Evaluating Compliance With Adult Tracheostomy Emergency Bedside Supply

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Background

• For safety, patients with tracheostomies require certain equipment at bedside at all times
• JHH policy PAT035 includes a checklist dictating which supplies are necessary at the bedside (Image 1) (JHH, 2014)
• Nurses are required to check these supplies every 8 hours (JHH, 2014)
• Adverse events have been reported in which emergency supplies have been needed, but were not immediately available at the bedside
• Barriers to compliance include “borrowing” supplies for non emergent use and it is time consuming to check for supplies
• Nursing units employ various strategies in ensuring presence of supplies

Objectives

• To audit the presence and location of emergency tracheostomy bedside supplies
• To identify gaps in practice

Methods

• Created a standard audit tool (Image 2)
• Used EPIC report to identify patients with tracheostomies
• Visited patients’ rooms, recorded supply presence and location
• Two auditors: 1 to search for and count supplies, 1 to record
• 3 months to collect data
• Excluded pediatrics and laryngectomies

Results

• 70 audits were collected
• Overall number of audits with 100% compliance 16/70 = 22.9%
• Checklist present: 46/70 = 65.7%
• Supplies found in a bag: 61/70 = 87.1%

Conclusions

• Poor compliance with tracheostomy bedside supply is a safety concern and suggests room for improvement
• Compliance and location of supplies vary from unit to unit and by type of unit

Future Directions

• Interview and/or survey nurses to identify barriers to compliance
• Simplify the supply list
• Propose the purchase of sealed prepackaged tracheostomy supply kits
• Although costly, they would save time and improve patient safety

References


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