Logo

Description automatically generatedSub-specialty Group Resource Plan

## Sub-specialty Group

## (i.e.: Asthma/COPD)

Chronic respiratory failure

## Vision Statement:

To provide proactive and seamless care for chronic respiratory failure patients (including patients with neuromuscular disease, chronic tracheostomy, chronic hypoventilatory syndromes, and chronic ventilatory failure from obstructive/restrictive lung disease) that spans inpatient, clinic, and home care.

## Estimate of **Additional/Specialized** Resource Needs

* Equipment

Develop workflows that support seamless integration with DME companies

Workflows for adherence report querying and documentation (e.g. to support RAD qual)

Ability to do mask fits in clinic

Proactive outreach to high-risk post-discharge via PDNs and/or tele-pulmonary

Transcutaneous CO2 monitoring equipment

* Personnel – Physicians

May need additional pulmonary physician FTE

Thoracic surgery – diaphragm pacing

ENT & IP—hypoglossal nerve stimulation; tracheostomy support

* Personnel – Nurses

Expanded PDN program, including dedicated MA support to coordinate with DME companies; educator role (managing HMVs). Perhaps DME lead

Nutritionist, Pharmacy/nursing support for GLP1 therapy (pre-auth, monitoring)

Patient navigator to organize multiple visits for out of area patients; post-discharge care

## Required Space

* Offices

Ideally would build to substantial tele presence as much of key work (both initially and monitoring) can be done remotely and across the system.

* Patient Rooms
* Waiting Room

## Patient Volumes

Up to 1600 patients per year (in Utah, based on ICD codes)

## Accreditations/Certifications

Not really any for chronic respiratory failure per se

There are certifications for related neurology areas (Muscular dystrophy association, ALS association), however we do not currently have these programs and the U of U does

\*Review for content

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## Other

Integration/organization/protocols for PDNs at other sites of care for these patients (rehab, neurology clinic,…)

Improved identification of patients with chronic respiratory failure – particularly during acute care - routing to PDN (IMED), via telepulm system-wide?

Integration with patients at LTAC/SNF/rehab