

Evaluating Compliance With Adult Tracheostomy Emergency Bedside Supply

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1 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

Image 1. JHH Adult Tracheostomy Checklist

2 Objectives

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

Methods

3

- 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

MEN:	Unit/Room:	Date/Time:
Trach site:	Room:	Isolation?
Disp/Non-disp		
Tracheostomy Checklist		
Supplies:	Where is it?	
Face mask	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
IMB:	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Hydrogen peroxide (1 bottle)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Kelly clamp	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Lubricating jelly (x1)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Manual resuscitation bag	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Normal saline (1 bottle)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Normal saline bulbs (10)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Obturator of present tracheostomy	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Scissors	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Sterile gloves (2 packs, different sizes)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Sterile inner canula (only for ventilator dependent patients)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Sterile suction catheters (6, appropriate size and smaller)	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Syringe, 10cc	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Trach tube: 1 current size, 1 smaller	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Tracheostomy collar	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Tracheostomy fastener	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Yankauer	Bag Counter Cart(aside) Cart(4) H/A Table	Not present N/A Other:
Humidification set up?	Y N	
Suction set up with yankauer?	Y N	
Supply bag present?	Y N Location:	
Supply bag secured shut?	Y N Location:	
Checklist present?	Y N Location:	
Intra supplies:		

Image 2. Standardized audit tool

4 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%**

Unit	# of Audits
Zayed 9E SICU	6
Zayed 9W	6
Nelson 8	5
Weinberg 4D	5
WICU	5
Nelson 5 MPCU	4
Zayed 10E MICU	4
Zayed 3W NCCU	4
Nelson 4	3
Weinberg 4A	3
Zayed 12W	3
Zayed 5E CVSICU	3
Zayed 5W CCU	3
Halsted 3	2
Nelson 6	2
Weinberg 5B	2
Weinberg 5C	2
Zayed 11W	2
Zayed 11E	2
Halsted 2-Osler 2	1
Weinberg 5A	1
Zayed 10W CVPCU	1
Zayed 12E	1
Total	70

Table 1. Audits by Unit

Unit Type	# of Audits
Rehab	2
IMC	5
ICU	27
Floor	36

Table 2. Audits by Unit Type

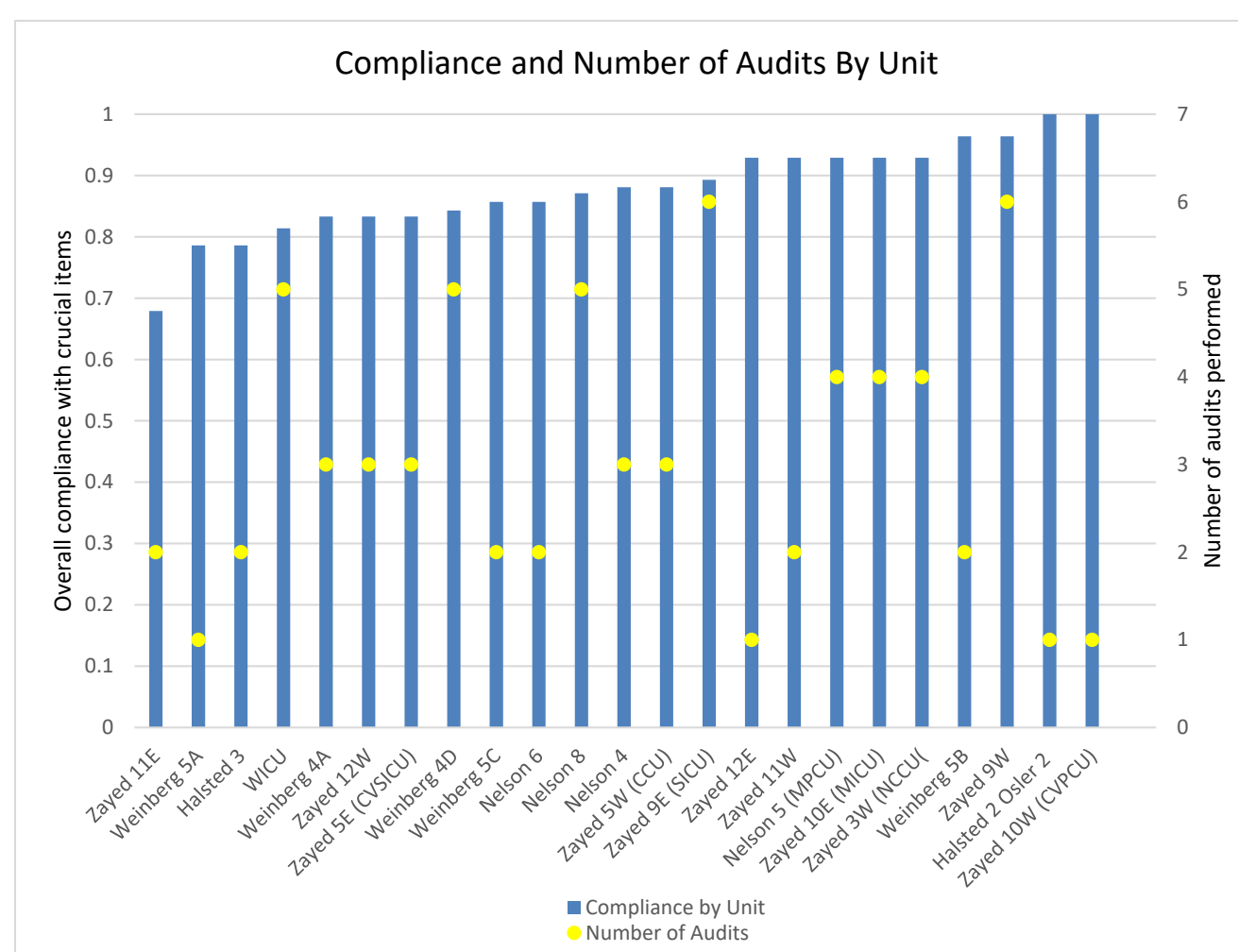


Figure 1. Compliance by unit and the number of audits completed on each unit

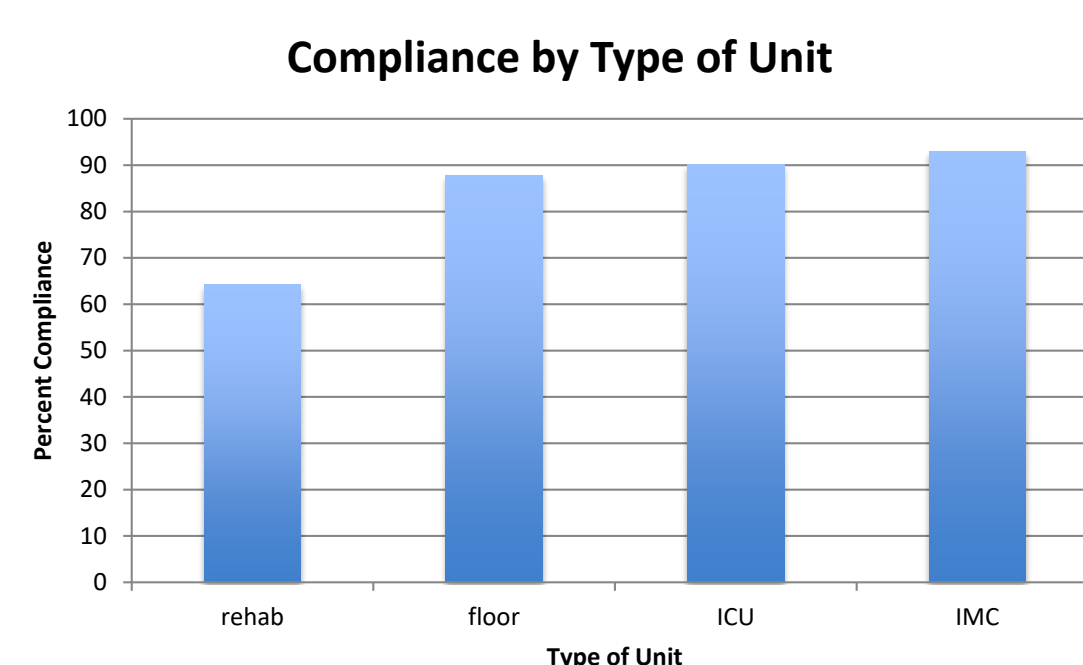


Figure 2. Percent compliance by unit type

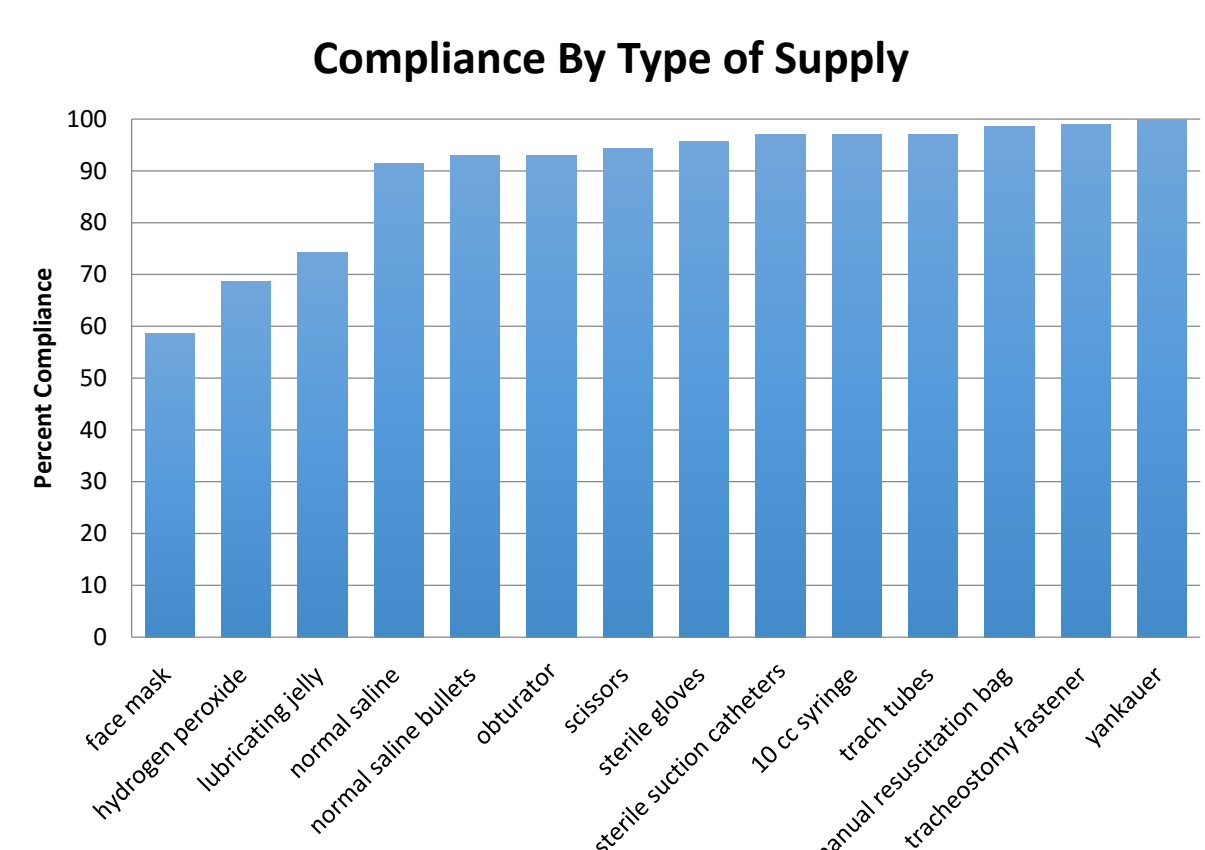


Figure 3. Overall percent compliance by type of supply



Figure 4. Location of supply bag by number

5 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

6 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

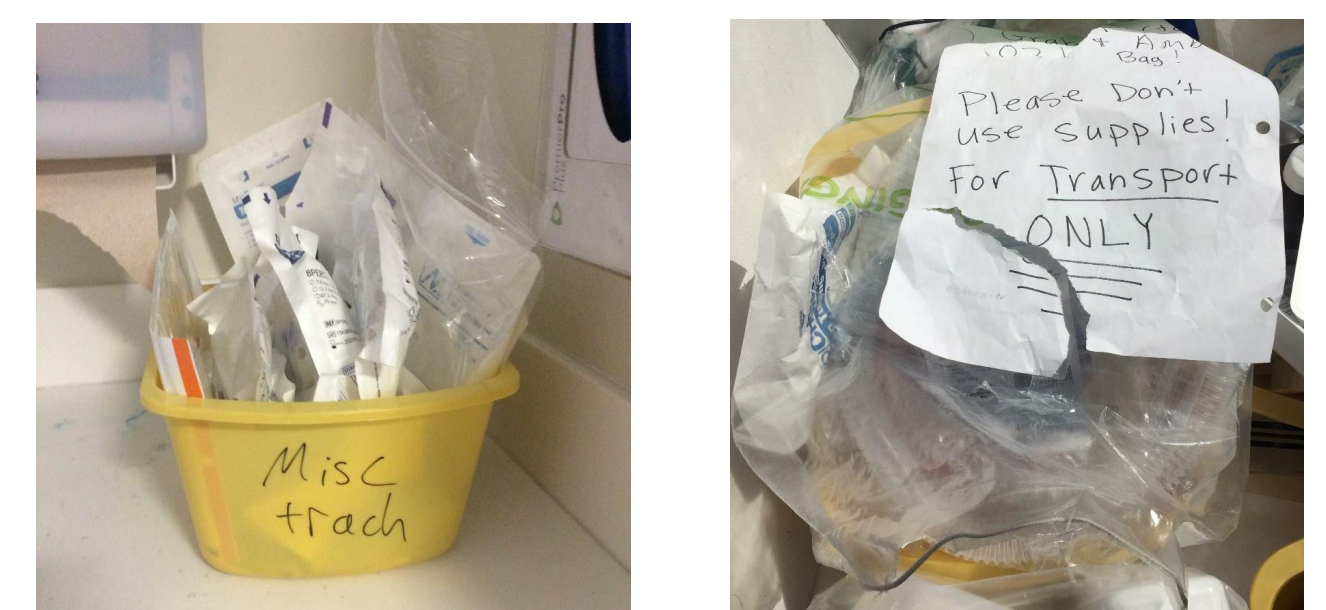


Image 3 & Image 4. Photos of tracheostomy supplies taken while auditing

7 References

The Johns Hopkins Hospital. (2014). Policy PAT035: Tracheostomy tube, management of a patient with. *Interdisciplinary Clinical Practice Manual Patient Care*.

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