

Improving patient experience of cannulation when attending for Systemic Anti-Cancer Therapy (SACT)

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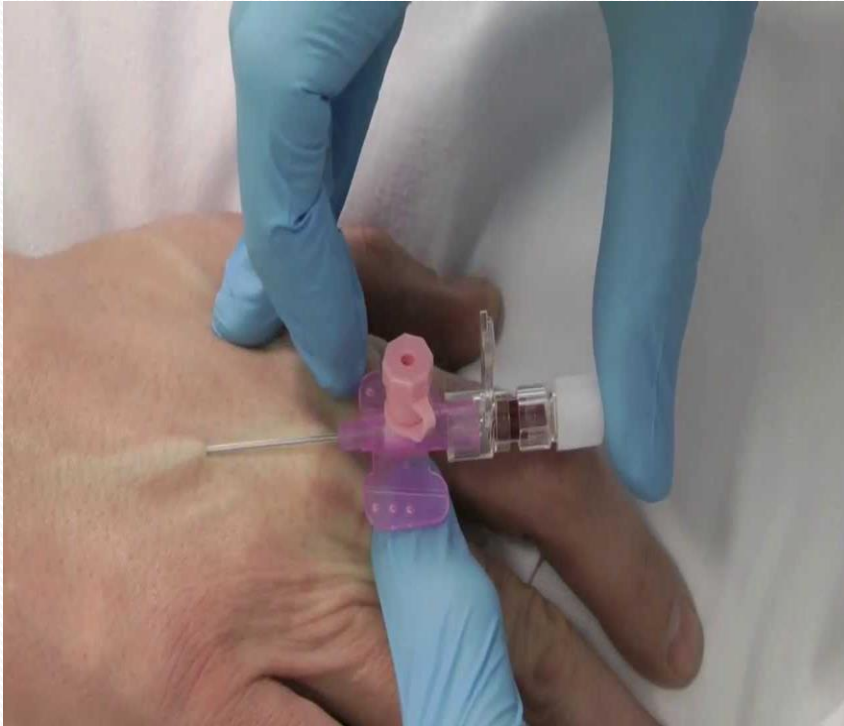
Oncology Research Clinical Nurse Manager



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CANNULATION



- Inpatients & Day treatment centres
- Essential
- Guidelines
- Complications
- Future Complications
- Patient experience
- Staff experience

AIRGLOVE the story so far.....

- ❖ October 2019 – introduced to the device
- ❖ Started using it in Ward 1
- ❖ March 2020 – Global Pandemic
- ❖ April 2021 – Scholarship - QIP
- ❖ Audit AIRGLOVE in Oncology NHSL
- ❖ October 2022 – presentation for Graduation
- ❖ 2023 – PhD Student supported the project



NHS

NHS Improvement



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What is the AIRGLOVE ?



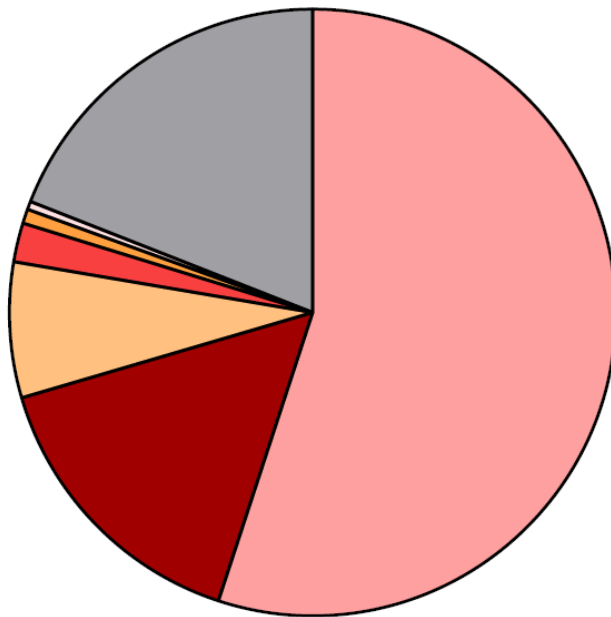
AUDIT

100 patients – last 10 cannulation episodes

	No. Of Patients	Total no. of cannulations	Total no. of 1 st attempts	Incidence %
FEMALE	78	718	378	52.6
MALE	22	196	125	63.8

Number of attempts

No. of attempts



55.03%	1st attempt
15.43%	2nd attempt
7.22%	3rd attempt
2.08%	4th attempt
0.77%	5th attempt
0.44%	6th attempt
19.04%	Not documented

Total = 914

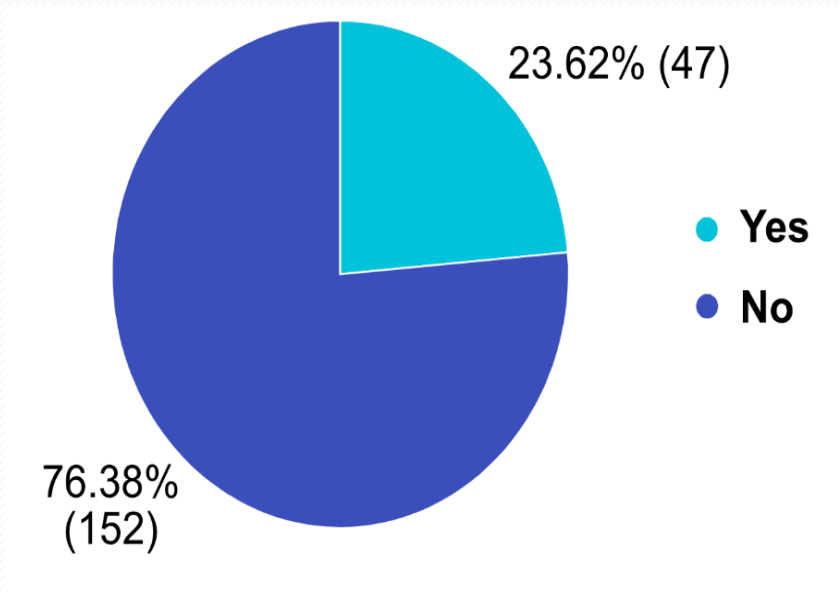


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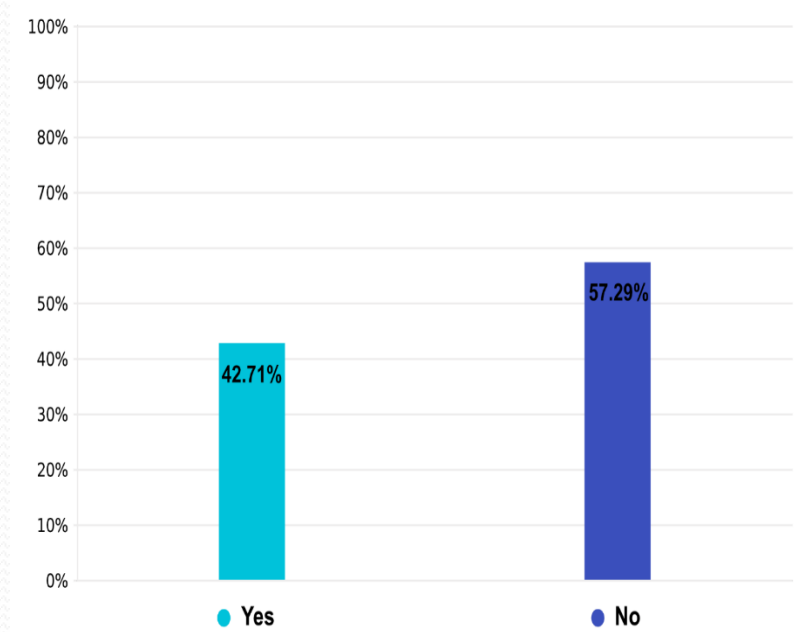
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Patient Survey

Do patients feel anxious about cannulation?

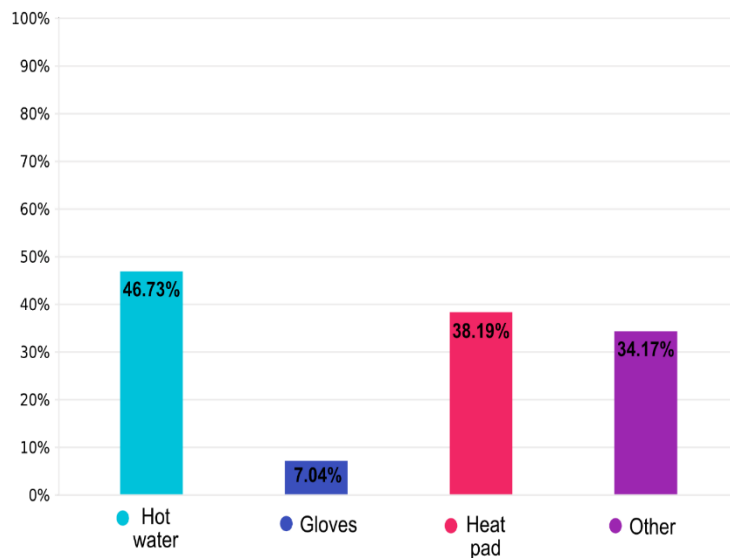


Have patients had difficulty with cannulation?



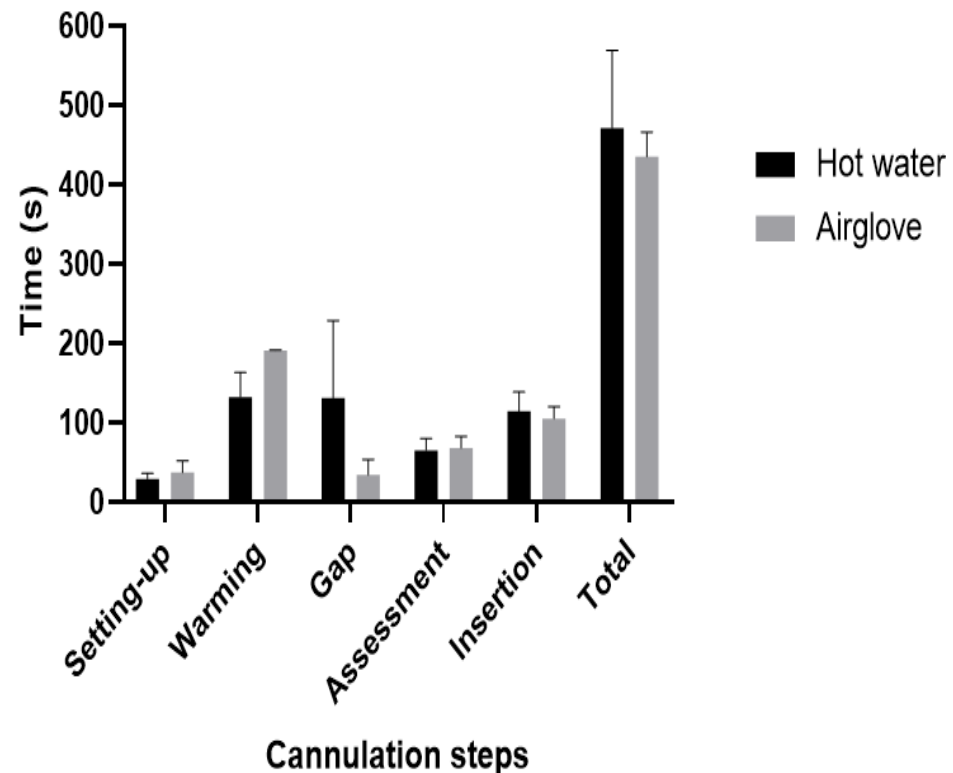
Is the cannulation process quicker using Airglove for warming?

- What do patient or nurse use in order to try to make cannulation more successful?



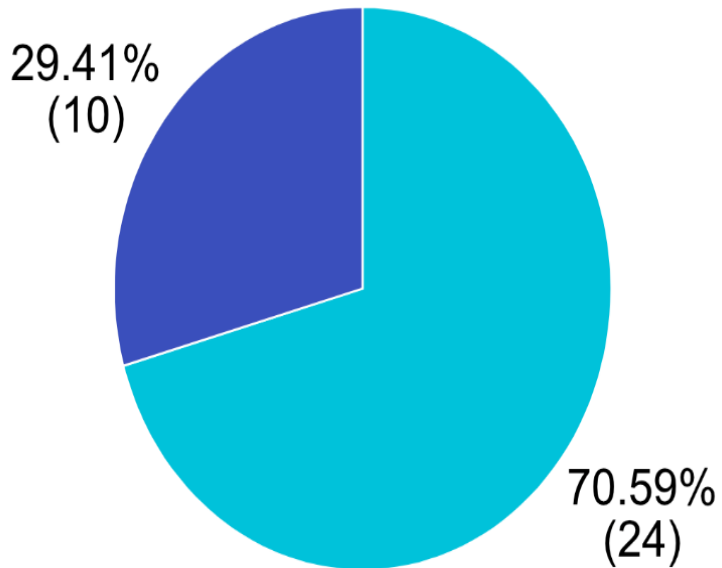
TIME STUDY

Time taken to cannulate after warming



Patient experience is improved

Using Airglove, was this a better cannulation experience for you?



Much better

No need to stand or walk

It feels quicker, more efficient, warmer

More comfortable

Warms larger area

No wet hands

Great

- Yes
- No

What is next?

- Continue to support the Airglove locally
- Wards/NM/Day centres
- Edinburgh Napier Clinical/Academic home - publication
- RCT - Primary Outcome important to obtain funding
(*Chair time/Nursing time/cost*)
- Healthcare Electrical Engineers Napier - HEAT

