Team Support of Care and Education for Individuals with Severe Motor and Intellectual Disabilities Using Respirators

Shuko Ninomiya1)*, Junko Kimino1), Katsuya Maeda1), Shinjiro Akaboshi2)
1) Care and Education Support Section, NHO Tottori Medical Center
2) Department of Pediatrics, NHO Tottori Medical Center
*Correspondence: ninomiya-shuko@tottori-ryo.hosp.go.jp

Abstract
Hospital-A comprises 3 wards (B, C, and D) with 160 beds for patients with severe motor and intellectual disabilities. The wards are classified based on patients’ levels of need for care; for example, to Ward-B, those with severe health conditions using respirators or monitors at all times are mostly admitted. On this ward, the Care and Education Support Section is mainly engaged in care and education activities, and daily life support for patients and their families.

In 2012, 2 types of care and education activities were performed in the hospital for patients with severe motor and intellectual disabilities: group care and education: 5 to 10 patients belonged to a group with common purposes, regardless of the ward, and activities were performed by 1 to 2 patients and 1 staff member; and individualized care and education: activities were performed by 1 patient with a higher level of need for individualized activities and 1 staff member. Among these care and education activities, those for patients with severe health conditions using respirators corresponded to the category of group care and education. However, they were individually performed at patients’ bedsides.

During this period, the families of patients with severe health conditions expressed their desires for out-of-bed and outdoor activities. However, due to an increase in the number of patients with a higher level of need for care, it became difficult to perform care and education activities at sites distant from the ward. Up until that time, the range of activities for patients with a higher level of need for care had been limited to their bedsides. Therefore, deliberations were repeated to examine the feasibility of providing approaches through collaboration among multiple professionals involved in the consideration of patients’ and their families’ needs.
As a result, such approaches started from 2013, enabling patients with severe health conditions using respirators to also perform care and education activities at a distance from their rooms (these activities are referred to as “ward activities of care and education”). This consequently extended their range of activities, and increased their families’ levels of satisfaction. Tottori J. Clin. Res. 7(1), 45-48, 2016

Keywords: team care and education, group care and education, ward activities of care and education, individuals with severe motor and intellectual disabilities, individuals with severe health conditions using respirators (individuals with severe motor and intellectual disabilities and medical care dependent groups: SMID-MCDG)

Introduction
In Hospital-A, there were 45 patients admitted to Ward-B for individuals with severe motor and intellectual disabilities as of April 2013, 11 of whom had severe health conditions requiring respirators (patients with severe health conditions using respirators or SMID-MCDG). Up until that time, care and education activities for these patients had mainly been performed at their bedsides, and their families had expressed their desires for more extensive activities, including wheelchair use and going outdoors in appropriate seasons. To accommodate such desires, ward activities of care and education for all Ward-B patients to be performed at sites distant from the ward, such as the day room and outdoors, were initiated in 2013.