

Respiratory Therapy and the H1N1 Pandemic Survey

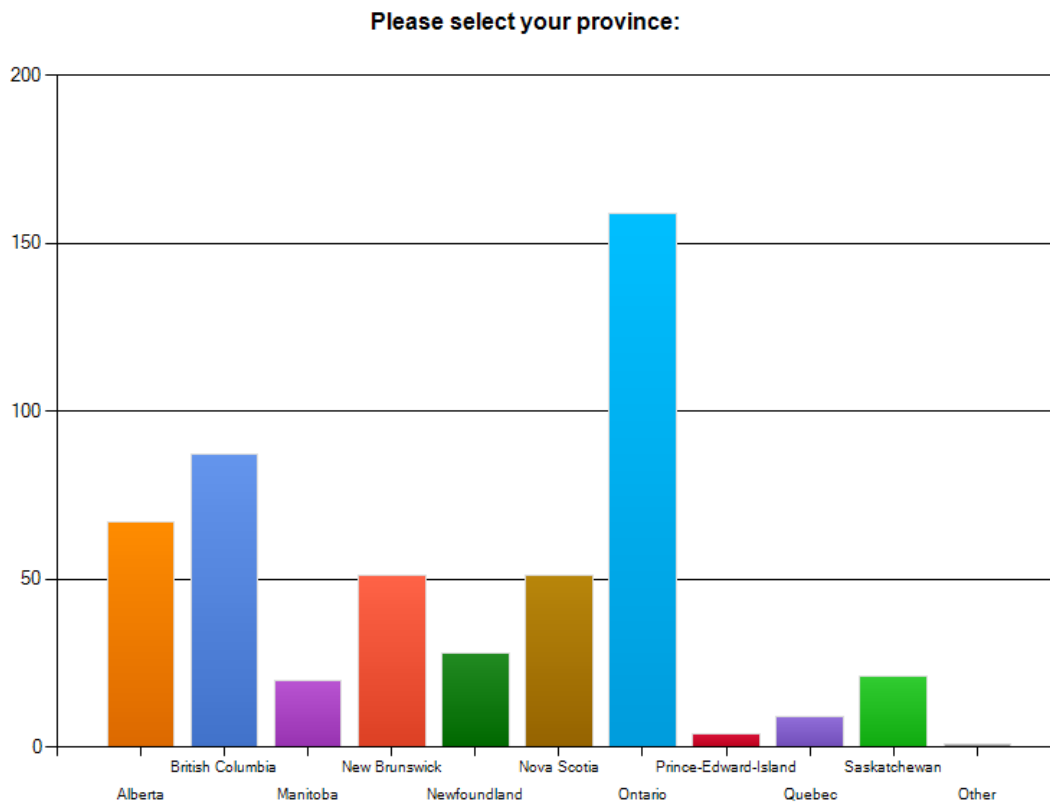
November 2009

Survey Results

There were a total of 498 responses to the English survey. Note that the charts and percentages below were created for the English survey (majority). As some questions required a “YES” answer to be directed to the next question (a “NO” answer would skip them ahead one question), and some questions were not mandatory, not all questions had an equal number of responses.

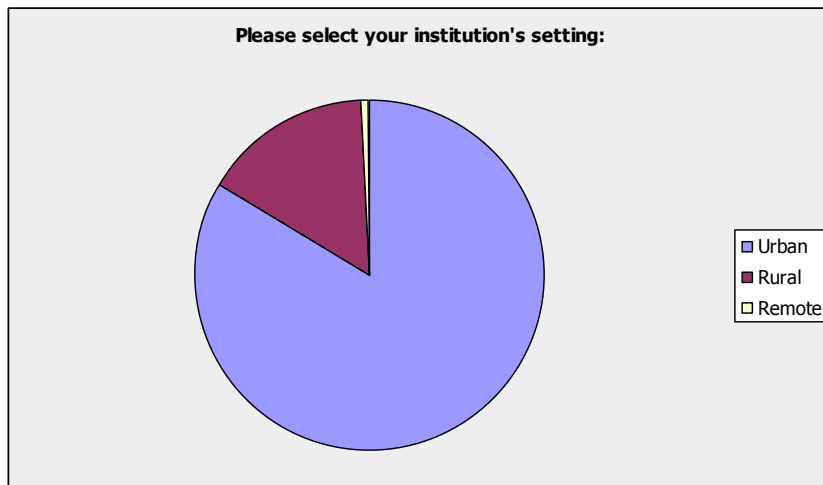
Question #1. Please select your province: (498 respondents)

The majority of respondents (31.9%) were from Ontario, followed by British Columbia (17.5%), Alberta (13.5%), Nova Scotia (10.2%) and New Brunswick (10.2%), Newfoundland (5.6%), Saskatchewan (4.2%), Manitoba (4.0%), Quebec (1.8%), Prince-Edward-Island (0.8%), Yukon, Nunavut, Northwest Territories (0.2%).



Question #2. Please select your institution's setting: (498 respondents)

The majority of respondents (83.7%) work in an urban area, followed by 15.5% working in a rural area, and 0.8% who work in a remote location.



Question #3. Please enter the name of your institution: (498 respondents)

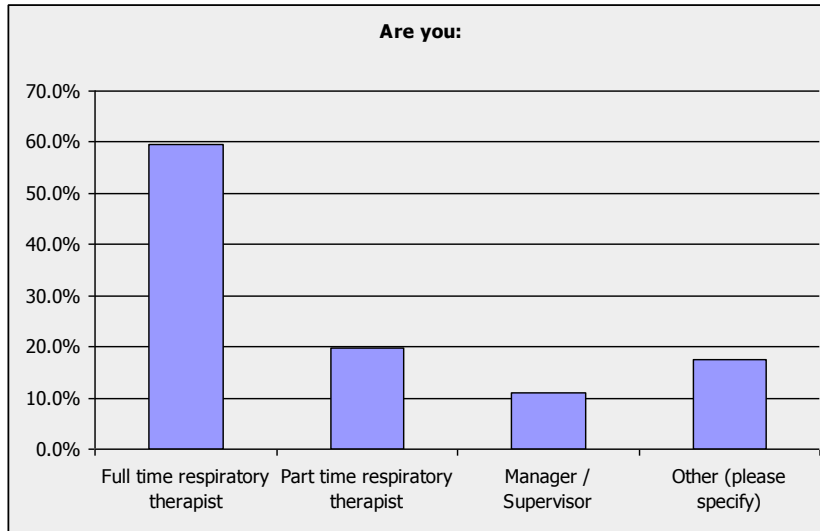
Most popular "Other" responses as follows:

Institution	# of responses
Royal Jubilee Hospital / Vancouver Island Health Authority / Vancouver General	20
St. Joseph's Health Care / Hamilton Health Sciences	18
Queen Elizabeth II	19
VitalAire	15
Sick Kids Hospital	12
Credit Valley Hospital	11
IWK Halifax	9
Ottawa General Hospital	8
Rockyview General Hospital	7
Medigas, St. John Regional Hospital, Royal Alexandra Hospital, St. Michael's Hospital	6

Question #4. Are you a full time RT, part time RT or a manager/supervisor:

(498 respondents)

The majority of respondents (59.6%) are full time respiratory therapists. Part time respiratory therapists accounted for 19.7%, Manager/Supervisor for 11.0%, and 17.5% responded “Other.”

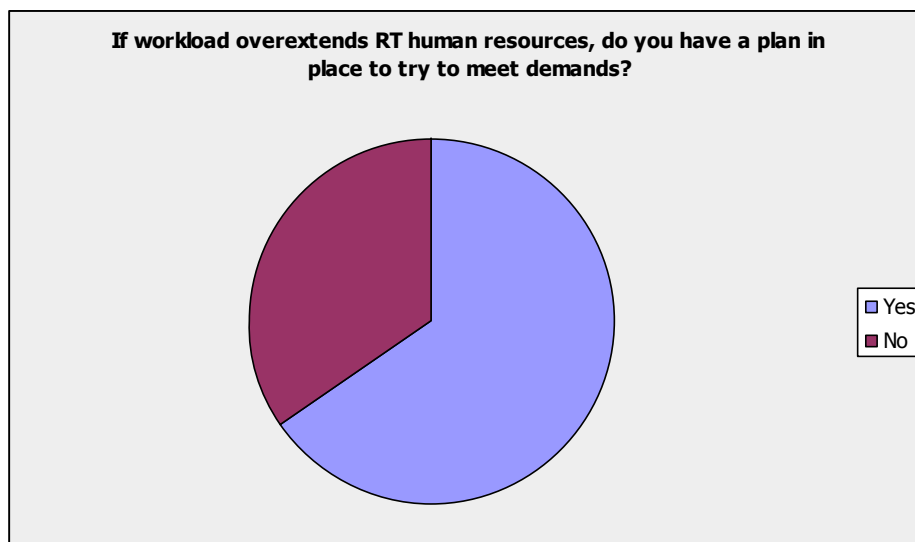


Most popular “Other” responses as follows:

Casual	30
Anaesthesia assistant / tech	12
Educator	10
Instructor	5

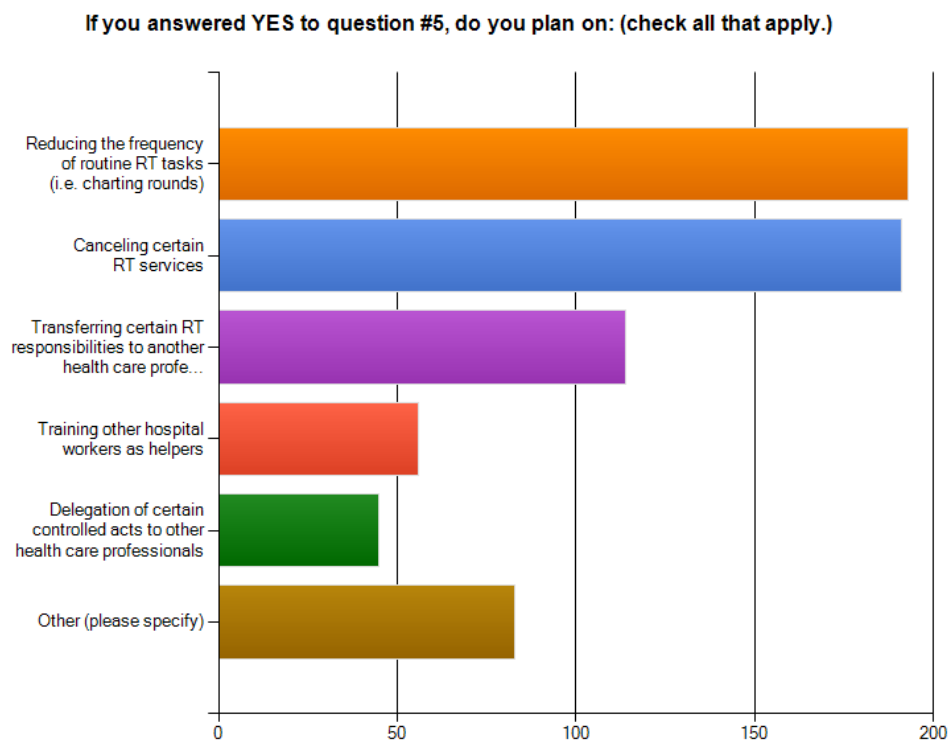
Question #5. If workload overextends RT human resources, do you have a plan in place to try to meet demands? *(498 respondents)*

The majority of respondents answered “YES” (65.3%) and 34.7% answered “NO”



Question #6. If you answered YES to question #5, do you plan on: (check all that apply) (301 respondents, 197 skipped)

The majority of respondents (64.1%) answered “Reducing the frequency of routine RT tasks (i.e. charting rounds)”, followed by: Cancelling certain RT services (63.5%); Transferring certain RT responsibilities to another health care professional (37.9%); Other (27.6%); Training other hospital workers as helpers (18.6%); and Delegation of certain controlled acts to other health care professionals (15.0%).



Most popular “Other” responses as follows:

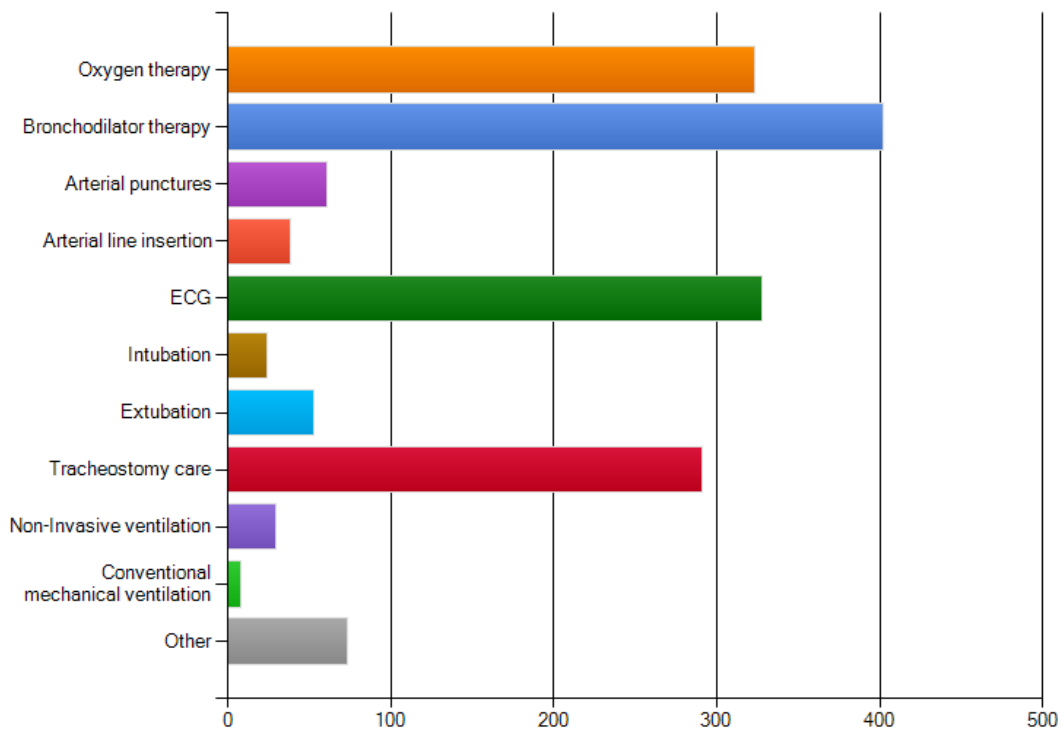
Redeploying / sharing staff	25
Hiring more help	15
Using Students	12
Overtime	6

Question #7. Which of the following responsibilities do you feel are safe to transfer to another health care professional? (447 respondents, 51 skipped)

The most popular responses were Bronchodilator therapy (89.9%), followed by ECG (73.4%), Oxygen therapy (72.3%), and Tracheostomy care (65.1%). See chart below for all response percentages.

Answer Options	Response Percent
Oxygen therapy	72.3%
Bronchodilator therapy	89.9%
Arterial punctures	13.6%
Arterial line insertion	8.7%
ECG	73.4%
Intubation	5.4%
Extubation	11.9%
Tracheostomy care	65.1%
Non-Invasive ventilation	6.7%
Conventional mechanical ventilation	1.8%
Transport of ventilated patients	5.6%
Other (please specify)	11.0%

Which of the following responsibilities do you feel are safe to transfer to another health care professional? (check all that apply)



Most popular “Other” responses as follows:

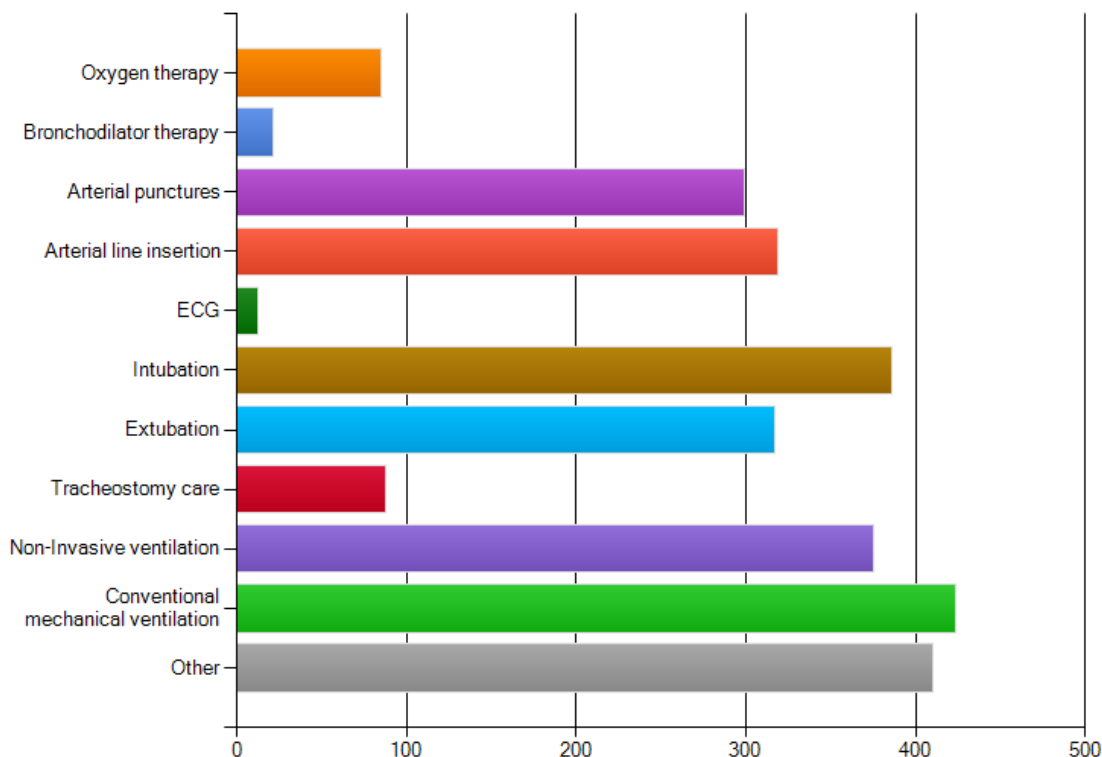
Oxygen therapy	11
Ventilator checks	8
Suctioning, spirometry, patient monitoring	4

Question #8. Which of the following responsibilities do you consider UNSAFE to transfer to another health care professional? (450 respondents, 48 skipped)

The most popular responses were Conventional mechanical ventilation (94.2%), followed by Intubation (85.8%), Transport of ventilated patients (84.0%), and Non-Invasive ventilation (83.3%). See chart below for all response percentages.

Answer Options	Response Percent
Oxygen therapy	18.9%
Bronchodilator therapy	4.9%
Arterial punctures	66.4%
Arterial line insertion	70.9%
ECG	2.9%
Intubation	85.8%
Extubation	70.4%
Tracheostomy care	19.6%
Non-Invasive ventilation	83.3%
Conventional mechanical ventilation	94.2%
Transport of ventilated patients	84.0%
Other (please specify)	7.1%

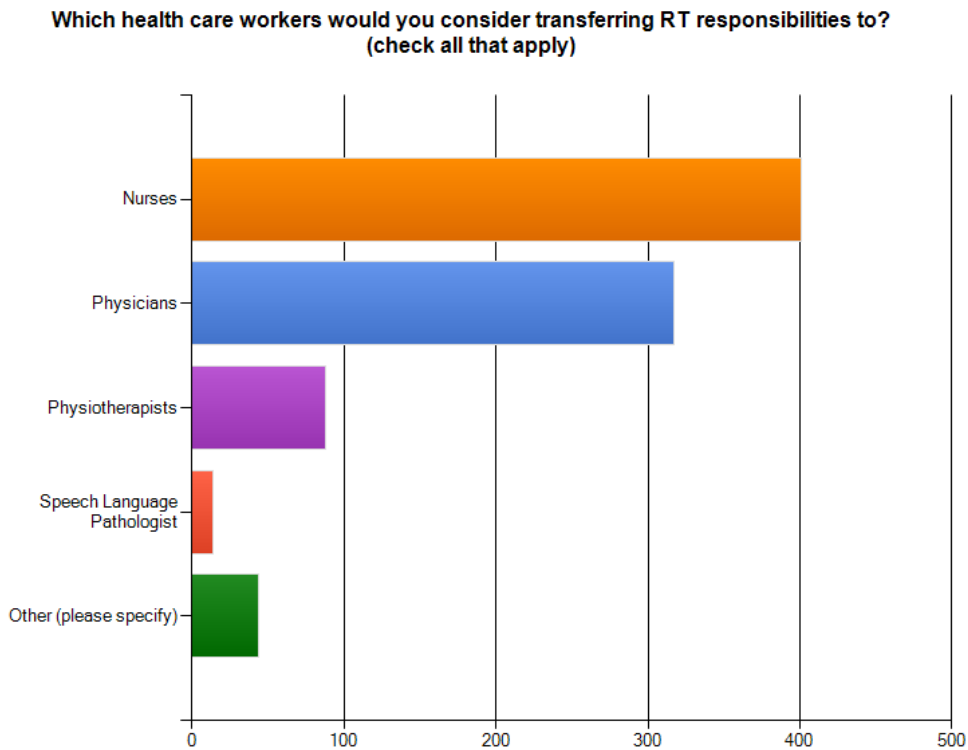
Which of the following responsibilities do you consider UNSAFE to transfer to another health care professional? (check all that apply)



No discernable pattern of popular “Other” responses to note here.

Question #9. Which health care workers would you consider transferring RT responsibilities to? (check all that apply) (437 respondents, 61 skipped)

The top choice in this category was Nurses (91.8%), followed by Physicians (72.5%). The rest of the responses included Physiotherapists at 20.1%, “Other” at 10.1%, and Speech Language Pathologist at 3.2%.

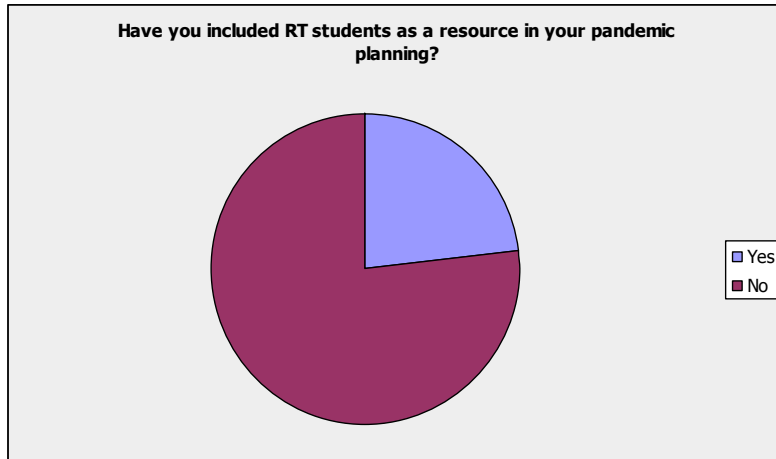


Most popular responses as follows:

Paramedics	9
Trained RN	6
ECG	6
LPN	4
None	3

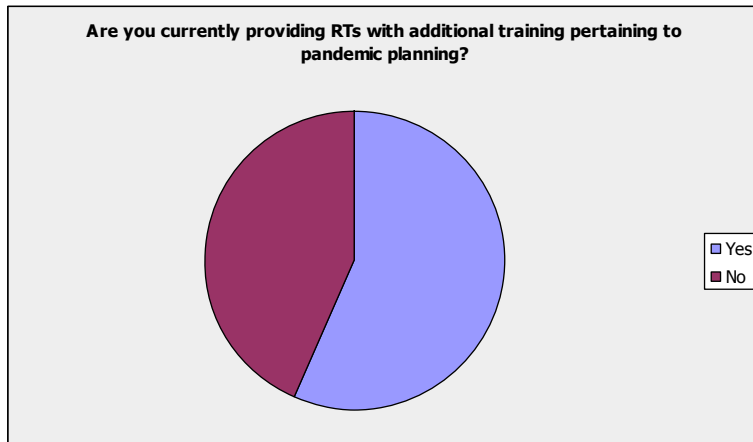
Question #10. Have you included RT students as a resource in your pandemic planning? (437 respondents, 61 skipped)

The majority of responders answered “No” to this question (76.7%), with 23.3% responding “Yes”.



Question #11. Are you currently providing RTs with additional training pertaining to pandemic planning? (437 respondents, 61 skipped)

Over half of the responders answered “Yes” to this question (56.5%), with 43.5% responding “No”.

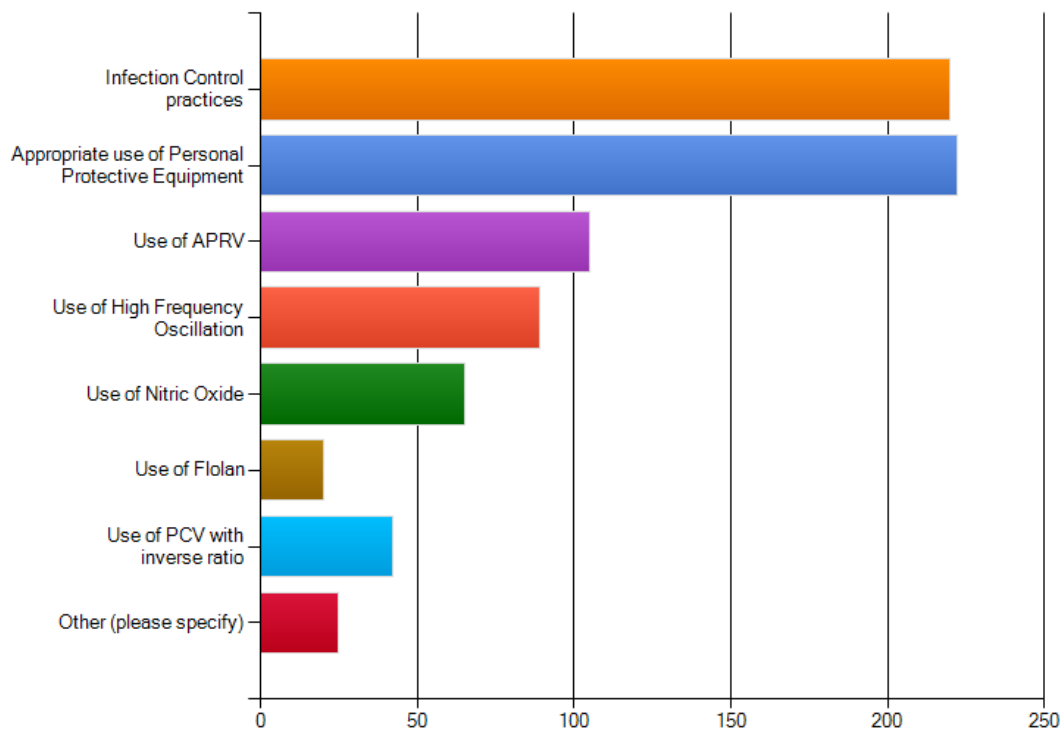


Question #12. If you answered YES to question #11, on what topics are you focusing? (select all that apply) (245 respondents, 253 skipped)

The most popular responses were Appropriate use of Personal Protective Equipment (90.6%), followed by Infection Control practices (89.8%). See chart below for all response percentages.

Answer Options	Response Percent
Infection Control practices	89.8%
Appropriate use of Personal Protective Equipment	90.6%
Use of APRV	42.9%
Use of High Frequency Oscillation	36.3%
Use of Nitric Oxide	26.5%
Use of Flolan	8.2%
Use of PCV with inverse ratio	17.1%
*Other (please specify)	10.2%

If you answered YES to question #11, on what topics are you focusing? (select all that apply)



Most popular “Other” responses as follows:

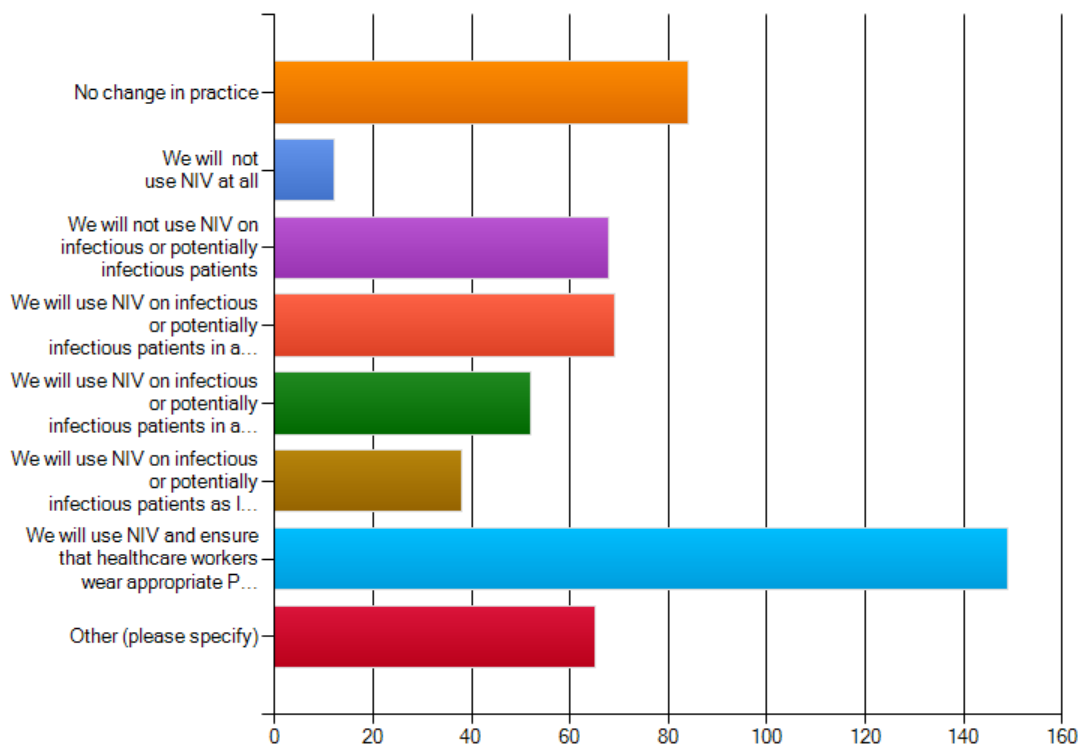
Paediatric ventilation	4
Nova Lung	2

Question #13. When it comes to non-invasive ventilation (NIV), what is your institution's position on its use during H1N1? (381 respondents, 117 skipped)

The most popular response was “We will use NIV and ensure that healthcare workers wear appropriate PPE when working within 2 meters of the device” at 39.1%; followed by “No change in practice” at 22.0%. See chart below for all response percentages.

Answer Options	Response Percent
No change in practice	22.0%
We will not use NIV at all	3.1%
We will not use NIV on infectious or potentially infectious patients	17.8%
We will use NIV on infectious or potentially infectious patients in a negative pressure room only	18.1%
We will use NIV on infectious or potentially infectious patients in a private pressure room only	13.6%
We will use NIV on infectious or potentially infectious patients as long as we have a barrier around the patient (i.e. curtains)	10.0%
We will use NIV and ensure that healthcare workers wear appropriate PPE when working within 2 meters of the device	39.1%
Other (please specify)	17.1%

When it comes to non-invasive ventilation (NIV), what is your institution's position on its use during H1N1?

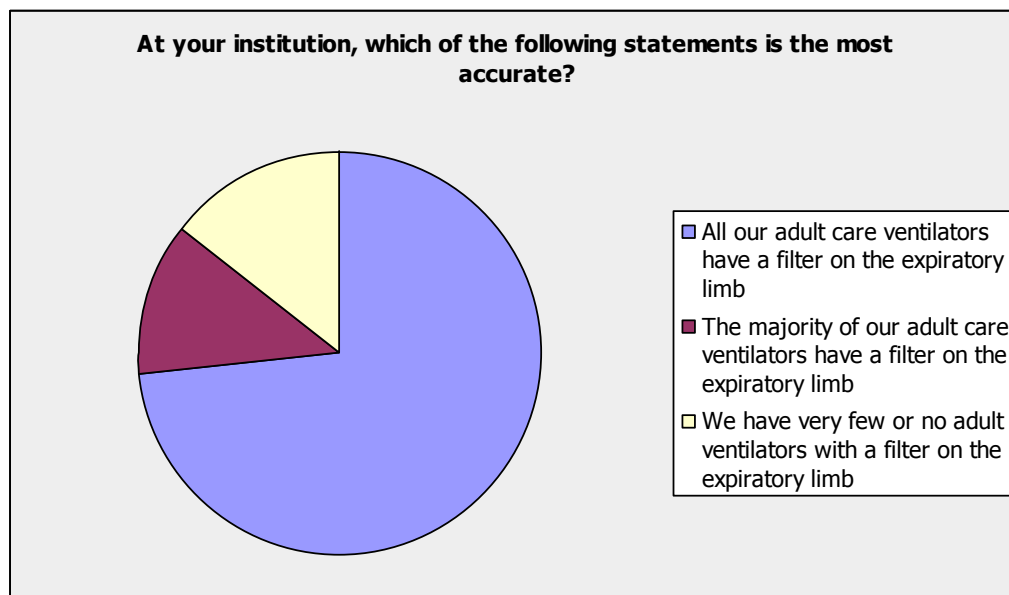


Most popular “Other” responses as follows:

Not sure	13
Avoid NIV	9
Not applicable	8

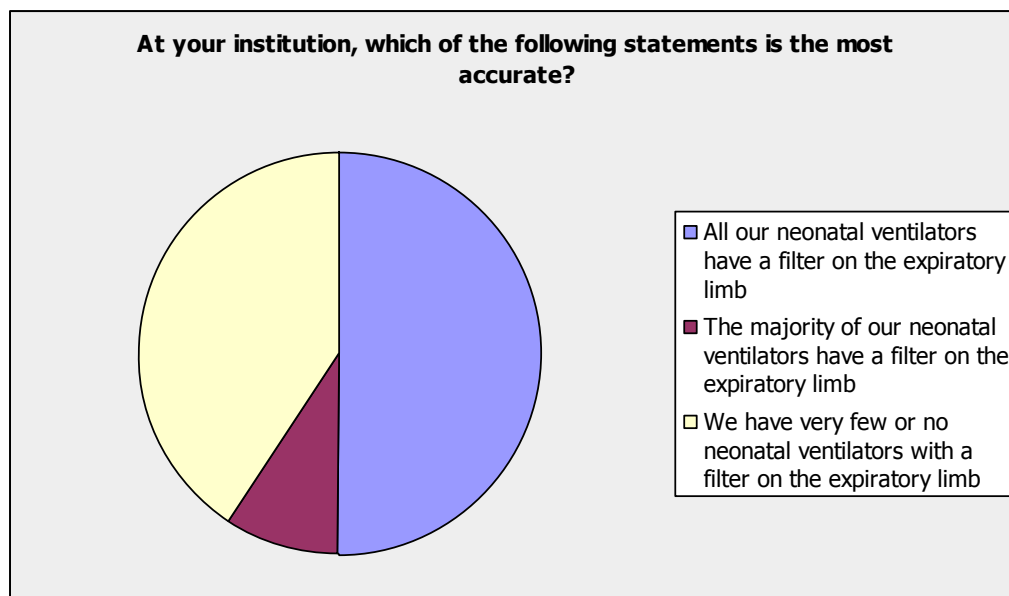
Question #14. At your institution, which of the following statements is the most accurate? (381 respondents, 117 skipped)

The majority of respondents (73.2%) answered “All our adult care ventilators have a filter on the expiratory limb”. 14.4% responded “We have very few or no adult ventilators with a filter on the expiratory limb”; and 12.3% answered “The majority of our adult care ventilators have a filter on the expiratory limb.”



Question #15. At your institution, which of the following statements is the most accurate? (381 respondents, 117 skipped)

The majority of respondents (50.1%) answered “All our neonatal ventilators have a filter on the expiratory limb”. 40.7% responded “We have very few or no neonatal ventilators with a filter on the expiratory limb”; and 9.2% answered “The majority of our neonatal ventilators have a filter on the expiratory limb.”



Question #16. Please include any relevant comments you may have: (88 respondents, 410 skipped)

It is noteworthy that several respondents used this section to clarify their response to Q15 as being negative, even though one of the options indicated in the question was “We have very few **or no** neonatal ventilators with a filter on the expiratory limb”.

Top 10 responses as follows:

Concerning #15: No neonatal	31
About pandemic planning	24