

Abstract

Objective: Discharging patients with a tracheostomy tube is a multifaceted process requiring multidisciplinary communication and care coordination. Therefore, the purpose of this quality improvement project was to evaluate whether the implementation of a hand-off communication form among health care professionals (Registered Nurses & Respiratory Therapists) caring for adult (>18 years) tracheostomy patients on an acute care surgical unit will increase the teams understanding of the patient's discharge process and enhance communication among team members.

Methods: This project utilized a pretest-posttest design comparing nurses' and respiratory therapists' understanding of the tracheostomy patients' discharge plan and overall team communication before and after implementing the hand-off form. Additionally, the project assessed the provider's satisfaction with utilizing the form.

Results: Following the 12-week implementation of the hand-off communication form, nurses (n=9) demonstrated a small improvement (median score of 14 vs. 15) in the understanding of the discharge plan. However, there was no statistically significant improvement in the discharge knowledge. Additionally, a majority of the nurses reported good (n=7) and very good (n=1) communication among team members, and 66.67% (n=6) of the nurses reported satisfaction with the tool and were interested in continuing to use the form.

Conclusion: This pilot study found that a formal and uniformed discharge education protocol could potentially serve as a prerequisite to successfully prepare tracheostomy patients and their caregivers for a safe transition to home. As demonstrated, a standardized educational form may positively impact the healthcare provider's understanding of the discharge plan and encourage team members' communication.