Developing the Tracheostomy Care Anxiety Relief Through Education and Support (T-CARES) Program

Victoria Wochna Loerzel, PhD, RN, OCN®, William Woodfin Crosby, BSN, RN, 2nd Lt., USAF, NC, Ellen Reising, MSN, RN, CNL, CNS, OCN®, ACCNS-AG, and Mary Lou Sole, PhD, RN, CCNS, FAAN, FCCM, CNL

Many patients with head and neck cancer are discharged home with a tracheostomy in as little as seven days after a procedure. Tracheostomy management at home requires the caregiver to become comfortable with handling medical equipment and be competent and proficient with completing many new complex tasks. However, caring for a patient with a tracheostomy at home can be frightening and a cause of anxiety for caregivers (Montagnino & Mauricio, 2004) who are unfamiliar with providing medical care and who very often have little hands-on training prior to discharge on how to care for a tracheostomy. Caregiver anxiety related to the tracheostomy may lead to improper care of the person with head and neck cancer, increasing the risk for complications such as pneumonia, skin breakdown, tracheostomy plugging, tracheal stenosis, developing granulation tissue, accidental decannulation, hypoxemia, and death (Potter & Perry, 2009). Many of these complications are common reasons for readmission of these patients to oncology units.

The Tracheostomy Care Anxiety Relief Through Education and Support (T-CARES) program was created in response to a request made by a clinical nurse leader (CNL) after noting high readmission rates (35%) at her cancer center for adults who had been discharged with a new tracheostomy after surgery for head and neck cancer. Although patients and caregivers were being educated on how to care for a tracheostomy at home before discharge, it was believed that improvements could be made to the standard education in an attempt to reduce readmissions (Crosby, 2012). The purpose of this article is to (a) describe the development of the T-CARES intervention program designed to reduce anxiety and improve skill competence of caregivers of patients being discharged home with a new tracheostomy.