



**Service Priorities and Programmes
Electronic Presentations**

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Home Non-invasive Ventilation Program for Patients with Chronic Respiratory Failure

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Introduction

Chronic Obstructive Pulmonary Disease (COPD) is a major cause of chronic morbidity and mortality throughout the world. COPD is currently the fourth leading cause of death in the world, and further increases in the prevalence and mortality of the disease can be predicted in the coming decades. The effectiveness of a programme advanced at acquiring self-management skills and behavioral change by patients. Thus, the respiratory team made for changing the COPD service and home non-invasive ventilation program has been established since 2012. Home Non-invasive Ventilation Program for Patients with Chronic Respiratory Failure will increase the benefit for patients.

Objectives

To enhance patients and carers knowledge and confidence for home NIV care
To evaluate the effectiveness of the home NIV program
To enhance patient's satisfaction

Methodology

After participating in the Home NIV program, the respiratory nurse assessed on the knowledge of the disease. Education was provided accordingly during the hospital stay. A post educational assessment was done not only providing discharge plan but also the level of understanding and improvements were measured. Besides, patients were educated on self-management skills, home oxygen therapy and home non-invasive ventilation in which enhances patient's knowledge of the disease. Additionally, the healthcare also reassesses to evaluate the program relevant information and reinforcement are provided upon discharge. In order to assess the effectiveness of the program, healthcare shall check the rate of emergency department attendance and unplanned admission were evaluated after patients discharged.

Result

From January 2012 to December 2013, 52 patients with 28 males and 24 females were recruited for home NIV program. The mean age was 67.5 (range 36-96). Majority of them were COPD patients (65.38%); the remaining were patients with overlapped syndrome (13.46%), motor-neurone disease (15.38%) and other chronic

disease (5.78%). 15 patients (28.8%) died within one year after discharged with home NIV. The rate of emergency department attendance and unplanned admission were decreased after participating in the program. Most of the patients (71%) and carers (62%) believe the program has helped, and satisfactory service. The home NIV program also uses resources effectively and reduces hospital costs but still maintain a quality care standard.