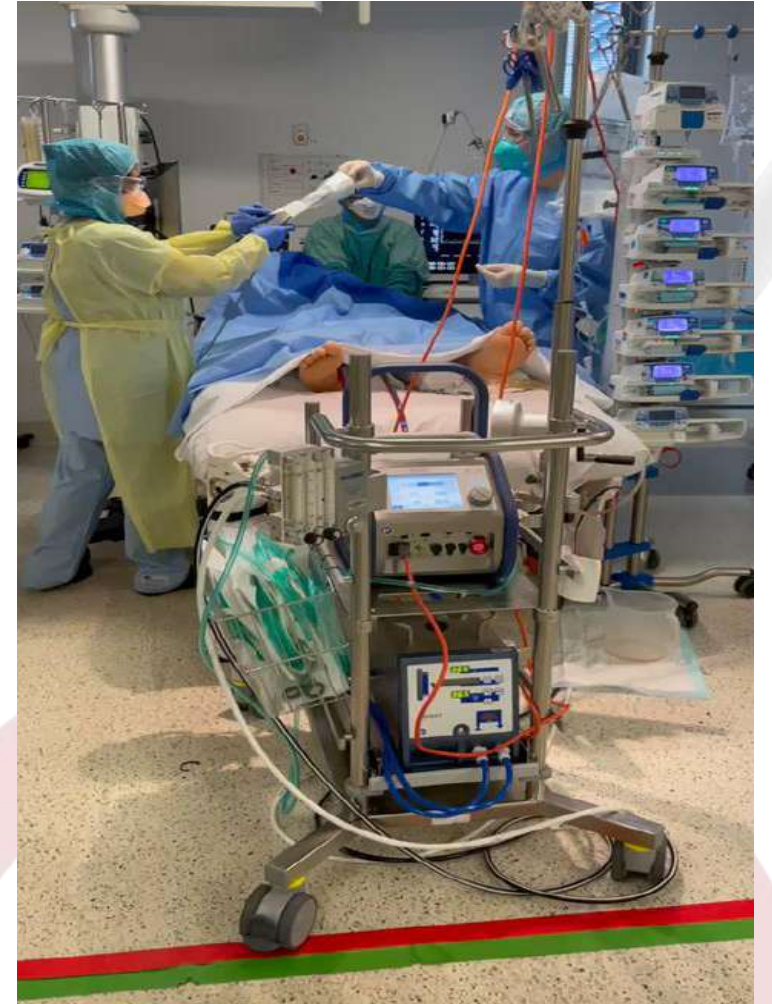
Figure 7: Number of COVID-19 patients in intensive care units (select countries and NSW), March 2020 – May 2022



Australian Vascular Access Perspectives

A word on Covid Pandemic in Australia

- Significant impact of vascular access needs in hospitals – particularly ICU
- VA teams became more ‘mobile’ to reduce movement of patients
- **Ultrasound and IC ECG played a major role in bringing VA procedures to the bedside**
- Increased referrals for chronic catheters as traditional teams unable / unwilling to insert – renal dialysis
- Lasting impact on scope of practice of VA teams



THANK YOU!

