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## Note

### from the ISRC Program Planning Committee

The ISRC fall conference is fast approaching and will be held at the Wyndham West Hotel, Indianapolis, Indiana October 8 & 9, 2015. This year's theme is "RT: Superheroes of Healthcare." The committee is excited to offer lectures on topics such as Ebola, patient perspective after receiving a lung transplant, the future of healthcare, ECMO for adults, and E-cigarettes. Of course these are only a few of the many speakers presenting. For a full list of speakers, you can visit the ISRC website at [www.in-isrc.org](http://www.in-isrc.org) and look for the brochure.

The ISRC likes to give back to the respiratory therapists and the communities we serve. Over the past several years we have given food to local shelters and scholarships

### PROGRAM COMMITTEE

Charity Bowling, Chairperson  
Ross Havens  
Jeff Hunsucker  
Pat Ingle  
Jan Johnson  
Michael Meska

Sheila Rodgers  
Stephanie Steele  
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to respiratory students. Continuing that spirit of giving, individuals attending this year's conference may bring a nonperishable item to be donated to a local food pantry. For each item a participant donates, they will receive a ticket and a chance to win a prize.

Our silent auction is always a big hit and this year will be no exception. Monies made from it help fund student scholarships and education throughout the state. Some new things we added this year is trivia night and t-shirt sales. If you like our theme, check out our t-shirts when you register on Eventbrite. Prepay for your t-shirt and pick it up the day of the confer-

ence! What a great Respiratory Care Week gift for yourself or a friend. Thurs-

day evening participants can form a team or join a team and try to beat the competition in trivia. Come relax and have fun with your fellow therapists and friends.

The ISRC Program Committee would like to thank all the Speakers, Vendors, and Sponsors. Without them, there would be no conference. There is still time for anyone who would like to be a vendor and/or donate to the silent auction. Please contact Program Chair: Charity Bowling at [cbowl-ing17@ivytech.edu](mailto:cbowl-ing17@ivytech.edu) or call 317-921-4211. We look forward to another great conference and can't wait to see you there!





# Summer Seminar, Chapter 1

By Sarah Connelly & Mike Meska

In recent years, the activity level and involvement from our chapter has reportedly been low. Senior chapter 1 Director, Michael Meska and Junior chapter 1 director, Sarah Connelly put together the first of what they hope will be many CEU Seminar's in chapter 1. This year's event was held at the Avalon Banquet Center in Merrillville, Indiana. The seminar was an all-day event offering 5 CEU's and included a catered box lunch. Topics included Neonatal Oxygenation, Pulmonary Rehabilitation, Metaneb, and High Flow Oxygenation. We had a great turnout with therapists attending from all over the chapter and beyond! Respiratory professionals from Kokomo and Lafayette, Indiana were in attendance.

Throughout the day we were able to network with and poll participants on topics of interest for future CEU Seminars. Many respiratory therapists in attendance had 10 or more years of experience...the most 'seasoned' had in excess of 35 years! Applause were abundant for these individuals. There were many lively conversations about the state of the respiratory profession and the benefits of our professional organization – no cost and reduced cost CEU/CRCE events, access to professional journals and articles, and networking opportunities with respiratory professionals across the state and nation.

One respiratory therapist remarked "Being a member of my professional association is like paying rent in my profession". No truer words have been spoken.

A brief survey was sent to everyone in attendance. We thanked them for attending and for providing valuable feedback!

The ISRC is always looking for people to help with event planning. If you are interested in volunteering please reach out to either one of your chapter 1 leaders – Mike Meska or Sarah Connelly. If you haven't volunteered, please consider it. We look forward to seeing you at future events!



## Articles Wanted

The ISRC is looking for articles from individuals on happenings in their area related to respiratory.

If you having something to share and want to be considered for possible publication in the Pulmonary Press, please send articles to Jeff Scott at [jscott@in-isrc.org](mailto:jscott@in-isrc.org)

Articles should be approximately 1/2 page in length.

# Collaborating to Improve Tracheostomy Care

Shelly Eisert, Ed.D., M.S.N., M.H.A., R.N., C.N.E., is an Associate Professor of Nursing and Director of the Simulation Center for Medical Education at Ivy Tech Community College. Her experience and expertise are in medical-surgical nursing with further experience in acute care and long-term care settings. Shelly is aware of the challenges associated with the complexity of care for tracheostomy patients. Furthermore, as a doctoral-prepared nurse educator she is aware of the academic-clinical gap in providing tracheostomy care. Shelly holds the National League for Nursing's distinct credential, certified nurse educator (CNE). Her research interests and experiences are nursing education and simulation. Additionally, Shelly is a member of the Southeast Simulation Consortium, a division of East Indiana Area Health Education Center

Kathy Newell, AS, RCP, is the Cardiopulmonary Manager at Margaret Mary Health. She is responsible for staff education using simulation. She has over 30 years' experience as a respiratory therapist in acute care. Kathy is aware of the challenges associated with the complexity of care for tracheostomy patients. Additionally, Kathy is a member of the Southeast Simulation Consortium, a division of East Indiana Area Health Education Centers.



Kim Crawley, ASN, RN, is the Education Coordinator and Case Manager for Margaret Mary Health. She is responsible for staff and patient education using simulation. She has over 32 years' experience as a nurse in acute care. Kim is aware of the challenges associated with the complexity of care for tracheostomy patients. Kim is certified as a Health Coach from the Iowa Chronic Care Consortium. She is Lean Six Sigma trained

## Part one:

### Academic and Practice Concern

The demands and complexity of healthcare require healthcare providers to be more prepared to perform advanced respiratory care in a variety of settings. Healthcare providers in rural Southeast Indiana have minimal hands-on experience with tracheostomy care in clinical settings because the communities have a low volume (currently three) of tracheostomy patients. However, the local healthcare facilities are starting to experience an increased volume of tracheostomy patients. Healthcare providers in the extended-care community expressed concerns regarding confidence in the ability to provide high quality tracheostomy care. Only 37.98% of healthcare providers who are qualified to perform tracheostomy care in extended-care facilities in one rural community in Southeast Indiana agreed or strongly agreed they were confident providing high quality tracheostomy care, and 93.67% agreed or strongly agreed they would benefit from additional education regarding tracheostomy care. Nursing faculty at a local school of nursing requested resources for tracheostomy care education in an effort to ensure graduates are prepared to meet expectations of clinical practice regarding tracheostomy care.

### Collaboration among Academic and Clinical Partners

The Southeast Indiana Simulation Consortium, a division of East Indiana Area Health Education Centers (AHEC), consists of a partnership between academic and clinical partners who collaborate to improve healthcare in the region through the use of simulation. A subcommittee consisting of a doctoral prepared academic nurse educator, a clinical nurse educator, and a respiratory therapist was developed. Additionally, two other respiratory therapists from the acute care hospital served as subject matter experts for the subcommittee. Because of the need for tracheostomy care education, the subcommittee committed to develop and implement a workshop for improving tracheostomy care in the region.

(Join us in the next edition of the Pulmonary Press for specifics about the workshop.)



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The mission of the Indiana Society for Respiratory Care is to provide proactive leadership in the delivery of Respiratory Care and to promote professionalism among Respiratory Care Practitioners.



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## **2015 ISRC BOD MEETINGS**

October 7, 2015

5:30pm-8:30pm

Wyndham Indianapolis West

2544 Executive Drive

Indianapolis, IN 46241

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a member*

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Recently the AARC announced it will be working with the State Affiliates, State Medicaid Programs, and any other state health care entities as appropriate, to deliver cost effective delivery models to patients who suffer with COPD in an effort to improve care and accessibility to treatment by respiratory therapists. COPD costs were estimated at \$32 billion dollars in 2010 and are expected to increase to \$49 billion by 2020. Approximately 25% of the costs are from Medicaid patients. The AARC hopes by working with State Medicaid Program Staff they will be willing to change their practices to meet the needs of the patient. The AARC has developed 4 pilot programs giving each State the flexibility needed for their areas, while providing the patient access to the services and skills of a reparatory therapist.

The first step in this collaborative is to gather as much state Medicaid data on COPD patients available. Medicaid programs will want this information before they begin to entertain a change from current practice. The data will support the AARC's contention that the provision and coverage of Respiratory Therapy services to Medicaid COPD patients needs to change, not just that we want it to change. Useful information for this project may come from the following metrics: Number of physician office appointments; Emergency department visits; Access and use of outpatient services; Skilled nursing facility stays; Home care services; Long-term care services; Durable medical equipment usage; Hospitalizations; and Hospital readmissions. The more supporting data we can show, the better our argument for change to our State Medicaid Program!

In July, the Medicare Telehealth Parity Act was re-introduced in Congress with the bill number **H.R. 2948**. H.R. 2948 expands opportunities for Medicare beneficiaries who suffer from pulmonary disease by 1) covering respiratory services when furnished via an interactive telecommunications system, 2) including an individual's home as a telehealth site, and 3) naming respiratory therapists as qualified telehealth professionals. The latter is most important because it will add respiratory therapists to the Medicare statute, a long-time goal of the AARC. The bill also covers remote patient monitoring for patients with certain chronic conditions including COPD when furnished as part of chronic care management services.

The ISRC asked our Legislators to support H.R. 2948 however, we did not get the support that we had hoped for as our State continues to be very conservative. The AARC as well as the ISRC, will continue to work with legislators and ask that all respiratory therapists get involved and ask for our legislators' support. We can make a difference if we get involved and educate our society on what we do!

