

ACH Tracheostomy and Ventilator Education Program FAMILY CHECKLIST

Child's Name: _____

Parent Name: _____ Parent Name: _____

| Knowledge and Skills | Education Session Date | Observes Trach Skills Performed By Staff | Family Signed Off As Ready Date |
|---|-------------------------------|--|--|
| Modules 1 to 6: <input checked="" type="checkbox"/> Introduction <input checked="" type="checkbox"/> Respiratory Anatomy <input checked="" type="checkbox"/> Infection Prevention <input checked="" type="checkbox"/> Assessment <input checked="" type="checkbox"/> Tracheostomy Care <input checked="" type="checkbox"/> Suctioning | | | |
| MILESTONE: <input checked="" type="checkbox"/> Completed Modules 1 to 6 <input checked="" type="checkbox"/> Family can start TRACH CARE and SUCTIONING with their child | | | |
| Modules 7 to 12: <input checked="" type="checkbox"/> Humidity <input checked="" type="checkbox"/> Oxygen <input checked="" type="checkbox"/> Respiratory Equipment and Supplies <input checked="" type="checkbox"/> Communication Supplies <input checked="" type="checkbox"/> CPR <input checked="" type="checkbox"/> Emergency Preparedness | | Practices Trach Skills With Staff | |
| MILESTONE: ACCOMPANIED PASS OFF UNIT <input checked="" type="checkbox"/> Completed Modules 7 to 12 <input checked="" type="checkbox"/> Family can perform trach care and suctioning independently <input checked="" type="checkbox"/> Family can go on accompanied passes off unit with their child and staff | | | |
| Modules 13 to 15: <input checked="" type="checkbox"/> Life with a Trach <input checked="" type="checkbox"/> Ventilator <input checked="" type="checkbox"/> Transitions | | Practices Trach Skills With Staff | |
| MILESTONE: TRACH CHANGE <input checked="" type="checkbox"/> Family can perform a planned trach change with their medical team present | | | |
| MILESTONE: UNACCOMPANIED PASS OFF UNIT <input checked="" type="checkbox"/> Family can go on unaccompanied passes off unit with their child | | | |
| MILESTONE: UNACCOMPANIED PASS OFF SITE <input checked="" type="checkbox"/> Completed all Modules <input checked="" type="checkbox"/> Completed ROP Ventilator training if applicable <input checked="" type="checkbox"/> Completed all Simulations <input checked="" type="checkbox"/> All skills signed off <input checked="" type="checkbox"/> Family can go on unaccompanied passes off site with their child <input checked="" type="checkbox"/> READY FOR DISCHARGE | | | |