

Safer practice notice



Notice

20 May 2004

Improving infusion device safety

Every year over 15 million infusions are carried out in the NHS. Infusion treatment is commonly used to deliver fluids and drugs via a drip into the veins of patients receiving rehydration therapy or chemotherapy treatment.

Problem

Most of the time infusions are delivered safely. However, safety issues with infusion devices have been investigated by the Medicines and Healthcare products Regulatory Agency (MHRA) and reported to the NPSA.

The MHRA receives over 700 reports of problems with infusion devices every year and on average 19 per cent are due to mistakes by those using the devices.

Evidence

An NPSA pilot study in six acute trusts found that on average in each trust:

- there are 31 different types of infusion devices in use;
- £1.6m has been spent on infusion devices;
- 65 per cent of infusion devices are idle for most of the time.

NPSA advice

The NPSA advises trusts to keep infusion devices in a central equipment library and reduce the range in use. This has the potential to:

- 1 reduce the risk of patient harm or death;
- 2 reduce staff confusion;
- 3 save an average trust an estimated £120,000 a year that could be redirected to frontline patient care.



Action for the NHS

NHS acute trusts in England and Wales are advised to review the way they purchase and manage infusion devices. The NPSA has developed a toolkit for doing this which includes information for patients on infusion devices. It is on the NHS Purchasing and Supply Agency website at **www.pasa.nhs.uk/infusiondevices**

Action to be taken by: Clinical governance/risk managers and heads of clinical/medical engineering departments.

For further details about this safer practice notice and the NPSA's work contact:

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This safer practice notice is written in the following context:

It represents the view of the National Patient Safety Agency, which was arrived at after consideration of the evidence available. It is anticipated that healthcare staff will take it into account when designing services and delivering patient care. This does not, however, override the individual responsibility of healthcare staff to make decisions appropriate to local circumstances and the needs of patients and to take appropriate professional advice where necessary.

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