

# Providing More Choices for Those Who Depend on Ventilators

## Offrir plus de choix aux personnes nécessitant une ventilation assistée

by CANADIAN HEALTH SERVICES RESEARCH FOUNDATION

### Abstract

The Winnipeg Regional Health Authority (WRHA) is building capacity in community care for those who depend on ventilators. Hoping to reduce pressures in acute and long-term care, increase the housing choices for those dependent on ventilators and improve the transition from one care sector to another, the WRHA, working in partnership with a local housing company, has designed and built unique living spaces tailored to the needs of ventilator-dependent clients. The project has caused a fundamental shift in thinking about the accommodation needs of people with complex medical conditions. It is also changing the WRHA's approach to care management across sectors and the role of allied health providers. This innovative initiative was recently featured in Promising Practices in Research Use, a series produced by the Canadian Health Services Research Foundation highlighting organizations that have invested their time, energy and resources to improve their ability to use research in the delivery of health services. Additional issues from the series can be found at [http://www.chsrf.ca/promising/index\\_e.php](http://www.chsrf.ca/promising/index_e.php).

### Résumé

L'Office régional de la santé de Winnipeg (ORSW) renforce les capacités en matière de soins communautaires des patients nécessitant une ventilation assistée. Dans l'espoir de réduire les pressions exercées sur les soins de courte et de longue durée, d'offrir un plus grand choix de logements aux patients nécessitant une ventilation assistée et d'améliorer la transition d'un service de santé à un autre, l'ORSW travaille en partenariat avec un organisme local de gestion de logements afin de concevoir et de créer des surfaces habitables adaptées aux besoins des personnes nécessitant

une ventilation assistée. Le projet a entraîné un changement fondamental dans la façon de concevoir les besoins en matière d'accommodations des patients dont l'état pathologique est complexe. Le projet modifie également la gestion de l'ORSW relativement aux soins prodigués par divers secteurs et sa perception du rôle des fournisseurs de services paramédicaux. Récemment, cette initiative novatrice a fait l'objet d'un numéro de *Pratiques prometteuses dans l'utilisation de la recherche*, publication de la Fondation canadienne de la recherche, qui présente des organismes qui ont investi temps, énergie et ressources pour améliorer leur capacité à utiliser la recherche dans la prestation de services de santé. Il est possible de consulter d'autres numéros au [http://www.chsrf.ca/pratiques/index\\_f.php](http://www.chsrf.ca/pratiques/index_f.php).

### Key Messages

- The Winnipeg Regional Health Authority (WRHA) is building capacity in community care for those who depend on ventilators, a group with varied and complex medical issues and limited living options.
- Informed by evidence about successful models of community care for ventilator-dependent people, the WRHA's project aims to reduce pressures in acute and long-term care, increase the housing choices for those dependent on ventilators and improve the transition from one care sector to another.
- The project is changing the organization's thinking about care management across sectors and the role of allied health providers.

The Winnipeg Regional Health Authority (WRHA) is dealing with several interrelated pressures common to healthcare organizations, including the need to reduce wait times and to improve coordination and continuity of care between care sectors. One specific challenge facing the WRHA is to address the needs of the growing number of people, from both the adult and paediatric populations, who depend on ventilators – machines that help them breathe.

Helen Clark is the WRHA's regional director of respiratory therapy and a fellow of the Executive Training for Research Application (EXTRA) program. She says that because of their complex and varied needs, ventilator-dependent clients have few housing options available to them. "Some people try to manage at home, even when they no longer should, or go into long-term care, which many would prefer to avoid," explains Clark. "Others remain in acute care, which puts additional strain in that area."

The WRHA recognized the need to create community-based alternatives for those who depend on ventilators. As a first step, Clark and her team conducted an

evidence review that examined the experiences of other jurisdictions. The evidence showed that the successful community housing models allowed people to live somewhat independently but grouped them together to ensure efficient use of resources. The successful models also involved respiratory therapists – experts in cardio-pulmonary assessment, airway management, monitoring and support services.

From the evidence, it was determined that ventilator-dependent clients could be safely managed in community settings if proper support was in place. This meant that WRHA respiratory therapists – who traditionally operated solely in acute care – could transfer their knowledge and apply it to many roles outside acute care, including discharge planning and case management in the community. This approach, combined with clinical support and education for clients, their families and caregivers, could improve continuity of care and decrease emergency department visits and hospital admissions.

With the support of Ten Ten Sinclair Housing Inc., a local organization that manages housing units for disabled and non-disabled tenants, eight suites were developed for ventilator-dependent clients. Full-time attendant care was part of the package, which included the services of a case coordinator and a staff respiratory therapist.

The first resident arrived in the spring of 2008 from an acute care setting. Others from long-term care settings are currently lined up for a trial residency. “Even moving a small number of people from an acute or long-term care setting can help relieve pressure, not to mention improve the lives of those in the new setting,” says Neil Johnston, regional manager of acute and community respiratory therapy.

Based on the success of this initial project, five beds are now being planned for ventilator-dependent children who previously had no option other than an acute care setting. The project has also caused a fundamental shift in thinking about living options for people with complex medical conditions; for example, Ten Ten Sinclair Housing Inc. has a new perspective on the types of facilities it may build in the future.

Clark says that the evidence review helped in many ways, including recognizing the full scope of the issue and identifying potential solutions. “Very importantly,” she adds, “it helped us develop a strong business case for funding the project.” And for the WRHA, the project has not only eased pressure on acute and long-term care, but has also shown how allied health disciplines can be part of the solution to system issues. “It’s helped break down the boundaries,” explains Johnston, “so that we are more efficient, seamless and respectful in moving people through care transitions.”

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