

TRACHEOSTOMY REVIEW AND MANAGEMENT SERVICE CLINICAL POLICY

MANAGEMENT OF PATIENTS WITH TRACHEOSTOMY AT AUSTIN HEALTH

Staff this document applies to:

- Medical, Nursing, Physiotherapy and Speech Pathology staff across all campuses and in the community who manage patients who have a tracheostomy tube in situ.

Related Austin Health policies, procedures or guidelines:

[Tracheostomy Care Changes In Response To Suspected Or Confirmed Covid-19](#)

[Discharge Of A Patient With A Tracheostomy To Sub-Acute campus Or Community](#)

[Oxygen Therapy Manual](#)

All other Tracheostomy Policies & Procedures: accessible from OPPIC

Tracheostomy e-Learning packages: Austin Health staff access from ATLAS

SMR Documents:

- [Tracheostomy decannulation documentation M79.30](#)
- [Tracheostomy ICU discharge M79.3](#)
- [Tracheostomy Checklist M31.43](#)

Purpose:

Patients with a tracheostomy comprise a high-risk group. Patients with tracheostomy may be cared for in the ICU, across all wards or community setting. The need for specialist, interdisciplinary care to manage this population is well documented.

Policies, procedures and a consistent mechanism of care should be in place to ensure quality and safety for this patient group. Ongoing, coordinated tracheostomy education must be readily available for all patients, families and staff

Aims of Tracheostomy Care at Austin Health:

- To provide safe, patient centred care based on best available evidence.
- To partner with tracheostomy patients and families in all aspects of tracheostomy care at Austin Health
- To ensure that care is coordinated and standardised across all campuses and into the community.
- To ensure that multidisciplinary groups of specialists liaise and coordinate this care.
- To ensure that ongoing education on tracheostomy management is readily available to all staff.

1 of 6

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- To ensure that tracheostomy procedures are current, accessible and adhered to by all Austin Health staff.
- To maintain our position as a global leader in tracheostomy care
- To partner, collaborate/benchmark with other tracheostomy specialists around the world. Austin Health is a founder and lead site of the Global Tracheostomy Collaborative.

Roles and Responsibilities:

Austin Hospital Setting

- **In the event of an emergency, Austin Health emergency procedures should be followed**
- [Tracheostomy Review and Management Service \(TRAMS\)](#) is a consultative service that coordinates all tracheostomy care, policy and procedure and education across Austin Health
- TRAMS operates Mon-Fri 8.30am-5pm. Outside of TRAMS hours, contact ICU for assistance.
- ICU staff manage patients with tracheostomy tubes in the ICU setting in line with Austin Health tracheostomy policy.
- The ENT Department manage ENT tracheostomy patients in the acute setting. TRAMS co-manage acute ENT patients upon referral from an ENT doctor (requires a M17 Consultation Request form).
- Ultimate management / decision making about a patient with a tracheostomy tube rests with the parent medical unit.
- The [Victorian Respiratory Support Service \(VRSS\)](#) is the state-wide specialist service for patients requiring chronic mechanical ventilation. This includes patients ventilated via tracheostomy who are admitted for acute care. TRAMS consults on the VRSS patients during acute admissions of new referrals to the VRSS ward. After a VRSS patient has been discharged to the community following an acute admission they are managed by the VRSS Outreach team. TRAMS will only consult on VRSS community patient readmissions upon request from the VRSS.
- **TRAMS reports to the Deteriorating Patient Committee (DPC).** The Interdepartmental Tracheostomy Committee holds the Interdepartmental Tracheostomy Forum (ITF) twice a year and shares the minutes with the DPC. The objective of the forum is to improve patient safety, improve communication across departments and disciplines involved in tracheostomy care. The following are reviewed at each forum: Case presentations, policies & procedures, risk data, education and equipment issues TRAMS organises this meeting with representation from the following services: Respiratory Medicine, Thoracic Surgery, ICU, ENT, Anaesthetics, Plastics, Maxillofacial, and the disciplines of medicine, nursing, physiotherapy, speech pathology.
- TRAMS is a member of the Austin Health Airway Committee which also reports to the Deteriorating Patient Committee.
- Tracheostomy data is collected by TRAMS on all inpatient admissions (with the exception of ENT acute and VRSS readmissions). Data is entered into the Global Tracheostomy Collaborative (GTC) RedCap data base. TRAMS receives quarterly reports on Austin Health tracheostomy data and also aggregate data which includes other GTC Member Hospital data. Community tracheostomy data is collected by TRAMS and the VRSS.

Heidelberg Repatriation Hospital (HRH) and Royal Talbot Rehabilitation Centre (RTRC)

- **In the event of an emergency, Austin Health emergency procedures should be followed**

2 of 6

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- The VRSS Outreach team manage patients who require invasive ventilation via a tracheostomy at HRH and RTRC.
- TRAMS consults on management of patients with tracheostomy (and no ventilation) at HRH and RTRC. See: [Discharge Of A Patient With A Tracheostomy To Sub-Acute campus Or Community](#)
- Prior to transfer to HRH or RTRC, the VRSS or TRAMS staff will contact the parent medical unit to establish their needs for support, education, equipment and tracheostomy tube changes.

In the community setting

- **In the event of an emergency in the community, carers or patients should call for an ambulance on 000**
- TRAMS manage patients with a tracheostomy (and no ventilation) who are discharged from Austin Health to the community. TRAMS staff work closely with the parent unit and community health care providers to ensure safe discharge from acute care. Services provided include: support, assessment, carer education, management advice, tracheostomy tube changes, consumables, equipment provision and maintenance.
- The VRSS Outreach team manage patients requiring long-term invasive ventilation via a tracheostomy who are discharged from Austin Health to the community. Services provided include: support, tracheostomy tube changes, respiratory assessment, carer education, equipment provision and management.
- Austin Health (TRAMS and VRSS) in partnership with the GTC offer the Tracheostomy Patient and Family Tracheostomy Forum 1-2 times a year. These forums provide a platform for patients, families and clinicians. The focus is on wellbeing while living in the community with a tracheostomy including sharing stories, hearing speakers, celebrating successes and discussing challenges.

Tracheostomy Care Process:

Referrals

- Patients with a newly inserted tracheostomy will be managed in the ICU for the first night. A comprehensive plan for transition to an appropriate ward will be developed by relevant clinicians involved in the patient's care. Managing a patient with a newly inserted tracheostomy in recovery HDU or a ward is not the preferred approach and may only occur where this has been extensively discussed and agreed to by the senior clinicians responsible for managing the patient.
- When a patient with a tracheostomy is ready for discharge from ICU, ICU staff will contact TRAMS directly on pager 1291 or extension 3095.
- Prior to discharge, the ICU Tracheostomy Discharge Form M79.3 must be completed by the ICU physiotherapist, ICU Nurse Liaison or ICU medical staff.
- Patients discharged from ICU with a tracheostomy and ventilation require referral to VRSS and TRAMS.
- When a patient with a tracheostomy arrives on the ward, the nurse in charge will contact TRAMS (with the exception of ENT acute).
- ENT patients are seen by TRAMS upon written referral ((M17 Consultation Request form) to TRAMS from ENT medical staff

Patient Management

- The parent medical unit has ultimate responsibility for patient management.
- The bedside nurse must ensure that all mandatory tracheostomy equipment is in place prior to the arrival of the patient. (See [Mandatory Tracheostomy Equipment & Emergency Tracheostomy Management Poster](#) and [Tracheostomy Checklist M31.43](#))
- The [Emergency Tracheostomy Management Poster](#) (also known as the Tracheostomy Emergency Management cognitive aid) must be placed above the patient's bed
- TRAMS conducts twice weekly rounds at the Austin campus and individual patient reviews as required. Patients at HRH or RTRC are seen as required. TRAMS provide support to staff on all campuses and in the community as required.
- For acute ENT patients, the bedside nurse and ENT medical staff must ensure mandatory tracheostomy equipment and Emergency Tracheostomy Management Poster are at the bedside

Discharge from Austin Health with Tracheostomy

- **Patients who are transferred to another hospital:** The discharge summary to the receiving hospital should include information on the history of the patient's tracheostomy (including insertion method / date and the most recent date the tracheostomy was changed), current type of tracheostomy tube and current care regime.
- **Patients who are discharged to the community:** The patient and carers will receive all tracheostomy education and training prior to discharge. Ideally, this should take place over a number of sessions, generally over 2 weeks. VRSS or TRAMS staff will work closely with the parent medical unit to ensure that all training has taken place prior to discharge.

Education includes emergency procedures, routine tracheostomy care, schedule for tracheostomy tube changes, list of equipment and consumables, ordering information and schedule of ordering. Names and contact details of relevant staff are provided to the patient, family and community health care providers. Patients are provided with a customised booklet and wallet card, which reflect the patient's individual requirements.

Tracheostomy Education for Austin Health Staff:

- Tracheostomy e-learning packages are accessible on ATLAS
- Tracheostomy Policies and Procedures are located in OPPIC
- The [TRAMS Pulse site](#) contains: Tracheostomy resources such as Tracheostomy Clinical Instruction Sheets and announcements of upcoming educational events
- The TRAMS external website www.tracheostomyteam.org contains information for patients, families and clinicians who are external to Austin Health
- TRAMS and VRSS Outreach staff are available to provide individual patient consults, multidisciplinary in-services, education and training.
- TRAMS conducts annual Multidisciplinary Tracheostomy Workshops
- Clinical nurse educators, clinical support nurses and allied health staff also provide education sessions. All content is coordinated and based on the Austin Health tracheostomy policies and procedures

Document Author/Contributors:

Document owner: Tanis Cameron, Manager, Tracheostomy Review and Management Service (TRAMS)

Contributors: Tanis Cameron (Manager, TRAMS), Christine Knee Chong (Clinical Nurse Consultant, TRAMS), A/Prof Mark Howard (Director, VRSS), Anne Duncan (Clinical Nurse Consultant, VRSS), Dr Naomi Atkins (TRAMS Medical Lead, Respiratory and Sleep Medicine Physician), A/Prof Stephen Warrillow (Director ICU), Dr Jon Graham (Anaesthetist, co-lead of Austin Health Airway Committee).

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Global Tracheostomy Collaborative www.globaltrach.org

Tracheostomy Review and management Service www.tracheostomyteam.org

National Tracheostomy Safety Project (NTSP) <http://tracheostomy.org.uk>

Endorsed by:

Tracheostomy Policy and Procedure Review Committee
Clinical Nursing Standards Committee
A/Prof Mark Howard (Director, VRSS)
A/Prof Stephen Warrilow (Director, ICU)

Document Owner /Person Responsible for Document:

Tanis Cameron (Manager, TRAMS)