

## TRACHEOSTOMY CARE – STATEMENT OF BEST PRACTICE

Patient's with a tracheostomy in situ will have their care delivered safely, optimising their comfort and minimising adverse effects.

	<b>FACTOR</b>	<b>BENCHMARK OF BEST PRACTICE</b>
<b>1</b>	<b>Guidelines</b>	<b>Guidelines are available which are evidence based, up-to date (&lt; 3 yrs depending on organisational requirements), and used by everyone</b>
<b>2</b>	<b>Education &amp; Training</b>	<b>All persons caring for a patients with tracheostomies will be formally trained and assessed in this practice</b>
<b>3</b>	<b>Assessment and planning of care by a registered practitioner</b>	<b>All patients with a tracheostomy in situ will have their care needs assessed and individualised care planned.</b>
<b>4</b>	<b>Care delivery by a trained and competent practitioner</b>	<b>All patients will have their tracheostomy care delivered according to their individualised care plan</b>
<b>5</b>	<b>Evaluation and re-assessment of care by a registered practitioner</b>	<b>All patients will have the tracheostomy care that they have received evaluated and re-assessed</b>
<b>6</b>	<b>Communication</b>	<b>Patients, carers or significant others will be given information on all aspects of their tracheostomy care according to their individual needs and this information will be re-enforced at all opportunities. Patient's optimal choice of communication is documented and always used</b>
<b>7</b>	<b>Equipment / Resources</b>	<b>Equipment and resources will be available for all patients with a tracheostomy insitu</b>

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Factor 1 - Guidelines :		Guidelines should be less than 3 yrs old:				They must be evidence/research based			
Guidelines are not available		Guidelines are available but they are not used		Guidelines are available, up-to-date but not used by everyone		Guidelines up-to-date, and used by everyone			
0	2	3	4	5	6	7	8	9	10
Factor 2- Education:		Training Packages / competencies:				Documentation available to prove competence.			
Training is not given		Some training is given at the bedside		Formal training is given but staff are not assessed as competent.		All persons caring for a patient with a tracheostomy in situ are formally trained and assessed as competent in this practice.			
0	2	3		5	6		8	9	10
Factor 3 - Assessment:		Risk Assessment tools:				Documentation of assessment			
No assessment of tracheostomy needs carried out		Some assessment is carried out.				All patients will have their tracheostomy care needs assessed.			
0	2				6		8	9	10
Factor 4: Care Delivery:		Documentation				individualised care plan			
No care planned		Tracheostomy care delivered but not according to individualised care plan				All patients will have their tracheostomy care delivered according to their individualised care plan.			
0	2	3		5			8	9	10
Factor 5: Evaluation and Reassessment		Care plan				Evidence of continuous assessment			
No evaluation of tracheostomy care is carried out.		Evaluation takes place but there is no re-assessment				All tracheostomy care that they receive is evaluated and re-assessed			
0	2	3		5	6		8	9	10
Factor 6: Communication, Documentation		Use of equipment: letter board, pen and paper, etc leaflets for patient / relatives							
Optimal method of communicating is not identified and communication is not encouraged		Communication is encouraged but patient's optimal method of communication is not documented or shared				Patient's optimal choice of communication is documented and always used			
0	2	3		5	6		8	9	10
Factor 7: Equipment / resources		Stock control				Audit			
No equipment is available		Specialist equipment or resources are not readily available				All equipment readily available for all patients with a tracheostomy in situ.			
0	2	3		5	6		8	9	10

## **TRACHEOSTOMY CARE – STATEMENT OF BEST PRACTICE**

**Patient's with a tracheostomy in situ will have their care delivered safely, optimising their comfort and minimising adverse effects.**

### **Best practice guidance notes**

Audit tool – annual audit with review and action plan

Guidelines are based on current evidence /research / expert consensus

Documentation is clear, concise and in line with NMC guidance

### **Best practice guidance notes**

#### **Factor 1**

Audit tool – annual audit with review and action plan

Guidelines are based on current evidence /research / expert consensus and less than 3 years old

#### **Factor 2**

Training package and competency is available

Preceptorship with Step 1 competency for all new staff

#### **Factor 3**

Shift safety checks completed and documented

Documentation of assessment is clear, concise and in line with NMC guidance

#### **Factor 4**

There is evidence of a care plan for tracheostomy care

Documentation of an individualised plan is clear, concise and in line with NMC guidance

#### **Factor 5**

There is evidence that individualised care has been delivered

Documentation is clear, concise and in line with NMC guidance

#### **Factor 6**

There is evidence that there is information on tracheostomies available for patients and relatives

The optimal methods of communication is used for the patient and documented

#### **Factor 7**

Available equipment/resources should include infusion pumps, drug availability, on-call pharmacist, medical device training

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### Score Sheet

Factor	Score	Comments
1		
2		
3		
4		
5		
6		
7		

Action Plan  
Completed by  
Date

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Factor	Action	Person Responsible	Time scale	Date completed
1				
2				
3				
4				
5				
6				
7				