

Oral Yankeur Suctioning	
Standard Operating Procedure (SOP)	
Ref No: 1832	
Version: 2	
Prepared by: Community Clinical Skills facilitator	
Presented to: Care and Clinical Policies Group	Date: 17 January 2018
Ratified by: Care and Clinical Policies Group	Date: 17 January 2018
Review date: 12 March 2021	
Relating to policies: TSDFT Infection Control Policies NICE CG 139 February 2017 TSDFT Oral Suctioning in the Community assessment template TSDFT Policy: Accountability, Delegation and Supervision, of Activities to Skilled Not Registered Staff TSDFT Policy: Delegation of level 3 tasks to SNR's not employed by Torbay and South Devon Foundation Trust	

1. Purpose of this document:

This SOP has been developed to ensure safe practice when caring for clients, 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 sucker, and suctioning device. The large opening of the Yankauer sucker enables clearance of copious amounts of secretions. It is angled to follow the contours of the posterior oropharynx and buccal pouches in the mouth, where secretions can collect.

Yankauer suction must never be undertaken in the throat as this can result in vomiting or airway blockage.

Oral suctioning can be traumatic and should only be used when other methods are ineffective. The need for Yankauer suctioning will vary with each patient, therefore the frequency of undertaking this procedure will be indicated within individual care plans. Yankauer suctioning should be used to prevent distress and airway blockage, as required. Each individual should be assessed, and their individual needs identified, and recorded in their care plan.

2. Scope of this SOP:

All Torbay and South Devon NHS Foundation Trust (TSDFT or Trust) staff undertaking this procedure must have attended training by a Registered Healthcare Professional. Registered Nurses in the community should use the TSDFT Oral Yankauer Suctioning assessment document, and be familiar with the Trust linked policies as indicated above, prior to delegating this task to Skilled Not Registered Nurses/Carers.

Key Skills for Community Healthcare workers:

- Knowledge of basic mouth and throat anatomy
- Indications for mouth care:
 - Dry Mouth
 - Nil By Mouth
 - Excess secretions
 - Patient unable to clear their own mouth and airway
- Indications for Yankauer oral suctioning:
 - Excess oral secretions
 - Diminished swallow
 - Vomiting
 - Ability to cough secretions into front of mouth, but inability to expectorate them
- Contraindications and precautions for mouth care and Yankauer suctioning:
 - Head and neck surgery
 - Facial fractures
 - Haematological conditions
 - Sore mouth or damaged oral mucosa
 - Fitting patient
 - Confusion or distress
 - Spasms or increased muscle tone of face and neck muscles

3. Clients covered:

Any patient in the community and community hospitals, that has been assessed by a medical professional, and for whom suctioning is clinically appropriate.

4. Equipment :

- Functional suction unit: 15- 20kPa/100mmHg/150 – 200cmH₂O or as advised by medical electrics for community use.
- Wide-bore Yankauer suction tube
- Disposable gloves, apron, and protective eyewear
- Oxygen therapy and humidification equipment if required
- Jug or bowl of water for clearing the tube after suctioning
- Oral mouth-care pack

5. Procedure:

- 5.1 Explain procedure and seek informed consent. Undertake Best interest if patient unresponsive or lacks capacity
- 5.2 Pre-oxygenate patient if applicable
- 5.3 Decontaminate hands
- 5.4 Put on disposable gloves, apron and protective eyewear
- 5.5 Turn on the suction apparatus, and check settings, as per manufacturers' and medical devices' guidelines
- 5.6 Attach the sterile Yankauer sucker to the machine, leaving the sterile sleeve on until ready to use
- 5.7 Ask the patient to open their mouth, assist if necessary
- 5.8 Insert the Yankauer sucker into the patient's mouth, inside the cheek, **without applying suction**. (i.e. do not put finger over the hole in the Yankauer sucker)
- 5.9 Apply suction by placing finger over the hole in the Yankauer and gently withdraw the Yankauer to remove as much visible secretions as possible
- 5.10 Rinse suction tube if necessary by drawing water up into the Yankauer sucker, then repeat suctioning on the other side of the mouth
- 5.11 Evaluate the consistency, colour and amount of secretions removed
- 5.12 Rinse suction tube by drawing water up into the Yankauer sucker,
- 5.13 Ensure the patient is comfortable, and give oral mouth-care as required
- 5.14 Assess the patient's respiratory functioning, and skin colour
- 5.15 Document the procedure in the patients care plan and/or notes
- 5.16 The suction container bottle liner must be disposed of after every use
- 5.17 The suction bottle must be cleaned daily, and the tubing and Yankauer sucker changed when soiled. They must be changed every 24hrs minimum.

6. References:

- *Oxford Handbook of Clinical Skills in Adult Nursing*.(2009) Chapter10, pages 310 – 311. Randle et al authors. Oxford University Press pubs.
- National Institute of Health and Clinical Excellence (NICE) Guideline 139: Infection. (February 2017) at www.nice.org.uk/cg139
- EPIC 3: National Evidence – based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England

Monitoring tool:

Standards:

Item	%	Exceptions
<p>Equality Statement.</p> <p>The Trust is committed to preventing discrimination, valuing diversity and achieving equality of opportunity. No person (staff, patient or public) will receive less favourable treatment on the grounds of the nine protected characteristics (as governed by the Equality Act 2010): Sexual Orientation; Gender; Age; Gender Reassignment; Pregnancy and Maternity; Disability; Religion or Belief; Race; Marriage and Civil Partnership. In addition to these nine, the Trust will not discriminate on the grounds of domestic circumstances, social-economic status, political affiliation or trade union membership.</p> <p>The Trust is committed to ensuring all services, policies, projects and strategies undergo equality analysis. For more information about equality analysis and Equality Impact Assessments please refer to the Equality and Diversity Policy</p>		

Amendment History

Issue	Status	Date	Reason for Change	Authorised
1	Ratified	27 October 2015	New	
2	Ratified	12 March 2018	Revised	Care and Clinical Policies Group

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on iCare

http://icare/Operations/mental_capacity_act/Pages/default.aspx

Infection Control

All staff will have access to Infection Control Policies and comply with the standards within them in the work place. All staff will attend Infection Control Training annually as part of their mandatory training programme.

Rapid (E)quality Impact Assessment (EqIA) (for use when writing policies)

Policy Title (and number)		Version and Date	
Policy Author			
An (e)quality impact assessment is a process designed to ensure that policies do not discriminate or disadvantage people whilst advancing equality. Consider the nature and extent of the impact, not the number of people affected.			
Who may be affected by this document?			
Patients/ Service Users	<input type="checkbox"/>	Staff	<input type="checkbox"/>
Other, please state...		<input type="checkbox"/>	
Could the policy treat people from protected groups less favorably than the general population? <i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>			
Age	Yes <input type="checkbox"/> No <input type="checkbox"/>	Gender Reassignment	Yes <input type="checkbox"/> No <input type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input type="checkbox"/>	Disability	Yes <input type="checkbox"/> No <input type="checkbox"/>
Gender	Yes <input type="checkbox"/> No <input type="checkbox"/>	Pregnancy/Maternity	Yes <input type="checkbox"/> No <input type="checkbox"/>
Sexual Orientation		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Religion/Belief (non)		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Marriage/ Civil Partnership		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is it likely that the policy could affect particular 'Inclusion Health' groups less favourably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees)			Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.			
VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion			
Is inclusive language ⁵ used throughout?		Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Are the services outlined in the policy fully accessible ⁶ ?		Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Does the policy encourage individualised and person-centred care?		Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Could there be an adverse impact on an individual's independence or autonomy ⁷ ?		Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
EXTERNAL FACTORS			
Is the policy a result of national legislation which cannot be modified in any way?			Yes <input type="checkbox"/> No <input type="checkbox"/>
What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?)			
Who was consulted when drafting this policy?			
Patients/ Service Users	<input type="checkbox"/>	Trade Unions	<input type="checkbox"/>
Protected Groups (including Trust Equality Groups)		<input type="checkbox"/>	
Staff	<input type="checkbox"/>	General Public	<input type="checkbox"/>
Other, please state...		<input type="checkbox"/>	
What were the recommendations/suggestions?			
Does this document require a service redesign or substantial amendments to an existing process? <i>PLEASE NOTE: 'Yes' may trigger a full EIA, please refer to the equality leads below</i>			Yes <input type="checkbox"/> No <input type="checkbox"/>
ACTION PLAN: Please list all actions identified to address any impacts			
Action	Person responsible	Completion date	
AUTHORISATION:			
By signing below, I confirm that the named person responsible above is aware of the actions assigned to them			
Name of person completing the form		Signature	
Validated by (line manager)		Signature	

Please contact the Equalities team for guidance:

For South Devon & Torbay CCG, please call 01803 652476 or email marisa.cockfield@nhs.net
For Torbay and South Devon NHS Trusts, please call 01803 656676 or email pfd.sdht@nhs.net

This form should be published with the policy and a signed copy sent to your relevant organisation.

Clinical and Non-Clinical Policies – New Data Protection Regulation (NDPR)

Torbay and South Devon NHS Foundation Trust (TSDFT) has a commitment to ensure that all policies and procedures developed act in accordance with all relevant data protection regulations and guidance. This policy has been designed with the EU New Data Protection Regulation (NDPR) in mind and therefore provides the reader with assurance of effective information governance practice.

NDPR intends to strengthen and unify data protection for all persons; consequently, the rights of individuals have changed. It is assured that these rights have been considered throughout the development of this policy.

Furthermore, NDPR requires that the Trust is open and transparent with its personal identifiable processing activities and this has a considerable effect on the way TSDFT holds, uses, and shares personal identifiable data. The most effective way of being open is through data mapping. Data mapping for NDPR was initially undertaken in November 2017 and must be completed on a triannual (every 3 years) basis to maintain compliance. This policy supports the data mapping requirement of the NDPR.

For more information:

- Contact the Data Access and Disclosure Office on dataprotection.tsdf@nhs.net,
- See TSDFT's [Data Protection & Access Policy](#),
- Visit our [GDPR](#) page on ICON.