Oral Suctioning Policy

Introduction
Oral suctioning is an important aid in the clearance of secretions and the maintenance of a clear airway decreasing the risk of aspiration. This procedure has been developed to ensure safe practice when caring for patients who require oral suctioning due to an inability to clear the airway by cough or huff.
Oral suctioning removes excessive secretions and keeps the mouth and airways clear. Oral suctioning is performed using a Yankauer suction catheter and suctioning device. The large opening of the Yankauer sucker enables the clearance of copious amounts of secretions. It is angled to follow the contours of the oropharynx and buccal pouches of the mouth where secretions can collect. Yankauer suction must never be undertaken in the throat as this could result in vomiting and airway blockage.
Oral suctioning can be distressing for the patient and should only be used when other methods are ineffective. Alternative methods of clearance, such as mouth care, positioning and postural drainage should first be trialled before the consideration of oral suction. The need for oral suctioning will vary with each patient therefore the frequency of undertaking this procedure will be based on individual assessment by the multi-disciplinary team and recorded in the individual’s management plan. Oral suctioning should be used to prevent distress and airway blockage as required.

Purpose
- To provide a competency framework for staff teaching oral suctioning to carers.
- To maintain a consistent approach to safe practice in oral suctioning.
- To provide a clear pathway for provision of equipment.

Duties & Responsibilities
The Myhomecare Nurse Manager is ultimately responsible for the content of all policies, implementation and review of the policy. It is also their responsibility to ensure
- Effectiveness of the policy within their area.
- To ensure staff comply with policy and procedure and
- To ensure competency training for all staff is current and signed off.
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Responsibility of all staff who are administering oral suction in the community,
- To ensure their competencies are current and signed off.
- To gain informed consent from individual undergoing this clinical procedure.
- To ensure all carers administering oral suction are competent.

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Responsibility of any other individual.

- Any carer administering oral suction should have been deemed competent and have completed training and signed off competency.

**Oral Suctioning Procedure**

**Indications**

- Client’s inability to clear secretions independently (sputum, saliva, vomit) from their upper airway by a cough, huff or other method of airway clearance.
- This may be due to obstruction, falling levels of consciousness or physical disability, and the presence of which is causing discomfort, distress or obstruction.

**Precautions and Contraindications for Yankauer suctioning;**

- Facial fractures
- Head and neck surgery
- Loose teeth or dentures
- Clotting or haematological disorders
- Sore mouth or damaged mucosa
- Severe bronchospasm
- Stridor
- Restless/anxious client
- Fitting patient
- Spasms or increased muscle tone of face and neck muscles

**Dangers**

Do not attempt to remove a solid object or inhaled foreign body from the back of the throat with suction. This could result in the object being forced further into the airway and possibly causing a complete obstruction.

**Equipment required**

- Suction machine obtained from community equipment supplier and set at appropriate pressure for client. The machine should be checked at the beginning of each shift.
- Spare Canisters
- Suction tubing.
- Yankauer suction catheter.
- Cooled boiled water.
- Container for cooled boiled water to clear secretions from suction tubing.
• Personal Protective equipment as appropriate.
• Visor/eyewear.
• Gloves.
• Apron.
• Hand decontamination equipment.
• Clinical waste facilities.

Procedure
• Explain the procedure to the client
• Check that the suction equipment is free from defect and that it is clean. The chamber should not be filled and the machine switches on and off.
• Turn the machine on and check suction pressure by kinking suction tubing and regulate vacuum pressure to maximum pressure indicated in individual’s management plan (between 200mmHg and 250mmHg). High negative pressures can cause mucosal trauma increasing risk of infection.
• Wash hands in accordance with Myhomecare Hand Hygiene Policy.
• Apply Personal Protective Equipment (PPE) as appropriate to protect clothing and prevent transfer of transient organisms.
• Position client in an appropriate, adequate and comfortable position with head turned towards you.
• Check client’s mouth to ascertain whether there is obstruction free.
• Attach Yankauer suction tube to the suction tubing and introduce Yankauer to the client’s mouth leaving the clean sleeve on until ready to use WITHOUT APPLYING SUCTION. Do NOT pass the Yankauer past the back of the teeth/buccal space to:
  – To prevent tissue damage.
  – To prevent stimulation of the gag reflex and vomiting.
• During oral suction, aim to view the cavity at all times to ensure that soft tissue does not come into contact with the Yankauer, to prevent damage to the mucosa of the oral cavity.
• Apply suction on withdrawing working from the back of the mouth forwards, to ensure that all areas of the oral cavity are cleared.
• Note the colour, tenacity and quantity of the secretions. If they look infected and this is an initial observation, then arrange to send a sample to the GP. Potential infections need to be picked up at the early stage.
• Ensure mouth cavity is clear and patient is breathing comfortably.

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• If secretions collected around/under mouth plates/gum protectors these should be removed, cleaned and replaced.
• Attend to mouth care as appropriate.
• Rinse Yankauer and suction tubing thoroughly with cool boiled water by using suction in order to remove secretions from tubing and cover with the plastic sleeve to protect Yankauer.
• Remove PPE and dispose of waste in accordance with Infection Control Policy. Wash hands as per hand hygiene policy.
• Record all care performed in client’s Myhomecare care plan folder, in accordance with Record Keeping Policy.
• Check level of secretions in suction bottle liner and check filters and change/dispose of as deemed necessary.
• Change tubing and Yankauer sucker as required by manufacturer and dispose of in accordance with Infection Control Policy.

Training Implications for Non Nursing Staff
• Healthcare workers will need to undertake the appropriate training to demonstrate the knowledge and practical skill in oral suctioning.
• Training will be initially provided by the Clinical Nurse Lead in each homecare case.
• All training is to be signed off by the Clinical Nurse Lead deeming the carer competent in the training log book.

Competency
• Knowledge of basic mouth and throat anatomy
• Indications for mouth care
• Knowledge of indications for suction.
• Knowledge and understanding of suction device.
• Knowledge of contraindications for performing suction.
• Knowledge of importance of preparing patient physically and psychologically.
• Knowledge of importance of assessing and reassessing patient’s needs.
• Knowledge of importance of reviewing patient and when a reassessment is required.
• Knowledge of side effects of suctioning and any action to be taken.
• Knowledge of relevant policies.
Performance
The individual staff member must be;

- Able to assess client’s need for oral suction.
- Able to prepare client for the procedure both physically and psychologically.
- Able to assemble, prepare and check equipment.
- Able to carry out procedure according to guidance.
- Able to carry out general mouth care.
- Able to respond to any adverse reaction/complications and report to the appropriate individual.
- Able to dispose of equipment and waste material in accordance with policy.
- Able to complete the relevant documentation.
- Currently deemed as competent in line with policy.

References

- An Bord Altranais; (April, 2000) The Code of Professional Conduct for each Nurse and Midwife. An Bord Altranais; Dublin

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