



# Safe Airway Management Training in an Oncology Critical Care Unit

*A culture of nurse led innovation and education in airway  
management at The Christie:*

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# The Christie



“We are leading experts in cancer care, research and education. Only organisation to be rated ‘Outstanding’ twice by CQC. We have been pioneering cancer research breakthroughs for over 100 years and offer patients access to hundreds of clinical trials. In a global survey we have been ranked as the most technologically advanced cancer centre in the world outside North America”

Our responsibility and loyalty to both patients and staff alike has driven the development of ‘Airway April’. A recurrent month of sharing and learning within a safe and open environment



# Context



- Oncology CCU 8 beds, Level 3 (2012), specialised surgery.
- Cost effective – utilise skills and expertise of existing staff to empower, teach and drive cultural change to promote a confident and competent workforce.
- Implement and embed the RICON (GMCCN) B@EASE checklist to promote airway safety (mirrors DAS checklist, Higgs et al, 2018).
- NAP 4 (2011), urgent need for specific airway training in CCU to promote safe patient and staff experience.
- CC areas commonly have a high staff turnover & junior staff (mirrored OCCU).



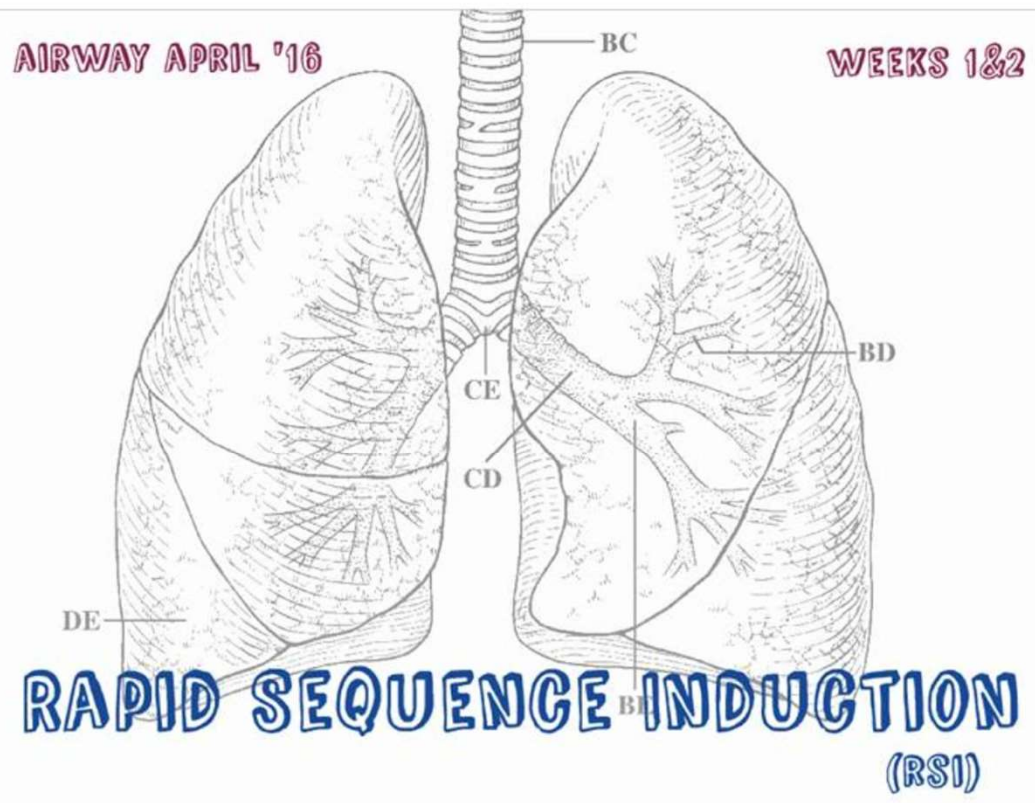
# Objectives

1. Assemble nurse led airway team
2. Deliver safe airway interactive workshops in Airway April
3. Human Factors, reflective practice, airway adjunct stations, B@EASE scenarios – **ENGAGE ALL STAFF**
4. Provide staff and bedside laminates of checklist
5. Implement electronic B@EASE checklist to allow audit and positive feedback
6. Airway April Quiz with prizes
7. Difficult Airway Resource File



AIRWAY APRIL '16

WEEKS 1&2



Video

[on.wmv](#)

# Year 2: 2017

The screenshot shows the B@EASE software interface. The 'Intubation' section includes a 'Was B@EASE algorithm used?' checkbox with 'Yes' and 'No' options, and a 'Next step' dropdown menu. The 'Equipment' section includes 'Appropriate airway equipment used as per B@EASE?' and 'Extra equipment used?' checkboxes, and 'Appropriate monitoring equipment used?' dropdown menu. The 'Airway/Assess/Plan' section includes a 'Physiology Optimised?' dropdown menu. A 'Next step' button is visible in the top right of the Intubation section.

The screenshot shows the B@EASE software interface. The 'Staff' section includes a 'Team leader' dropdown menu with 'Drugs administrator' selected, an 'Intubator (1st/2nd)' dropdown menu with 'Ruhner' selected, an 'Airway assistant' dropdown menu with 'Others present' selected, and a 'Cricoid pressure performed by?' dropdown menu. The 'Emergency Plan' section includes an 'Airway plan utilised' dropdown menu with 'Plan A', 'Plan B', 'Plan C', and 'Plan D' options. A 'Next step' button is visible in the top right of the Staff section.

1. Intubation
2. Equipment
3. Airway/drugs
4. Staff
5. Emergency plan





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# Year 3: 2018

- Focus specifically on DAT trolley and it's content and development of resource file
- Cross-organisational links with ODPs in theatre
- Facilitated theatre opportunity for all staff





# Year 4: 2019



- Full study day running 12:00-17:00
- Discussion on Escalation of care, RSI, Human factors, B@ease algorithm and release of local audit results
- Practical training on DAT trolley use, Airway anatomy, Airway adjuncts, SIM man use
- Consultant lead scenario training
- Airway quiz and prizes



# Results



1. Embedded yearly AA workshops and cultural change
2. Enriched and collaborative cross-organisational relations
3. Increasing attendance from MDT
4. Compliance in utilising and documenting Year 1: 2016Bese checklist increased from 60% in 2017/2018 to 93% in 2018/2019
5. **PATIENT SAFETY!!!**



# Comments

Useful, informative and interactive

Great transferable skills and to practice the A, B, C,D approach to difficult intubation with experienced ODPs

Feedback

Fun and informal in safe environment

So much effort and time has gone into this study day, the quiz, workstations, scenarios and free packs – thank you airway team!!



# Recommendations



- Introduce monthly monday scenario teachings
- Safe airway skills are imperative and essential for staff OCCU working in a challenging environment.
- Maintain the positive learning culture that Airway April has created over the last 4 years by encouraging learning at every opportunity (E.G. Night shifts)
- Re-assess B@ease use via audit on a monthly basis, rather than 12 monthly
- Link with OCCU Advanced Life Support team- Combined airway and resus simulations
- Maintain strong relations with ODP and Theatre staff (We felt that this was a key difference in Airway April 2018, which both enhanced the learning experience and formed new relationships)



# References

- Higgs, A., McGrath, B A., Goddard, C et al. (2018). Guidelines for the management of tracheal intubation in critically ill adults. *British Journal of Anaesthesia*. Feb; 120 (2); 323-352
- Natt, B.S., Malo, J., Hypes, C., D et al. (2016). Strategies to improve first attempt success at intubation in critically ill patients. *British Journal of Anaesthesia*. Sep; 117 suppl.
- Nolan, J.P. & Kelly, F.,E. 2011. Airway challenges in critical care. *Anaesthesia*. Volume 66. Issue s2.

