New Zealand Speech-language Therapists' Association

Te Kāhui Kaiwhakatikatika Reo Kōrero o Aotearoa

Competency Framework:

Adult Tracheal Suctioning for Speech-language Therapists

Disclaimer: To the best of the New Zealand Speech-language Therapists' Association (NZSTA) ("the Association") knowledge, this information is valid at the time of publication.

Acknowledgments

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Te Tiriti o Waitangi alignment
The work to develop this framework was initiated in May 2024 - prior to NZSTA's publication of the Te Tiriti Responsiveness Policy (2025).

This framework is intended to be implemented in a manner consistent with NZSTA's Te Tiriti o Waitangi Responsiveness Policy, including culturally safe practice, equity (ōritetanga), and the protection of wairuatanga. Future revisions will include Māori review and endorsement as part of the NZSTA governance process (Māori final word), and Māori input will be appropriately resourced.

Approval

The Board of the New Zealand Speech-language Therapists' Association
NZSTA Expert Advisor: Dysphagia - Anna Miles.

Document Control

Date	Version	Approved by	Review date	Amendments made
March 2026	1.0	NZSTA Board	2031*	Te Tiriti review / Māori final word: Not recorded in v1.0 (to be completed at next review).

NZSTA Position

It is the position of the New Zealand Speech-language Therapists' Association (NZSTA) that tracheal suctioning for speech-language therapists (SLTs) is considered an extended scope of practice for SLTs with ongoing or established competency in adult tracheostomy management.

This is a consensus document/competency checklist endorsed by the relevant senior clinicians working nationally with tracheostomy patients, as well as the NZSTA. It aims to guide the process for SLTs seeking to develop the theoretical knowledge and practical skills needed for tracheal suctioning in adult patients with tracheostomies.

Operationalisation of this extended scope competency should occur at the local level, be discussed with local teams, and may depend on local policies and positions. Implementation must also occur in a manner consistent with NZSTA's Te Tiriti o Waitangi Responsiveness Policy. In practice, this means SLTs who have undertaken suctioning competency are expected to demonstrate culturally safe engagement, whānau-centred consent practices, and equity-focused clinical reasoning, and to seek guidance on tikanga and cultural safety through local Māori health leadership and/or designated cultural safety pathways, where available. The patient's dignity, wellbeing and wairuatanga must be actively protected throughout assessment, preparation, suctioning and post-procedure monitoring and documentation.

The competency framework is primarily for open suctioning approaches. Closed suction systems are most commonly used with ventilated patients. It is expected that ventilated tracheostomy competency has been completed, and additional training is provided prior to closed-circuit suctioning.

This document is an adjunct to the NZSTA Tracheostomy Competency Framework. It is anticipated that SLTs who have achieved tracheostomy competency are ready to begin working through this competency. SLTs who are currently working towards their adult tracheostomy competencies may begin developing tracheal suctioning skills alongside their tracheostomy competency work (from level 2 onwards).

It is recommended that SLTs work collaboratively with their tracheostomy multidisciplinary team (MDT), including medical, physiotherapy, and nursing colleagues, when using this checklist. Multiple trainers may be identified for teaching tracheal suctioning. At least one trainer should be someone who currently regularly practices tracheal suctioning. It is recommended that at least one nominated trainer within the tracheostomy MDT be identified as an assessor (i.e., the person responsible for recognising SLT competence and providing sign-off). The purpose of this skill development is to assist SLT management of the tracheostomy, but it is not intended to replace the role of other MDT members in the weaning process.

Adult Tracheal Suctioning Competency Checklist for Speech- language Therapists (SLT)

Trainee's name:		**Trainee's Profession:**	
Trainer 1 name:		Trainer's Profession:	
Trainer 2 name: (where applicable)		Trainer's Profession:	
Trainer 3 name: (where applicable)		Trainer's Profession:	

Verbal Discussion	**Meets Competency Y/N**
Preparation	
Seeks out and completes non-patient local training opportunities (e.g. observing PT/nurse completing suctioning, local online training, suctioning practice on trachy mannequin, handling suctioning equipment)	
Infection Control	
Discusses and demonstrates understanding of infection control and safety issues involved *(i.e., aerosol-generating procedure)*	
Aware of how many times a suction catheter can be used	
Aware of how to dispose of all used equipment safely, adhering to infection control guidelines	
Equipment	
Aware of all suction equipment required	
Discusses the calculation for the correct catheter size	
Aware of when suction canisters should be replaced	
Suctioning	
Discusses strategies that promote secretion clearance	
Aware of appropriate depth for routine suctioning	
Aware of how long the suctioning process should take (from insertion to	

removal)	
Understands indications for tracheal suctioning	
Understands contraindications for tracheal suctioning	
Understands precautions for tracheal suctioning	
Understands limitations of tracheal suctioning	
Understands the side effects, complications or hazards seen post-tracheal suctioning	
Aware of local pre-oxygenation requirements	
Able to accurately describe the tracheal suction technique	
Patient Assessment and Treatment	
Able to discuss the risks of suctioning for patients	
Able to discuss the rationale/indication for suctioning	
Aware of potential impacts of suctioning on respiration and able to comment on respiratory presentation post-suctioning	
Aware of signs of infection and possible need for medical review	
Identifies potential emergency situations and is able to describe appropriate interventions/responses to those situations	
Cultural Safety, Te Tiriti Responsiveness and Whānau-centred Practice	
Describes culturally safe engagement and communication prior to suctioning (e.g., whakawhanaungatanga, preferred name/pronunciation, plain language, checking communication needs).	
Describes consent and information-sharing that supports patient choice and whānau involvement as appropriate, including privacy preferences and shared decision-making.	
Identifies relevant tikanga, equity and wairuatanga considerations, and describes how to access local Māori health/cultural safety guidance where available; explains how dignity will be protected throughout the procedure.	
Policies	
Is familiar with local policy/policies pertaining to tracheal suctioning	

Skills Updating	
Recognises requirement to practice skills frequently and update knowledge and skills as appropriate (e.g. through peer review), including reflective practice on cultural safety, equity impacts, and patient/whānau experience	

Observed Practice	Meets Competency Y/N and assessor initials		
Bedside equipment is appropriately selected and prepared for suctioning a patient with a tracheostomy			
All the procedures were explained to the patient prior to carrying them out			
Communication, consent and whānau involvement were checked and supported in a culturally safe way (including patient preferences about who is present and how information is shared)			
Open suctioning technique carried out correctly (as per local policies and procedures – e.g., Lippincott® Procedure) on up to three observations	1.	2.	3.
Correct disposal of all equipment			
Patient monitored during and post-suctioning			
Appropriate documentation/handover to the nurse looking after the patient of the intervention carried out and the result of suctioning			

Skill Validation final sign off:			
Trainee Signature:		**Date:**	
Trainer 1 Signature:		**Date:**	
Trainer 2 Signature (where applicable)		**Date:**	
Trainer 3 Signature (where applicable)		**Date:**	