# 12 Essential Elements of Tracheostomy Care for Adult Patients

## 12 Essential Care Elements

<table>
<thead>
<tr>
<th>Element</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>1. Communication</td>
<td>Patient has communication strategy in place AND call bell within reach</td>
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<tr>
<td>2. Tracheostomy plan</td>
<td>Patient has documented Tracheostomy plan in place which has been reviewed within last 24hrs</td>
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| 3. Patient assessment          | 1. clinical observations have been documented and actioned in accordance with clinical status  
                                   | 2. documentation of evaluation of need for and outcomes of suctioning       |
| 4. Nurse                      | Nurse caring for patient is an enrolled nurse or registered nurse AND has or is supervised by a registered nurse who has completed a tracheostomy training program within past 2yrs |
| 5. Safety equipment           | All safety equipment is available, functional and has been checked within past 24 hours |
| 6. The tracheostomy tube is secure | 1. Tapes changed within last 24 hours  
                                   | 2. TT does not move more than 1cm in any direction  
                                   | 3. Able to insert small finger between tapes  
                                   | 4. If Tube is an Adjustable flange  
                                   | ☐ Flange position marked & documented in notes  
                                   | ☐ Inspected & documented within past shift |
| 7. Cuff pressure               | Has been checked & documented within last 4 hours AND is between 25-30cmH2O |
| 8. Humidification             | ☐ Heat moisture exchanger – clean & checked within last 2hrs OR  
                                   | ☐ Active – Temp > 37 C, H2O level > 1/3                                  |
| 9. Inner Cannulae             | ☐ Where applicable should be cleaned at least 4hrly AND  
                                   | ☐ A spare clean & dry inner cannulae is within bed area                  |
| 10. Stoma                     | ☐ Dressing attended within past 24 hours AND Dressing clean & dry OR  
                                   | ☐ No dressing - Stoma clean & dry with no secretions                    |
| 11. Suction                   | ☐ Non-sterile gloves should be worn when using closed suction systems  
                                   | ☐ Suction techniques using an open technique must use an aseptic technique |
| 12. Infection prevention      | ☐ inner cannulae are **not** cleaned at hand basins  
                                   | ☐ Tracheostomy care incorporated into hand hygiene education             |

## Tracheostomy Review Teams

**Who**
- Specialist nurse
- Speech pathologist
- Physiotherapist
- Medical officer

**What**
- Review patients & coordinate care
- Provide education enabling clinical staff to become more confident and provide better care
- Provide a consultation service especially on: appliances, decannulation, respiratory and physical care, communication and swallow; and diet

- time to decannulation
- hospital LOS,
- adverse events
- readmit to ICU
- care consistent with protocol
- inter-professional decision making
- effective and efficient care
- transfer to wards
- patient outcomes

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