





- Only staff trained in the person's Oxygen Therapy Support Plan and using Oxygen concentrators/cylinders by an Appropriately Qualified Health Professional (AQHP) can perform this procedure.
- This procedure is a guide only and may not be appropriate in all circumstances. Therefore, instructions from an AQHP must always be obtained and followed.
- This procedure should be read with the [NDIS LWB 5600 High Intensity Daily Personal Activities – Procedure](#), [NDIS LWB 5501 Health and Wellbeing – Procedure](#), [Medication Administration Procedures](#) and in consultation with the person or their oxygen therapy support plan.

This information is intended as a guide only and may not be appropriate in all circumstances – instructions from an AQHP should be followed.

- Only an AQHP can document specific instructions relating to the administration of Oxygen in an Oxygen Therapy Support Plan/Protocol. However, staff can complete the details relating to the instructions for Emergency Response, including:
  - Details of the health professional responsible for oxygen therapy.
  - Contact numbers for the electricity supplier for information on how long any power outage may last.
  - Registration for priority service with phone and electricity providers. This will ensure services are reinstated first whenever there is a power outage.
  - The location of a torch for use in blackouts (staff must not use candles or a naked flame).
  - Contact name and number for the oxygen concentrator supplier.

Oxygen Therapy Support Procedure	
	<b>Check</b>
<ul style="list-style-type: none"> <li>• Check the person's Oxygen Therapy Support Plan.</li> <li>• Explain the procedure to the person and seek their consent.</li> </ul>	
	<b>Support</b>
<p><b>Because oxygen cylinders may explode, if there is a fire near a cylinder, the area should be evacuated to a minimum of 100 metres.</b></p> <p><b>Disability Support Worker (DSW)</b></p> <ul style="list-style-type: none"> <li>• If the person using oxygen therapy is a smoker, DSWs are to support them using nicotine replacement therapy (patches).</li> <li>• Do not smoke or allow others to smoke within 3 metres of a person using oxygen.</li> </ul>	

- Do not use electrical equipment that may spark near oxygen, e.g. vacuum cleaners, electric razors, hair dryers, or drills.
- Keep oxygen at least 3 metres away from gas stoves, appliances, candles, matches, lighted fireplaces, BBQs, open flames, and heat sources.
- Do not use extension cords, power boards or double adaptors with an oxygen concentrator.
- Oxygen equipment is at the most risk from oil and grease, so keep greasy hands, rags and gloves away from any part of the cylinder and fittings.
- Avoid using aerosols near oxygen or equipment.
- Keep a working fire extinguisher within easy reach. Ensure the fire extinguisher is suitable for oxygen and electrical equipment use. The local fire department will be able to advise.
- If oxygen has been prescribed 24 hours daily, ensure a backup oxygen cylinder is always available.
- It is safe to use oil heaters, air conditioners and electric blankets. These should be maintained in good working order.
- An oxygen concentrator is an electrical appliance; this shouldn't be placed in the bathroom. Instead, use extension tubing and nasal prongs while the person is bathing or showering.
- Supervise children around oxygen equipment, ensuring they do not alter the flow rate.
- Secure cylinders to prevent them from falling. Do not roll cylinders along the ground when moving them.

### **Mandatory Signage for Gas Cylinder**

If oxygen cylinders are used or stored on any premises, there are applicable state or territory WHS Regulations plus relevant standards like AS 1319 *Safety Signs for the Occupational Environment*, which must be met.

### **Disability Support Leader<sup>1</sup> (DSL)**

- If signage is required, the DSL will contact Spotless to arrange the signage by phoning or logging the request via the [Maintenance app](#).
  - Signage must be permanently fixed at eye level at the site's entrance.
  - There should be enough natural or artificial light for people to read the signage.
  - Moveable objects, such as an open window or door, plants or furniture, must not obstruct the signage.
  - Signage must be kept clean and well-maintained.

<sup>1 1 1</sup> All references to Disability Support Leader (DSL), includes all Frontline Leadership roles, such as House Supervisor.

**Oxygen Concentrator****Disability Support Worker**

- Use only the oxygen equipment recommended by AQHP.
- Read the instruction manual that is supplied with the oxygen concentrator. Keep the manual in a safe place for future reference.
- Actively involve the person in their support, as outlined in their plan, and to their chosen level.
- Excess tubing can be a trip hazard for the person and others. Ensure any excess tubing is rolled up when not in use.
- If the person needs to go to the bathroom at night, ensure they have a well-lit path. For example, fluorescent insulation tape placed at intervals along the oxygen tubing may make it more visible at night and prevent tripping.
- The oxygen concentrator is driven by electricity and concentrates oxygen from the air through a filter. It does not breathe for the person or push oxygen into the lungs but allows the person to inhale a higher level of oxygen than regular air.
- The concentrator can be moved around the house to other power points.
- The oxygen concentrator should always be in a well-ventilated area, away from curtains, drapes or clothing. In addition, the cord should have enough slack to prevent accidental disconnection.
- A sticker should be placed on the concentrator alerting that a 15cm clearance from the wall is required for ventilation.
- The oxygen concentrator makes a loud noise that some people find distressing. Place the concentrator in a separate room and use longer tubing to minimise the noise if possible.
- If placing a concentrator near a window, ensure curtains do not stop the concentrator from drawing in the air needed.
- If transporting the machine in a vehicle, keep the concentrator upright and secure it with the rear seatbelt.
- Inform the electricity supplier that the person relies on electricity for the Oxygen Concentrator. This will ensure that power is restored to the house as a priority in the event of a power failure.
- Oxygen concentrators are heavy, weighing 21-26 kg. Therefore, all risk management strategies must be observed if they are to be moved or wheeled around the home.
- Do not place the Oxygen Concentrator on the tubing when moving it around the house.
- Oxygen tubing should be replaced if it becomes dirty, damaged, or badly kinked.
- Follow the manufacturer's instructions for regular washing of the small filter on the back of the machine.

**Oxygen Cylinders****Disability Support Worker**

- Store oxygen cylinders in a cool, ventilated room.
- Do not cover cylinders with cloth or plastic.
- Do not store full and empty cylinders together.
- When a cylinder is almost empty, close the valve and mark the cylinder as empty.
- Handle cylinders carefully to avoid dropping.
- Do not permit oxygen use near an open flame.
- Keep oxygen equipment and the delivery point at least 3 metres from radiators or other heat sources.
- Do not permit smoking near oxygen equipment.
- Do not allow alcoholic solutions, oil or grease to come in contact with oxygen supply devices.
- Use the correct regulator and pressure gauge.
- Before connecting the regulator, open the cylinder momentarily, with the valve pointing away, to remove any dust in the outlet.
- Turn off the oxygen cylinder when not in use.
- Place orders for replacement cylinders in adequate time, assessing the needs for weekends and public holidays.

**Preparing For An Outing****Disability Support Worker:**

- Ensure you are familiar with using the equipment and changing cylinders before arranging an outing.
- Calculate how long a portable cylinder may last to ensure an adequate supply is available for the outing.
- Think about the outing and where the person is going – is there parking nearby, stairs to climb or a lift nearby etc.? This could impact the amount of oxygen required due to the level of exertion needed for the person.

**Transporting a portable oxygen cylinder or concentrator****Disability Support Worker:**

- Transport oxygen equipment as per the suppliers' recommendations.
- Ensure the concentrator or oxygen cylinders are carried to the vehicle using an allocated carry case or a trolley.
- When transporting a concentrator in a car, ensure it is upright and secured by a seat belt or upright in the boot.

- Use the safest way to transport a loose cylinder in a car by placing it on the floor of the rear passenger seat or on the floor of the front passenger seat if there is no back seat to prevent the equipment from becoming a projectile if the car is involved in an accident.
- Ensure there is adequate tubing to allow unrestricted movement in the vehicle.
- A portable concentrator may be able to be plugged into the lighter socket for power and should be strapped to the front seat or secured under the dashboard.
- The cylinder must be secured safely with the carry bag strap or using a seat belt. The cylinder may be laid down if it has a conserving device attached. Otherwise, it must be kept upright.
- Keep a window slightly open to prevent a build-up of oxygen and aid airflow when transporting compressed oxygen.
- When taking out more than one cylinder, take the correct tools needed to attach the flow regulator or the conserving device to the full cylinder along with the valve handle to turn the cylinder on and off.
- Take spare batteries for any battery-powered equipment in case the battery runs out.
- Always check the cylinder and regulator for any leaks and physical damage sustained during transportation before they are used.

**Nasal Prongs/Face Mask**

Oxygen accessories play a vital role in the comfort and delivery of oxygen therapy.

**Disability Support Worker**

- Always ensure a spare pair of nasal prongs/face mask and tubing are available.
- Clean the ends of the nasal prongs/face mask at least weekly using soapy water and a soft cloth. This may need to be done more frequently for people with increased nasal secretions or an infection.
- If the person develops a cold or respiratory infection, replace the nasal prongs once symptoms have passed.
- Wash the tips of the prongs only, not the whole tubing, as mould can grow if the tubing becomes wet.
- Replace nasal prongs/face masks monthly or sooner if required, as they can become brittle.
- Wipe the outside of the oxygen tubing if necessary but don't immerse the tubing in water. Replace the tubing if it becomes soiled, damaged or badly kinked.

**Skin Care**

Irritation from nasal prongs may occur around the nostrils or behind the ears.

### Disability Support Worker

- Apply a water-based lubricant such as “K-Y jelly” or “Nozoil” to just inside the nostrils two or three times a day or according to the person’s preference, when necessary. These products are available from pharmacies. Nozoil is a sesame seed-based oil high in Vitamin E and can assist with dry and crusting nasal passages. Although a vegetable oil, Nozoil is not flammable when used with oxygen products.
- Do not use petroleum jelly (e.g. Vaseline) or lanolin-based lubricants. These may be flammable and can cause irritation and cause the nasal prongs to deteriorate.
- Assist the person in preventing pressure areas by using differently shaped nasal prongs that may be available to aid a better fit. Be aware that alternating between the flared tip and standard nasal prongs can help to prevent pressure areas. Ask the oxygen supplier or medical practitioner for advice.
- If tubing is rubbing behind the ears or on the cheeks, use soft foam pads (available from your oxygen supplier), cotton wool or gauze to wrap around the tubing.

### Disability Support Leader

- If the person using oxygen therapy is a smoker and continues smoking, the Disability Support Leader will work with the GP and/or AQHP to develop a safety plan to reduce risk.
- Make sure there are smoke detectors in the home, especially outside the person’s bedroom and the worker/carers’ bedroom
- Ensure the safe use of an oxygen concentrator is included in the person’s [NDIS LWB 5531 Personal Care - Plan](#) regarding bathing and showering requirements.
- If an oxygen cylinder is used, inform the Fire Department that compressed oxygen is stored at the residence.
- Ensure that an “Oxygen in Use” sign is displayed in a visible area near the house’s entrance per the requirements listed above in **Mandatory Signage for Gas Cylinders**. This will alert guests and emergency services.
- Ask the oxygen supplier for instructions on safely using and storing the equipment and ensure this information is shared with all staff.
- Undertake a risk assessment to support safely moving the Oxygen Concentrator around the house.
- Ensure the machine is serviced regularly and cleaned per the suppliers’ recommendations. Note the next service date in the house diary.



### Report

- Document Oxygen Therapy support in the daily shift Progress Notes.

- Report immediately any problems with the oxygen equipment to the supplier and the Disability Support Leader or On Call.
- Report any concerns or issues related to Oxygen Therapy support immediately to the Disability Support Leader or On-call.

## For Further Guidance and Advice

Please contact the AQHP who developed the person's HIDPA Oxygen Therapy Support Plan/Protocol.