

Respiratory Home Care/Rehabilitation (RSPT 1141)



Credit: 1 semester credit hour (1 hour lecture, 1 hour lab)

Prerequisite/Co-requisite: RSPT: 1113, RSPT: 1207, RSPT: 1261. RSPT: 1262, RSPT: 1325, RSPT: 1329, RSPT: 1331. RSPT: 1335, RSPT: 1360

Course Description

A study of respiratory home care/rehabilitation equipment, procedures, and patient education

Required Textbook and Materials

Respiratory Care in Alternate Sites, by Kenneth A Wyka
ISBN# 978-0-8273-7679-3

Course Objectives (with applicable SCANS skills after each)

Upon completion of this course, the student will be able to:

1. Define Health Care reform and Its Impact on Respiratory Care
2. List Past and Current Concepts of Pulmonary Rehabilitation
3. Identify Criteria for Selecting Patients for Pulmonary Rehabilitation
4. List Key Elements of a Pulmonary Rehabilitation Program
5. Measure and Assess Outcomes of Pulmonary Rehabilitation
6. Identify Reimbursement for Pulmonary Rehabilitation
7. Explain Past and Current Changes in Respiratory Home Care
8. Created a flow sheet with Patient Selection and Discharge Planning
9. Identify and explain Home respiratory Equipment and Therapeutics
10. Explain the Delivery of Care - Protocols and Procedures
11. Differentiate between Home care Accreditation and State Licensing Requirements
12. Explain Reimbursement for Respiratory Home Care
13. Differentiate between Subacute Care at Skilled Nursing and Long-term Care facilities
14. Identify Clinical and Regulatory Aspects of Subacute Care
15. Explain the Aspects of Patient and Family Education

Course Outline

Upon completion of this course, the student will be able to:

- A. Health Care Reform and Its Impact on Respiratory Care
 1. Major reasons for health-care reform.
 2. Hospital restructuring
 3. Managed care
 4. Managed-care organizations.
 5. Integrated health-care delivery and seamless patient care.
 6. Patient-centered care - effects respiratory care
 7. Alternate respiratory care sites

8. Multi-competency and cross-training
- B. Past and Current Concepts of Pulmonary Rehabilitation
 1. Pulmonary rehabilitation.
 2. Cardiac rehabilitation.
 3. Interdependence of pulmonary function, cardiovascular status, and physical conditioning.
 4. Pulmonary rehabilitation principal objectives.
 5. Health-care reform
- C. Criteria for Selecting Patients for Pulmonary Rehabilitation
 1. Pulmonary rehabilitation benefits
 2. Patient evaluation.
 3. Three testing regimens in evaluating patients for pulmonary rehabilitation.
 4. Cardiopulmonary exercise testing
 5. Major components of the cardiopulmonary test
 6. Pulmonary Rehabilitation criteria
- D. Key Elements of a Pulmonary Rehabilitation Program
 1. Components of a pulmonary rehabilitation program.
 2. Open-ended and closed pulmonary-rehabilitation programs.
 3. Space and equipment needs of pulmonary rehabilitation.
 4. Key personnel in pulmonary rehabilitation.
 5. Ventilator muscle endurance - breathing/retraining techniques.
 6. Principles of exercise training.
 7. Importance of the three principles of exercise training.
 8. Patient-treatment plan.
 9. Outcome of pulmonary rehabilitation.
- E. Measure and Assess Outcomes of Pulmonary Rehabilitation
 1. Expectations of pulmonary rehabilitation.
 2. Benefits of pulmonary rehabilitation.
 3. Unlikely or debated benefits of pulmonary rehabilitation.
 4. Pulmonary rehabilitation outcomes - ascertained and documented.
 5. Attrition in pulmonary rehabilitation programs.
- F. Reimbursement for Pulmonary Rehabilitation
 1. Cost of a pulmonary-rehabilitation program.
 2. Factors that affect the cost of rehabilitation from third party payers.
 3. Importance of patient diagnosis, ICD9-CM when it comes to patient billing.
 4. CPT coding
 5. HCFA common procedure coding system (HCPCS)
 6. Insurance reimbursement - commercial carriers, Medicare, and Medicaid.
- G. Past and Current Changes in Respiratory Home Care
 1. Define Home Health Care
 2. Define respiratory Home Care.
 3. Historical factors for the development of Respiratory Home Care.
 4. Reimbursement issues facing Respiratory Home Care.
 5. AARC's standards for Respiratory Home Care
 6. Ethical issues of Respiratory Home care.
- H. Patient Selection and Discharge Planning
 1. Qualify a patient as homebound.

2. Criteria for patient discharged to home-care environment.
 3. Patient conditions that are appropriate for respiratory home care.
 4. Discharge planning process.
 5. Members of the discharge planning team.
 6. Characteristics that make RCP's ideal care coordinators.
 7. Care coordinator and case manager.
 8. Home respiratory equipment and therapeutics.
- I. Home Respiratory Equipment and Therapeutics
1. Major oxygen-delivery systems used in the home.
 2. Different types of oxygen conserving devices.
 3. BIPAP and CPAP.
 4. Patient selection for home mechanical ventilation.
 5. Positive pressure ventilators currently used in the home setting.
 6. Negative pressure ventilators in the home.
 7. Advantages and disadvantages of NPPV
- J. Delivery of Care - Protocols and Procedures
1. Purpose of developing respiratory home-care protocols and procedures.
 2. Components of a protocol or procedure.
 3. Basic procedure for establishing a home-care modality.
 4. Variations between respiratory home-care modalities.
 5. Respiratory home-care modalities.
- K. Home Care Accreditation and State Licensing Requirements
1. Define accreditation.
 2. Organizations that accredit home-care companies.
 3. Levels of accreditation for Respiratory home care.
 4. Accreditation process.
 5. Reimbursement for respiratory home care.
- L. Reimbursement for Respiratory Home Care
1. Coding procedures used for reimbursement of respiratory Home care.
 2. Services provide by RCP's that are not reimbursable by Medicare or other insurances.
 3. Six-Point Plan
 4. Capped rental.
 5. Importance of the CMN.
 6. Qualifications for home oxygen therapy.
 7. Managed care's impact on the home-care industry.
- M. Subacute Care at Skilled Nursing and Long-term Care Facilities
1. Subacute care.
 2. Core elements of an ideal subacute care program.
 3. Subacute care can have positive outcomes and reduce healthcare costs.
 4. RCP's in a subacute care market.
- N. Clinical and Regulatory Aspects of Subacute Care
1. Discharge planning process involving the placement of patients in subacute-care beds.
 2. Patient related criteria for placing a patient in a subacute-care facility.
 3. Accreditation process for subacute care facilities.
 4. Phrase incident to physician services.

5. How RCP's are recognized and reimbursed for involvement at the subacute-care level.
- O. Aspects of Patient and Family Education
1. Why the RCP must be ready to educate the patient and family.
 2. Reasons a patient or a family is not ready to learn, and explain how to remove these barriers.
 3. Evaluation process
 4. Aspects of teaching are exemplified in the National Asthma Education Program.
 5. COPD
 6. TTS
 7. Steps of the training process according to the AARC's CPG on providing patient and caregiver training.
 8. Five ways in which RCP's can function as patient educators

Grade Scale

- A = 93 – 100 %
- B = 85 - 92 %
- C = 77 - 84 %
- D = 68 - 76%
- F = less than 68 %

Course Evaluation

Exam I	10%
Exam II	10%
Exam III	10%
Final Exam	25%
Lab	25%
<u>Home Care Project</u>	<u>20%</u>
Total	100%

Course Policies

Attendance – If you do not attend class you are missing some very valuable information. Test will include both textbook material and anything mentioned in class.

Homework Assignments –Please turn in homework assignments at the start of the next class meeting. **NO LATE WORK ACCEPTED!!!!** If you have an excused absence you may e-mail your work to me before the class starts. If the absence is not excused you will receive a zero.

Absences – According to LIT policy students with approved absences shall be allowed to make up examinations and written assignments without penalty. This privilege does not extend to unapproved absences. The determination of whether an absence is excused or approved is the responsibility of the instructor, except in the case of approved absence for an Institute-sponsored activity. If absences seriously interfere with performance the instructor may recommend to the Department Chair that the student be dropped from the course. You may be asked to present documentation to the instructor as to why the absence was necessary for the next class meeting that you attend, (i.e. doctor excuse, funeral pamphlet, note from child's doctor, etc.).

Make-up Exam - You may make-up an exam only if the absence is excused by the instructor. The make-up exam will be taken on the next class day that you return.

Class Roll – will be taken on the first and fourth class days. If your name is not on the class roster on the fourth class day, you will be asked to leave class until this matter is taken care of.

NO EATING, NO DRINKING, TURN OFF BEEPERS, TURN OFF CELL PHONES, NO DISRUPTIVE BEHAVIOUR, AND NO CHILDREN ALLOWED IN CLASS PLEASE!

During exams please put all of your belongings that include electronic devices against a wall in the classroom. If you have an electronic device out, then you will receive a zero on that exam. If you are caught cheating, then this can result in being dismissed from the program.

Technical Requirements (for courses using Blackboard)

The latest technical requirements, including hardware, compatible browsers, operating systems, software, Java, etc. can be found online at:

https://help.blackboard.com/en-us/Learn/9.1_2014_04/Student/015_Browser_Support/015_Browser_Support_Policy A functional broadband internet connection, such as DSL, cable, or WiFi is necessary to maximize the use of the online technology and resources.

Disabilities Statement

The Americans with Disabilities Act of 1992 and Section 504 of the Rehabilitation Act of 1973 are federal anti-discrimination statutes that provide comprehensive civil rights for persons with disabilities. Among other things, these statutes require that all students with documented disabilities be guaranteed a learning environment that provides for reasonable accommodations for their disabilities. If you believe you have a disability requiring an accommodation, please contact the Special Populations Coordinator at (409) 880-1737 or visit the office in Student Services, Cecil Beeson Building. You may also visit the online resource at <http://www.lit.edu/depts/stuserv/special/defaults.aspx>.

Student Code of Conduct Statement

It is the responsibility of all registered Lamar Institute of Technology students to access, read, understand and abide by all published policies, regulations, and procedures listed in the *LIT Catalog and Student Handbook*. The *LIT Catalog and Student Handbook* may be accessed at www.lit.edu or obtained in print upon request at the Student Services Office. Please note that the online version of the *LIT Catalog and Student Handbook* supersedes all other versions of the same document.