

Interprofessional Collaborative Practice to Improve Clinical Staff's Ability to Provide Holistic Health Care for Patient's Tracheostomy

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INTRODUCTION

- The complications associated with prolonged placement of the tracheostomy tube is also increased, including increased airflow resistance, drying out of the tracheal, and increased risk of hospital readmission due to respiratory tract infections, granulation hyperplasia, airway narrowing, tracheomalacia, and laryngeal dysfunction.
- The main issue derived from tracheostomy were changes in appearance and inability to speak, leading to high levels of psychological distress, as well as communication barriers with family members or medical staff.
- Thus early intervention in tracheostomy decannulation by a multidisciplinary team with multiple health professionals from several different disciplines is needed for improving the patient's quality of life and reducing the caregiver burden.
- We found that there is still much clinical staff who are not familiar with the standardized tracheostomy decannulation protocol and thus not applying it during clinical care. Also, Interprofessional collaborative practice is increasingly recognized as being crucial for the provision of holistic care.

AIM

The purpose of this study is to let clinical staff familiar with the multidisciplinary collaboration in tracheostomy decannulation, to facilitate effective communication with patients with tracheostomy, to provide decannulation safely, and to promote quality in health care.

METHOD (quasi-experimental design with a single-group, pre-and post-test)

- Complete a self-assessment questionnaire about holistic health care which consists of four pillars: physical, emotional, social and spiritual needs of the patients.
- Allow personnel to understand the patient's feelings, and watch an interview documentary by a tracheostomized patient about tracheostomy decannulation training.
- The tracheostomy decannulation training workshop was held with an interactive online teaching tool by lecturers from the tracheostomy training team.
- All staff participating in the workshop will have a test on the knowledge of tracheostomy decannulation before and after the workshop.
- After the workshop, they were asked to complete the post-test about holistic health care.
- An open-ended qualitative interview was also conducted for their thoughtful feedback.



Self-Assessment



Patient Documentary



Tracheostomy Workshop

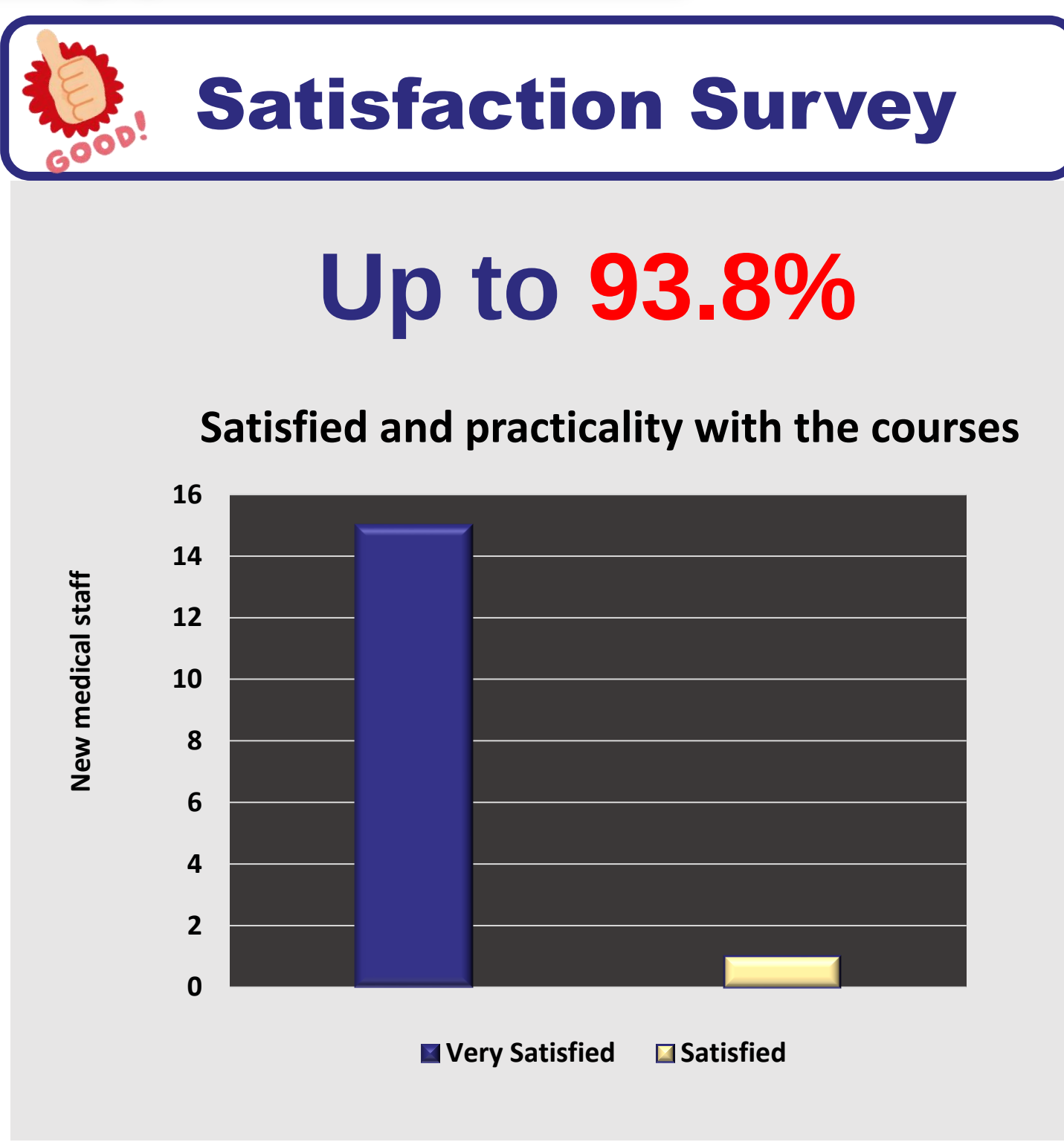
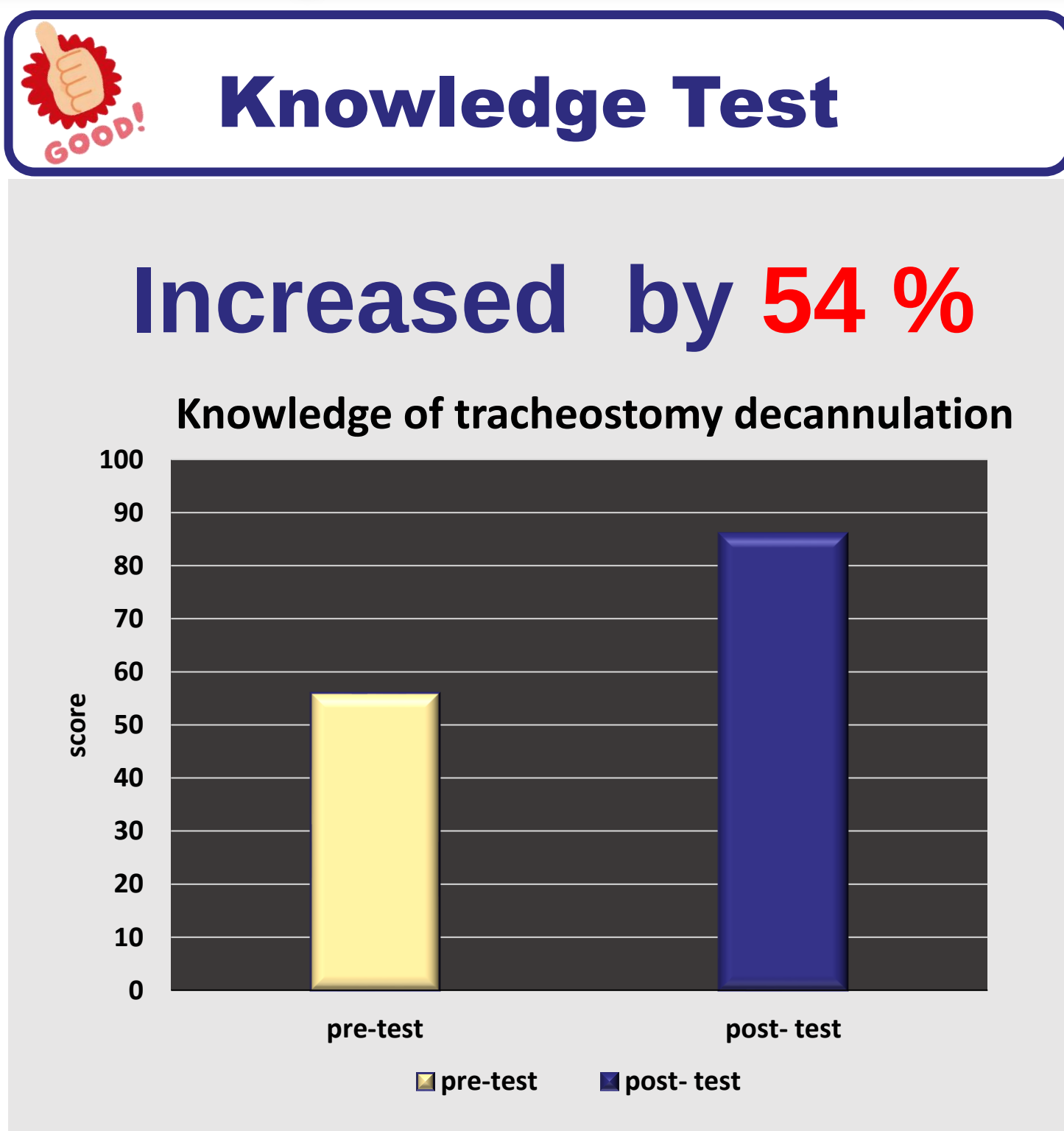
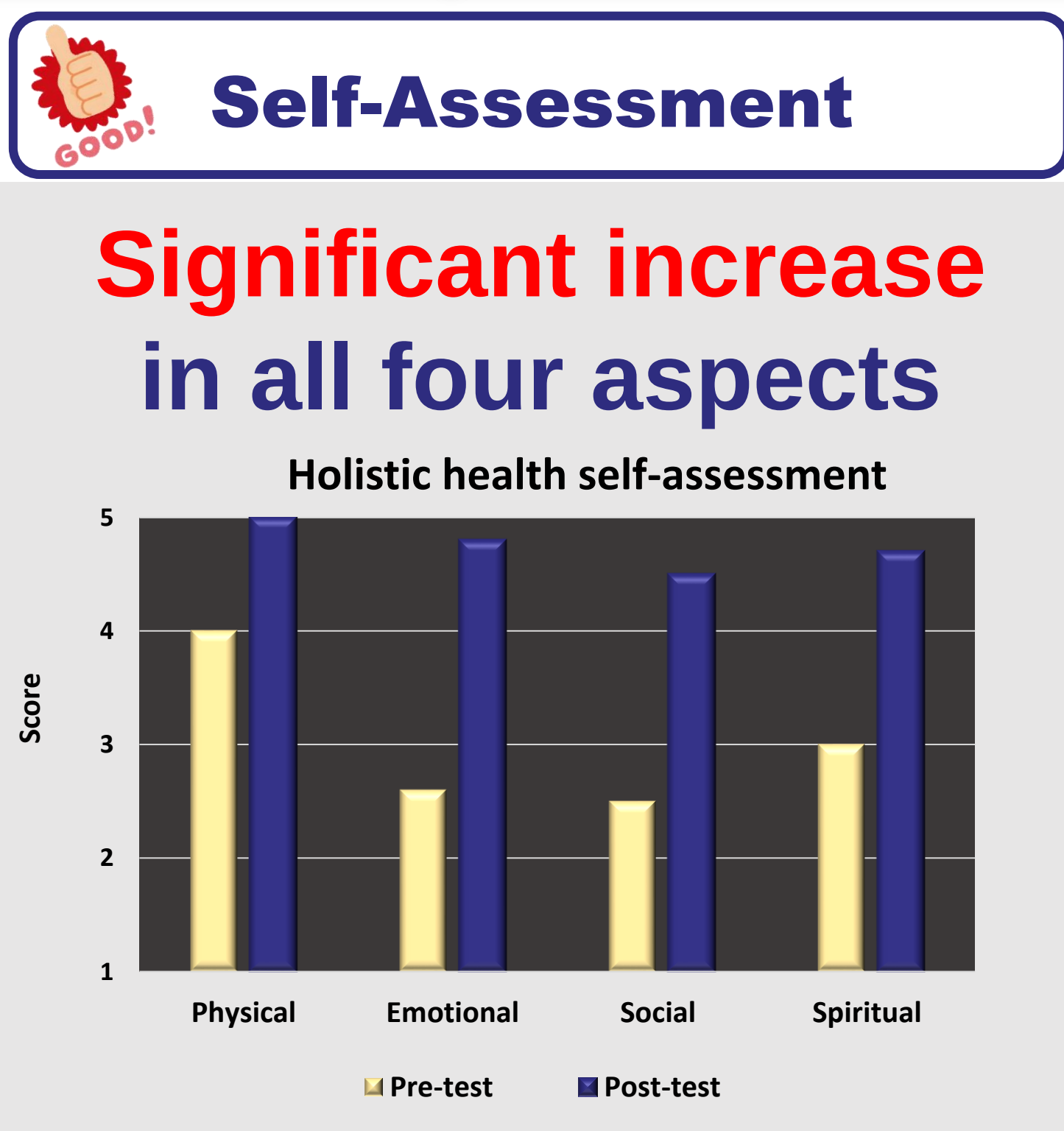


Knowledge Test



Qualitative Interview

RESULTS (16 staff have completed this activity)



Staff's Feedback

由此課程認識到各個不同職類對於氣切脫離訓練上能提供的資源，讓我在臨床上更能全方位的去評估病人需要何種訓練，並與團隊溝通協調，擬定出最適合病人的訓練計畫。

對於病房評估移除氣切的病人,知道自己的專業性跟所要提供的服務項目。

紀錄片很真實的呈現氣切病人的心情，原來在病人心理講話是這麼的重要! 以後遇到我會更加傾聽想表達的事。

原本對於移除氣切的標準、氣切的材質和適合對象等不熟悉，經過這次的課程後，未來在面對氣切個案時，更能掌握病人的狀況和進展。

CONCLUSIONS

The staff's familiarity and practicability of tracheostomy decannulation can be improved through these training process. By improving their skills and multidisciplinary collaboration, the patient can safely remove the tracheostomy permanently. Also, there was no complication after 3 months of follow-up the patient had no need to reinsert the tube. Both the quality of life and social participation will be improved when with a tube-free life.

REFERENCES

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