

## Updated guidance for the safe use of suction at school for children with a tracheostomy who do not show symptoms of a CoVID-19

Friday 25 September, Dr Mohin Parmar, NWL ICS Gold Command

### Why was this update needed?

There are between 100 and 150 children across Brent, Ealing, Harrow, Hammersmith & Fulham, Hillingdon, Hounslow, Kensington & Chelsea, and Westminster who require routine suctioning at school to keep their airways clear. Around 120 children need oral suctioning, and around 30 need tracheostomy suctioning.

Parents, teachers, and health professionals were concerned that advice about the personal protective equipment (PPE) required by staff had been inconsistent, and could delay children's return to school.

### Who updated this guidance?

North West London Integrated Care System worked with NHS healthcare providers, Local Authority Directors of Children's Services and Directors of Public Health, and infection control experts to reach a consistent opinion.

The multi-agency North West London Children and Young People's Clinical Reference Group considered the issues, available guidance, and expert opinion on Friday 18 September 2020, and requested a formal view from infection prevention and control experts.

The North West London Infection, Prevention, and Control group confirmed on Tuesday 22 September 2020 that Filtering Face Piece class three (FFP3) masks were not required for oral suctioning, but are required for tracheostomy suctioning. Standard infection, prevention, and control precautions are still required for oral suctioning. This is in line with guidance from Public Health England.

### Summary of the recommended guidance for suctioning in schools

**Emergency suctioning should take place without delay, as this saves lives.**

#### Tracheostomy suctioning

- This is considered to be an aerosol generating procedure (AGP)
- Suctioning should occur in a separate ventilated space with cleaning in between children and empty for 20 minutes between.
- Staff should wear eye protection, gloves, an apron, and either a Filtering Face Piece class three (FFP3) mask that is fit tested, or a respirator hood.

#### Oral suctioning

- Staff involved in oral suctioning should use standard fluid resistant surgical masks, aprons, disposable gloves, and eye/face protection. [This does not require Filtering Face Piece class three (FFP3) masks.]
- Oral suctioning should be done in a separate space with ventilation where possible.

#### When not suctioning...

- Follow Public Health England advice on standard hygiene and social distancing

## Information for staff carrying out suctioning in school

### *Arrangements for oral suctioning*

- The staff member performing oral suctioning should wear droplet precaution PPE (fluid-repellent face mask, apron, gloves).
- PPE needs to be changed between each episode of care.
- When aerosol generating procedures are required these should ideally be performed in a separate space where possible, and the room kept unoccupied for 20-60 mins depending on the ventilation. Your health professional can support you in determining the length of time to leave the room vacant.
- If a child is symptomatic, they should be sent home immediately or not allowed into school.

### *Arrangements for tracheostomy care*

- Enhanced PPE is required for tracheostomy care (such as suctioning in the setting of a well, asymptomatic child who is able to attend school).
- If a child is symptomatic, they should be sent home immediately or not allowed into school.
- A Filtering Face Piece class three (FFP3) mask that is fit tested, or a respirator hood is recommended, in addition to droplet precaution PPE (apron, disposable gloves, eye protection).
- PPE needs to be changed between each episode of care.
- When aerosol generating procedures are required these should ideally be performed in a separate space where possible, and the room kept unoccupied for 20-60 mins depending on the ventilation. Your health professional can support you in determining the length of time to leave the room vacant.
- Emergency suctioning and emergency tube changes should take place without delay.
- A 'trach phone' (humidification device) or similar device should be used prior to carrying out tracheal suctioning.

### *Arrangements for suctioning during transport*

- The same principles and standards of PPE should be applied for any suctioning required when transporting children to and from school.