 <p>Winnipeg Regional Health Authority Office régional de la santé de Winnipeg Caring for Health À l'écoute de notre santé</p> <p>Home Care Operational Directive</p>	<p>Title:</p> <p style="text-align: center;">COMPRESSOR FOR LARGE VOLUME NEBULIZER</p>	
	<p>Approval Signature:</p> <p style="text-align: center;"><i>K. Klaasen</i></p>	
	<p>Date:</p> <p style="text-align: center;">January 10, 2018</p>	<p>Supersedes:</p>

COMPRESSOR FOR LARGE VOLUME NEBULIZER (COLD POT HUMIDITY THERAPY)

1.0 PURPOSE OF DOCUMENT

- To define procedures for approval, ordering, monitoring and retrieval of compressors.
- To define approval and ordering procedure for supplies that are required to use the compressor.
- Identify safety considerations/indications for use of the compressor

2.0 BACKGROUND

According to the **Manitoba Health Policy HCS 207.9**, Clients of the Manitoba Home Care Program (MHCP) may have access to home care equipment and some supplies to support their remaining in the community. Individuals who are not clients of the MHCP may have access to equipment, but not supplies. Consumables required to use the equipment are also provided.

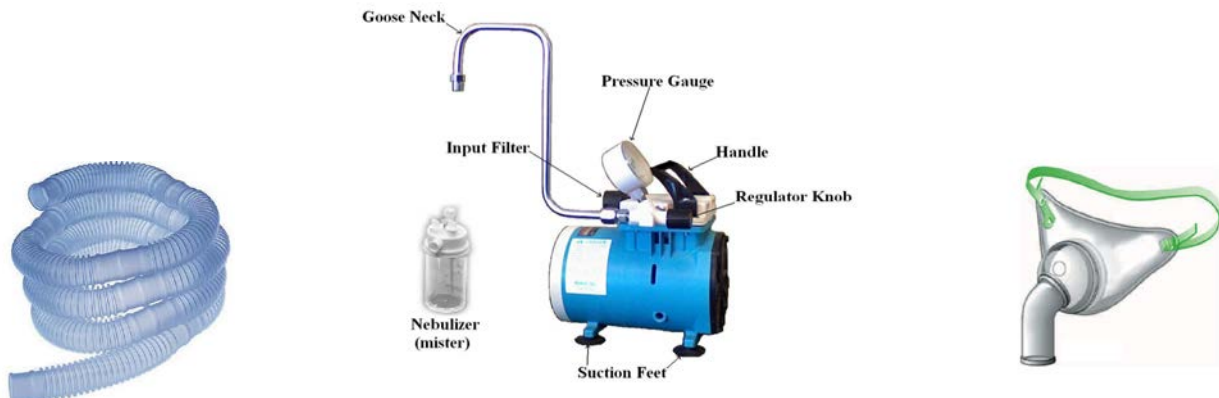
3.0 DEFINITIONS

Air compressor: uses electrical energy to provide pressurized air to run the nebulizer

Large Volume Compressors: used by clients with tracheostomies and laryngectomies to provide humidity in order to keep their secretions moist and improves client's ability to clear mucous from their airway by expectorating or by suction. The compressor and nebulizer work together to aerosolize distilled water and provide a fine mist through attached corrugated tubing and mask to the client's airway.

Large volume nebulizer bottle (may also be referred to as a cold pot): produces a mist (aerosol consisting of droplets of various sizes) that assist in decreasing the viscosity of secretions.

Tubing and masks: direct the aerosol/mist produced to the client's airway



4.0 OPERATIONAL DIRECTIVE

4.1 ELIGIBILITY

- Any client open to WRHA Home Care Program (HCP) or approved by HCP Consultant as an “equipment only” client and according to Home Care equipment guidelines.
- Clients in private or group homes or other community living environments that require home care equipment and/or supplies to remain in the community.
- Clients not open to WRHA Home Care Program may have access to supplies required to operate HCP issued equipment.
- Clients are only permitted one of any type of equipment.
- Clients are not eligible for equipment if the client:
 - Resides in another Regional Health Authority or First Nations Community;
 - Is a child under 18 in care of Child and Family Services;
 - Resides in a Personal Care Home;
 - Requires equipment for workplaces, schools or a day program;
 - Requests equipment for a second home or cottage if client already has this equipment for primary residence.

Refer to Assessment, Ordering, Monitoring and Retrieval of Home Care Issued Equipment and Supplies guidelines for additional information on eligibility

http://home.wrha.mb.ca/prog/homecare/files/eq_Request-Monitor-Retr_GL.pdf

4.2 GENERAL GUIDELINES

- Indications:
 - to prevent drying and irritation of the respiratory mucosa
 - to aid in the removal of thick and viscous secretions that may obstruct the air passages
- For clients with existing Home Care Services and who require the equipment, the Case Coordinator (CC) or Home Care Nurse (HCN) will order the equipment consumables as needed.
- Compressors are to be returned when:
 - No longer required/used by client.
 - If client is moving into a Personal Care Home or outside of WRHA.
- For clients who become independent with care and still require the equipment, the CC, Respiratory Therapist (RT) or HCN will contact the Home Care Program Consultant (PC) to advise of equipment only needs per Equipment guidelines and instruct clients in how to order equipment consumables, return equipment or request repairs by contacting Logistics. Staff should submit a WRHA Community Script Order form with annual maximum limits to Logistics. Client should be provided with a self-ordering letter (link once on INSITE)

http://home.wrha.mb.ca/prog/homecare/files/form_Logistics_November2017.pdf

http://home.wrha.mb.ca/prog/homecare/files/HomeCare_catalogue_aug2017.pdf

4.3 EQUIPMENT CONSUMABLES

Supplies required for using this equipment include:

- 313106 Cold Air Disposable (cold pots)
- 221321 Tubing Corrugated Segmented ID 22 mm
- One of the following, depending on assessed need:
 - 313093 Mask, Trach
 - 313082 Face Mask, Adult
 - 286489 Face Mask, Pediatric

Supplies used routinely should be changed monthly. Maximum ordering limits are: 3 cold pots, 3 masks and 1 box of tubing every 3 months. Any concerns with reordering limits will be redirected to client's CC or to WRHA Home Care Respiratory Therapy Clinical Resource.

Supplies are provided to all clients in WRHA who are using equipment provided by Home Care

5.0 ASSESSMENT, ORDERING PROCEDURES AND RESPONSIBILITIES

5.1 Case Coordinator (CC) including Community Case Coordinator (CCC) or Hospital Based Case Coordinator (HBCC):

1. If request for equipment is received by the CC, the CC should ensure that therapy is indicated by respiratory therapy. If needed, a consult can be made to the WRHA Home Care Respiratory Therapy Clinical Resource.
2. CC completes a WRHA Community Care – Script/Order form and faxes to Logistics. CC must document equipment.
3. Contact Logistics if equipment requires repair
4. CC will review equipment use at each annual visit and provide new WRHA Community Script Order to Logistics
5. Contact Logistics to arrange equipment pick-up when client no longer requires the use of the Nebulizer/Cold Pot Humidity Therapy, or recommend that client/family return Large Volume Compressor to MDA at 7-1715 St. James Street.
6. If client is to be discharged from Home Care and still requires equipment, the CC will contact the Home Care Program Consultant to advise that the client will be equipment only. CC will instruct clients on how to order supplies, return equipment or request repairs by contacting Logistics. CC will submit a WRHA Community Script Order form with annual maximum limits to Program Consultant. Program Consultant will send a self-ordering letter to client and forward Community Script to Logistics.

5.2 Home Care Direct Service Nurse:

1. Provide assistance with compressor with nebulizer/cold pot for clients who are unable to be independent. Guideline and procedure are available in the Nursing Procedure Manual Section 5.9.2 http://home.wrha.mb.ca/prog/homecare/files/npm_5.9.2_CompressorsNebulizers.pdf
2. If client becomes independent with care and still requires equipment, the Nurse will contact the Home Care Program Consultant to advise that client will be equipment only. HCN will instruct clients in how to order supplies, return equipment or request repairs by contacting Logistics. Self-ordering letter should be provided. HCN will submit a WRHA Community Script Order form with annual maximum limits to Logistics

5.3 Primary Care Providers (physicians, physician assistants, nurse practitioners)

1. Requests from physicians for Nebulizer/Cold Pot Humidity Therapy for clients not open to WRHA Home Care should be forwarded to Respiratory Therapy Clinical Resource (from Program Consultant or Logistics) for assessment and approval. Respiratory Therapy Clinical Resource will contact primary care providers if equipment is not approved

5.4 Direct Service Staff (DSS)

1. Report any damaged equipment and/or safety concerns regarding client's Nebulizer/Cold Pot Humidity Therapy to Resource Coordinator (RC) and/or Nursing Resource Coordinator (NRC).
2. Cleaning equipment procedure as per delegated tasks

5.5 Resource Coordinator (RC)/ Scheduling Clerks (SC)

1. Communicate any concerns received regarding client's Nebulizer/Cold Pot Humidity Therapy to the CC and DSS in a timely manner.
2. Ensure proper comments and coding of tasks are documented in Procura to reflect the delegated task to ensure that only trained DSS get assigned to the task.

5.6 Nursing Resource Coordinator (NRC) for Nursing Coordinated Clients

1. If request for equipment is received by NRC, the NRC should ensure that therapy is indicated by respiratory therapy. If needed, a consult can be made to the WRHA Home Care Respiratory Therapy Clinical Resource.
2. NRC completes a WRHA Community Care-Script/Order form and faxes to Logistics. Ensure that equipment is documented.
3. Contact Logistics if equipment require repair
4. Contact Logistics to arrange equipment pick-up when client no longer requires the use of the Nebulizer/Cold Pot Humidity Therapy, or recommend that client/family return Large Volume Compressor to MDA at 7-1715 St. James Street.
5. If client becomes independent with care and still requires equipment, the NRC will contact the Home Care Program Consultant to advise that client will be equipment only. NRC will instruct clients in how to order supplies, return equipment or request repairs. NRC will submit a WRHA Community Script Order form with annual maximum limits to Program Consultant .Program Consultant will send a self-ordering letter to client and forward Community Script to Logistics.

5.7 Team Manager (TM)

1. Assist RC / NRC and/or CC problem solve safety concerns and/or situations where client/family/caregiver refuse to use recommended equipment or refuse to return equipment.

5.8 Respiratory Therapy Clinical Resource or Registered Respiratory Therapist (RRT):

1. Review and approve requests for equipment.
2. Provide extra support and knowledge about humidity therapy
3. Provided further education about available resources to clients, caregivers and /or nursing should it be required
4. May provide assessment to ensure therapy is appropriate

5.9 Program Consultant (PC)

1. Clients that are Equipment only will be called every two years by AY3 to determine if equipment is being used and/or requires repair.
2. Contact Logistics to arrange equipment pick-up when client no longer requires the use of the Nebulizer/Cold Pot Humidity Therapy, or recommend that client/family return Large Volume Compressor to MDA at 7-1715 St. James Street.
3. Notify RRT to arrange for reassessment if clinical concerns are identified.

5.10 Client/Family/Caregiver

1. Contact CC if assigned or Logistics if equipment requires repairs or is no longer required.
2. Notify CC, RRT or another health care provider if there is a significant change in medical status that may impact use of the Nebulizer/Cold Pot Humidity Therapy.
3. Contact WRHA Logistics, MDA or Home Care Program Consultant if there is no CC involved (therapy or equipment only clients) to request equipment repair, maintenance and/or equipment pick-up.)
4. Ensure equipment on loan is only used with client as intended and not abused.

5.11 WRHA Logistics

1. Forward requests for equipment to PC or Respiratory Therapist Clinical Resource for approval.
2. If self-ordering clients are attempting to order above the maximum limit of supplies then CCC, PC or Respiratory Therapist Clinical Resource should be notified and orders not filled.

6.0 REFERENCES

Assessment, Ordering, Monitoring and Retrieval of Home Care Issued Equipment and Supplies.
http://home.wrha.mb.ca/prog/homecare/files/eq_Request-Monitor-Retr_GL.pdf

Manitoba Health Policy HCS 207.9 HOME CARE PROGRAM ADMINISTRATIVE MANUAL: Equipment & Supplies Sept. 2012

WRHA Home Care Community Script/Order <http://home.wrha.mb.ca/prog/homecare/supplies.php>

WRHA Home Care Community Script/Order Completion Guidelines
http://home.wrha.mb.ca/prog/homecare/files/form_Logistics_Completion_Guidelines.pdf

Self-Ordering Letter for Supplies (not yet on INSITE)

Client information <http://www.mda.gov.mb.ca/pdf/equipment/instructions-for-silent-air-compressor.pdf>

Home Care Nursing Procedure Manual Section 5.9.2
http://home.wrha.mb.ca/prog/homecare/files/npm_5.9.2_CompressorsNebulizers.pdf



7.0 CONTACTS

WRHA Home Care Clinical Respiratory Lead (204) 612-0715

WRHA Respiratory Program (204) 940 6690

Program Consultant for Home Care Equipment & Supplies (204) 223-3044

WRHA Logistics (204) 926-6050

After Hours Home Care (204) 788-8831