



CANADIAN SOCIETY OF RESPIRATORY THERAPISTS

SOCIÉTÉ CANADIENNE DES THÉRAPEUTES RESPIRATOIRES

Position Statement on Respiratory Therapists and Primary Care Teams

Preamble

As many as one in three Canadians live with a chronic disease¹ and many live with two or more² chronic conditions. Nearly 20% of Canadians live with some form of serious respiratory illness³, many requiring complex care, with asthma and chronic obstructive pulmonary disease together affecting 5.8 million Canadians⁴. Respiratory complaints are among the most common reasons a patient accesses their primary care provider⁵. A primary care system where services are provided by a multidisciplinary team, improves access to medical care, treatment processes and clinical outcomes^{6,7}.

The COVID-19 pandemic brought about greater public understanding of the roles of respiratory therapists (RTs) in critical or acute care, where their expertise in oxygen therapy, mechanical ventilation and airway management was widely employed. Less widely recognized is the role and impact of RTs in a range of other practice settings.

Respiratory therapists' expertise and scope of practice allow them to work across the continuum of care and in settings outside of critical and acute care. Respiratory therapists work in primary care where they provide care to patients of all ages with chronic respiratory diseases and conditions requiring complex care. As members of collaborative, patient-centered primary care teams, respiratory therapists use evidence-informed approaches to assess, manage and educate patients with respiratory diseases or complex care needs, and their families^{8,9}.

Position

Respiratory therapists have a broad scope of practice that enables them to work collaboratively within multidisciplinary patient-centered primary care teams to assess, manage and educate patients and their families.

Recommendations

To maximize access to timely care in Canada by health providers practicing in a team-based model:

1. Existing primary care providers and teams should consider the inclusion of respiratory therapists as part of their teams and care practices.
2. Governments must support the scale up of collaborative, interprofessional primary care teams that include respiratory therapists.

Rationale:

Respiratory therapists possess the competencies to perform a wide range of functions on multidisciplinary primary care teams. They possess an in-depth knowledge and understanding of cardiorespiratory physiology, cardiorespiratory assessment, pharmacology, and patient education¹⁰. They synthesize and communicate data from a variety of sources to coordinate care and collaboratively develop evidence-informed care plans¹⁰.

Respiratory therapists possess communications and conflict resolution competencies and possess an understanding of quality improvement processes¹⁰.

Other specific roles respiratory therapists play in primary care include but are not limited to:

Chronic disease education and management

Respiratory therapists have extensive knowledge of chronic cardiopulmonary disease, cardiorespiratory medications and disease management¹⁰. They possess an understanding of determinants of health, health promotion (including tobacco cessation), patient education and the development and monitoring of patient-centered care plans¹⁰. They work as per established guidelines to help those living with lung problems self-manage their chronic disease. Disease management programs employing respiratory therapists have reported improvements in resource utilization^{11,12}, readmission rates¹²⁻¹⁴ and hospital length of stay¹². Furthermore, respiratory therapists are capable of providing leadership and case management in the primary care setting¹⁵.

Home ventilation¹⁰

Respiratory therapists possess unique knowledge and expertise relative to home ventilation. They initiate and titrate invasive and noninvasive ventilation, determine which ancillary therapies and equipment are required; educate and support the patient, caregivers, and agencies about home ventilation; and assist patients and care teams as the patient transitions between care settings where resources often differ (e.g., hospital to home, or home to hospital).

The diagnosis and management of patients requiring oxygen in the community¹⁰

Respiratory therapists possess a thorough understanding of oxygen therapy, its indications, and complications. They perform the diagnostic tests for oxygen therapy; initiate, titrate, and monitor therapy; and educate patients and their families about safe usage when performing a variety of activities. When home oxygen is indicated, respiratory therapists are able to complete applications for funding as required.

Administration of vaccines

Respiratory therapists provide medications through a variety of routes, including injection¹⁰. They were instrumental in the rapid delivery of COVID-19 vaccines in the early stages of the vaccine roll-out. They are also able to provide influenza and pneumococcal vaccines¹⁶.

Spirometry and pulmonary function testing

Guidelines for diagnosis of asthma¹⁷ and COPD¹⁸ require spirometry yet many patients do not receive this testing to confirm the diagnosis. This leads to misdiagnoses or underestimation of disease severity¹⁹.

The reasons for insufficient testing are multifactorial¹⁹ and RT-driven protocols have significantly increased spirometry testing in the primary care setting in children with asthma²⁰.

When more detailed pulmonary function testing is required, so is a high degree of operator skill. Respiratory therapists receive specific education and training on spirometry and pulmonary function testing guidelines and standards, equipment standards, and interpretation of pulmonary function test results prior to entry to practice¹⁰. They are skilled in the performance of other tests of respiratory function, such as oximetry testing, arterial blood procurement and testing¹⁰.

Sleep disorder screening, testing and management

Over 2 million Canadians report being diagnosed with sleep apnea²¹, although true incidence of sleep apnea is thought to be higher²². Respiratory therapists are educated in screening and testing for sleep apnea and possess specialized knowledge and expertise in the initiation and titration of non-invasive mechanical ventilation in sleep apnea management¹⁰.

Pulmonary rehabilitation

Pulmonary rehabilitation is recommended in the management of chronic lung diseases including but not limited to interstitial lung disease, bronchiectasis, and COPD where it has been shown to reduce dyspnea, increase exercise tolerance and improve quality of life^{23,24}. Despite this, only 0.4% of individuals diagnosed with COPD in Canada have access to a pulmonary rehabilitation program²⁵. The inclusion of respiratory therapists in pulmonary rehabilitation clinics improves the knowledge and use of chronic lung disease guidelines and patient education regarding their disease process and offers the additional benefits of improved access to and quality of pulmonary function testing²⁶.

About the Canadian Society of Respiratory Therapists (CSRT)

The CSRT is the national professional association representing respiratory therapists across Canada. The CSRT promotes the respiratory therapy profession at the national and international level and is the credentialing agency for respiratory therapists who practice in non-regulated jurisdictions in Canada.

Contact:

The Canadian Society of Respiratory Therapists
201-2460 Lancaster Road
Ottawa, ON K1B 4S5
csrt@csrt.com

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