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**Acacium Group**

# **Changing Tracheostomy Cotton Ties (Child)**

**Procedure Reference | SOP VENT 21**

**Version | V5.1**

<b>Procedure Name</b>	Changing Tracheostomy Cotton Ties (Child)
<b>Purpose of Document</b>	To ensure that the correct preparation, procedure and outcomes are achieved when changing tracheostomy cotton ties on a child with a tracheostomy
<b>Target Audience</b>	All Nurses & appropriately trained carers
<b>Version</b>	V5.1
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<b>Equality Impact Assessment (EIA) Form</b>	Acacium Group is committed to Equality, Diversity and Inclusion and in line with our values, we strive to ensure that everyone that is part of the Acacium community is not disadvantaged or discriminated against given their individual need or characteristics. To support this, an Equality Impact Assessment has been undertaken on this policy/procedure. This information is held centrally and can be requested from the Clinical Governance Team.
<b>About Acacium Group</b>	Details of all Acacium Group trading companies that this policy applies to are detailed within Appendix A

Document History			
Version	Date	Changes made/comments	By whom
V1.1	Dec 2016	Implementation of document history page	KNF/VM
V1.1	July 2018	Review	KMS/VM
V1.2	Mar 2020	Updated to new Template	CC
V2	May 2020	2 yearly review	Clinical Advisory Group
V2.1	Oct 2020	Updated re rebrand	CC
V3	Dec 2022	Reviewed and updated	Clinical Advisory Group
V4	May 2023	Reviewed. No extension to date	Clinical Advisory Group
V5	Jan 2024	Rebrand	Clinical Advisory Group
V5.1	Apr 2024	Reviewed and updated	Clinical Advisory Group

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## 1. Introduction

A tracheostomy is secured using tapes or cotton ties (see VENT 20 for velcro tapes) The method of how a client's tracheostomy is secured is stated in their care plan.. This varies throughout the UK. It is vitally important that a child's tracheostomy is secure at all times, and that all Acacium Group workers caring for clients with a tracheostomy are appropriately trained and competent in changing these tapes/ties. It is recommended for routine changes that this is done with two competent people, wherever possible.

## 2. General

Cotton ties are used in some children to secure their tracheostomy. Cotton ties are to be used in routine tracheostomy changes. Securing the tracheostomy with cotton ties is a two-person procedure. In emergency situations or one-person procedure Velcro tapes are to be used.

## 3. Aim

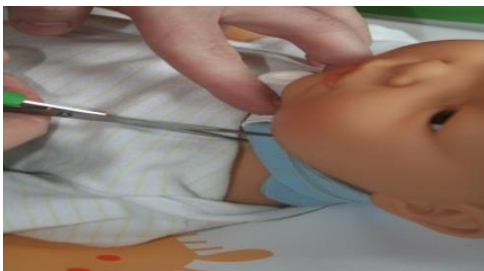

To ensure the security of the child's tracheostomy at all times.






## 4. Equipment





- Emergency tracheostomy box with appropriate contents (changes depending on client)
- New cotton ties cut to the appropriate length
- Green oxygen tubing or other device for holding the ties
- Velcro tapes (for use in an emergency)
- Round-edged scissors
- Oxygen
- Suction machine with appropriately sized suction catheters
- Sterile gauze
- Cleaning solution such as sterile sodium chloride or cooled boiled water
- Barrier cream if prescribed
- Ambu-bag if applicable
- Appropriate PPE in line with current guidance.

## 5. Procedure

	Action	Rationale
1.	Explain the procedure and gain consent from the client and the parents/guardians as appropriate.	To obtain consent and cooperation.
2.	Ensure that you have all the equipment required within easy reach.	If the tracheostomy becomes accidentally dislodged the equipment you require would be immediately available.
3.	Adhere to the infection control policy and ensure strict hand washing. Apply PPE per current guidelines.	To prevent spread of infection.
4.	Ensure the child is in a comfortable position with head elevated (in babies you may need to put a roll under their shoulder blades to extend the	To reduce the likelihood of the client coughing and becoming respiratory compromised.

	neck) The parent/carer may be required to hold the child in position. Please refer to Client's care plan for their specific requirements in relation to positioning.	
5.	Consider suctioning the client prior to commencing tape change.	To reduce the risk of the client requiring suction during the procedure.
6.	<p>Ensure that the tracheostomy is secured. This can be done by placing your fingers around the tracheostomy. Someone should hold the tracheostomy to keep secure until the end of the procedure. Carefully cut the tracheostomy ties on the side of client's neck furthest away from you (<i>cut away from child's neck</i>).</p> 	To ensure that the tracheostomy remains secure.
7.	<p>Ensuring the tracheostomy is held securely, carefully cuts the tracheostomy ties on the side of client's neck nearest to them: the tracheostomy is now not secure so you must have complete control.</p> 	To remove the old cotton ties.
8.	Complete stoma care: Please refer to clients care plan for relevant stoma care guidance.	To keep the stoma site clean to prevent infection.
9.	Apply any prescribed cream around client's neck as need. Please refer to the client's care plan/ MAR chart for advice on cream applied.	To prevent the client's neck from becoming sore.
10.	Place new tracheostomy ties underneath client's neck. The ties should be shorter in length on the side of client that is furthest away from you. Some children have the tapes threaded through green tubing to provide some stability; please refer to the client's care plan.	This is the side that you immediately tie knots in the cotton ties, therefore you do not need more length for bows.

		
11.	<p>Place tracheostomy dressing if required as per care plan (shiny side down) around client's tracheostomy.</p> 	The dressing must be inserted prior to the cotton ties, as when the cotton ties are in place it is difficult to replace the dressing without replacing the cotton ties.
12.	<p>Start with the tracheostomy tapes the furthest away from you. Bring the tracheostomy tape that is closest to the skin up through the tracheostomy flange, ensuring that it remains flat against client's skin.</p> 	It is safer to completely secure the cotton ties on the side of the tracheostomy that is furthest away from you.
13.	<p>Tie the tracheostomy ties with three knots</p> 	To secure the tracheostomy
14.	<p>Nearside: Bring the tape closest to the skin through the flange, ensuring that the tape remains flat against client's skin.</p> 	To secure the tracheostomy.
15.	<p>Tie the tracheostomy tapes into a bow.</p>	So that the correct tightness can be achieved prior to the final knot.

		
16.	<p>While still holding the tracheostomy tube in place, check the tension: you should be able to put one finger snugly under the tracheostomy tapes.</p> 	To ensure that the cotton ties are neither too loose nor tight. To ensure that the tracheostomy remains secure.
17.	<p>Pull the bow through the tracheostomy tape to make a double knot, tie the tapes once more for the third knot.</p> 	To secure the tracheostomy in place.
18.	<p>Cut the excess off the tracheostomy tape. Only do this when happy with tension of the tracheostomy ties.</p> 	To ensure that the client cannot pull at the cotton ties and dislodge the tracheostomy.
19.	<p>When you are happy that the tapes are secure, the person holding the tracheostomy can release the tracheostomy.</p>	To reduce the risk of the tracheostomy becoming accidentally dislodged.
20.	<p>Dispose of the equipment used as per the waste management policy.</p>	To ensure waste is disposed of appropriately.
21.	<p>Document procedure in the clients care records.</p>	To ensure contemporaneous recording of procedures.



## 6. Associated Policies / SOPs

### Policies

CLIN 02 Assisted Ventilation Policy  
CLIN 06 Consent Policy

### SOPs

SOP VENT 01 Tracheostomy Dressing Change (Adult & Child)  
SOP VENT 02 Tracheostomy Care General Guidelines  
SOP VENT 03 Humidification of a Client's Tracheostomy  
SOP VENT 04 Tracheal Suctioning (Adult & Child)  
SOP VENT 05 Tracheostomy Tube Care (Adult)  
SOP VENT 06 Tracheostomy Tube Change (Adult)  
SOP VENT 07 Tracheostomy Tube Change (Child)  
SOP VENT 11 Safe Management of a Ventilated Service User During Outings  
SOP VENT 12 Safe Management of a Ventilated Service User During Power Cuts  
SOP VENT 13 Safe Use of Battery Packs  
SOP VENT 14 Assisted Airway Maintenance and Cough (Adult)  
SOP VENT 16 Oral and Nasal Suctioning  
SOP VENT 19 Mechanical Cough Assist  
SOP VENT 20 Changing Tracheostomy Cotton Ties (Child)  
SOP VENT 22 Phrenic Nerve Pacing  
SOP VENT 23 Laryngectomy Care General Guidelines  
SOP VENT 24 Emergency Tracheostomy Tube Change (Adult)  
SOP VENT 25 Emergency Tracheostomy Tube Change (Child)  
SOP VENT 26 Nasopharyngeal Airway Management (Adult & Child)  
SOP VENT 27 Nebuliser Therapy

## 7. References

- Lister, S., Hofland, J. and Grafton, H. (2020) The Royal Marsden Manual of Clinical Nursing Procedures. 10th ed. Chichester: Wiley-Blackwell.
- National Tracheostomy Safety Project. (2024). Basic Care (Child). [Online]. Tracheostomy.org.uk. Available at: <https://tracheostomy.org.uk/healthcare-staff/paediatric> [Accessed 17 April 2024].

## Appendix A: About Acacium Group

Acacium Group consists of a number of trading companies, each providing services within core niche areas of the health and social care industries. Therefore, as this document is a Group Policy, the Policy herein applies to all trading companies detailed below:

 Part of Acacium Group	 Part of Acacium Group
 Part of Acacium Group	 Part of Acacium Group