

Evidence of IVNNZ Standards of practice for the Practice Setting

Organisation: Canterbury District Health Board

In each section, evidence is required to show how the standards are met in the organisation. Please refer to the IVNNZ Standards of practice www.ivnnz.org.nz for practice criteria.

	Standard	Evidence
1	<p>Practice Setting</p> <p>1. Infusion therapy standards of practice shall be applied in all practice settings where infusion therapy is administered</p> <p>2. Administration of infusion therapy shall be established in organisational policies, procedures and/or practice guidelines.</p> <p>3. Administration of infusion therapy shall be in accordance with rules and regulations promulgated by the health professional regulatory bodies.</p>	<p>Fluid and Medication Policy Manual www.cdhb.health.nz/policies</p>
2	<p>Neonatal</p> <p>1. The clinician providing infusion therapy for neonatal and paediatric patients shall have clinical knowledge and technical expertise with respect to this population group.</p> <p>2. Clinical management of neonatal and paediatric patients shall be established in organisational policies, procedures, and/or practice guidelines.</p> <p>3. The clinician shall verify that there has been a process for informed consent for the treatment of neonatal and paediatric patients and that this process is documented.</p>	<p>CDHB Policy Manual Neonatal & Paediatric. healthLearn Course – IV Therapy Paediatric Care</p>
3	<p>Older Adult Patients</p> <p>1. The clinician providing infusion therapy for older adult patients shall have clinical knowledge and technical expertise with respect to this population.</p> <p>2. Clinical management of older adult patients shall be established in organisational policies, procedures and/or practice guidelines.</p>	<p>healthLearn Course – IV Therapy Administration Endorsement healthLearn Course – Implanted CVAD Medication Administration Endorsement healthLearn Course – Non-implanted CVAD Medication Administration Endorsement Fluid and Medication Policy Manual www.cdhb.health.nz/policies</p>
4	<p>Ethics</p> <p>1. Ethical principles shall be the foundation for decision making in patient advocacy.</p> <p>2. Guidelines and resources for ethical issues shall be outlined in organisation policies, procedures and/or practice guidelines.</p> <p>3. The clinician shall act as a patient advocate: maintain patient confidentiality, safety, and security.</p>	<p>CDHB Policy Manual 2: Legal & Quality CDHB Policy Manual D: Nursing Standards CDHB Fluid and Medication Policy Manual www.cdhb.health.nz/policies NZNC Code of professional Conduct</p>

	<p>4. The clinician shall respect, promote, and preserve human autonomy, dignity, rights, and diversity.</p> <p>5. Principles of beneficence, non-maleficence, fidelity, protection of patient autonomy, justice, and veracity shall dictate nursing action.</p>	
5	<p>Scope of practice</p> <p>1. The scope of practice for each type of clinician involved with the delivery of infusion therapy shall be organised to support patient safety and protection. Practice settings shall clearly define roles, responsibilities, tasks, and accountability for all clinicians involved in the delivery of infusion therapy.</p> <p>2. All clinicians involved with the delivery of infusion therapy shall practice within their defined professional scope of practice.</p> <p>3. The clinician shall be accountable for patient safety in the delivery of any infusion therapy.</p>	<p>Roles and Responsibilities Policy: CDHB Fluid and Medication Policy Manual www.cdhb.health.nz/policies</p>
6	<p>Competence and competency validation</p> <p>1. The clinician shall be competent in the safe delivery of infusion therapy within their scope of practice.</p> <p>2. The clinician shall be responsible for attaining and maintaining competence with infusion therapy as defined in their scope of practice.</p> <p>3. Competency validation is the responsibility of the clinician and employing organisation. Validation is performed initially and/or reviewed as required.</p> <p>4. Competency validation is set by the individual clinician's regulatory body.</p>	<p>Initial IV endorsement to be attained within 3 months of beginning with the CDHB as stated in the Roles and Responsibilities Policy: CDHB Fluid and Medication Policy Manual www.cdhb.health.nz/policies</p> <p>Ongoing monitoring of competency is undertaken using clinical practice observations by IV Link Staff in each clinical area http://www.cdhb.health.nz/ivlink</p>
7	<p>Quality improvement</p> <p>1. The clinician shall participate in quality improvement activities that advance patient care, quality, and safety.</p> <p>2. A quality assurance and performance improvement strategy should be established in an organisation.</p>	<p>Feedback from Clinical Practice Observations are given to individual areas by local IV Link Staff. Data is collated by Nurse Co-ordinator quality and audit, Christchurch Hospital and reported on.</p>
8	<p>Research and evidence-based care</p> <p>1. The clinician shall use research findings and current best evidence to expand clinical knowledge in infusion therapy, to validate and improve practice, to advance professional accountability, and to enhance evidence-based decision making.</p> <p>2. The clinician shall obtain approval for research and research-related activities in accordance with ethics regulatory bodies, professional standards, and criteria set by organisational policies, procedures, and/or practice guidelines.</p> <p>3. The clinician shall develop and revise organisational policies, procedures, and/or practice guidelines based on research findings and current best evidence.</p> <p>4. The clinician shall integrate evidence-based knowledge with clinical expertise and the patient's</p>	<p>CDHB Fluid and Medication Committee reviews the CDHB Fluid and Medication Policy Manual at least 3 yearly, or earlier if a required change in practice is identified through evidence based research.</p> <p>CDHB clinical staff utilise the Lippincott Nursing/Midwifery procedural Manual for best practice procedural guidelines</p> <p>Scope of practice for clinicians is stated in the Roles and Responsibilities Policy: CDHB Fluid and Medication Policy Manual www.cdhb.health.nz/policies</p>

	<p>preferences and values in the current context when providing infusion therapy.</p> <p>5. The scope of practice for registered nurses clearly states that registered nurses may practise in a variety of clinical contexts depending on their educational preparation and practice experience.</p>	
9	<p>Policies, procedures, and/or practice guidelines</p> <p>1. Infusion policies, procedures, and/or practice guidelines shall describe the acceptable course of action, including performance and accountability, and provide a basis for clinical decision making. Infusion policies, procedures, and/or practice guidelines must be compliant with government legislation and professional standards.</p> <p>2. Infusion policies, procedures, and/or practice guidelines must be written, reviewed at established intervals, and approved in a formal organisation process.</p> <p>3. Infusion policies, procedures, and/or practice guidelines shall be readily available and accessible to clinicians.</p>	<p>CDHB Fluid and Medication Committee reviews the CDHB Fluid and Medication Policy Manual at least 3 yearly, or earlier if a required change in practice is identified through evidence based research.</p> <p>CDHB Fluid and Medication Policy and Lippincott Procedural Guidelines are available electronically through the CDHB intranet/internet.</p>

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