## **Abstract**

The primary objective of the current study was to attempt to establish whether there is a need for a dysphagia training programme for nurses and speech-language therapists working with acute tracheostomised patients in critical care units in South Africa. The research design that was adopted for this project was within a mixed methods approach framework. An exploratory descriptive survey design using semi-structured face-to-face interviews was used. The final sample consisted of interviews with 20 speech-language therapists from eight different hospitals with critical care facilities and 12 nurses from four different hospitals with such facilities. Data from the close ended questions were analysed using descriptive statistics, while remaining data from open ended questions were thematically analysed and the constant comparison method was applied.

The data demonstrated that all speech-language therapists and 10 out of the 12 nurses were in agreement that there was a need for a dysphagia training programme for nurses in critical care for tracheostomised patients presenting with dysphagia. An important and unexpected result of this study was that speech-language therapists themselves required additional training in this area. The data demonstrated that the majority of speech-language therapists and nurses were of the view that they had received minimal theoretical and practical hours on tracheostomy screening, assessment and management at an undergraduate level. Overall, the results of the current study suggested varied practices in the screening, assessment and management of tracheostomy and dysphagia, particularly with regard to blue dye testing, suctioning protocols and cuff inflation and deflation protocols.

The research significance and implications of the study included the need to improve undergraduate training for speech-language therapists and nurses in the area of dysphagia and tracheostomy, to alert professional training bodies regarding institution of additional licensing and qualifications for speech-language therapists and nurses in the area of dysphagia and tracheostomy, and to thereby improve the situation of clinicians practising in dysphagia and tracheostomy management through the development of guidelines, protocols and position papers. An important implication of this research is that it established the need for a dysphagia training programme for both speech-language therapists and nurses in critical care in dysphagia and tracheostomy, and thereby monitoring the efficacy of this programme and measuring/monitoring the outcomes of multidisciplinary teamwork in the assessment and management of dysphagia and tracheostomy in critical care.

**Key Words:** critical care, dysphagia, tracheostomy, nurses, speech-language therapists, multidisciplinary team, evidence based practice.