

Home Oxygen Concentrator Program (HOCP) Referral Pathway - Acute/Community/Palliative

Step 1: Referral to Home Oxygen Concentrator Program (HOCP)

- Initiated by client's treating Physician/Physician Assistant (PA), Nurse Practitioner (NP) or Palliative Care Program Professional (PCPP)
 - Assess if client meets criteria for oxygen therapy for HOCP.
 - Complete HOCP Medical Assessment/Referral form and attach pertinent documentation:
 - Client and physician identifying data, safety identification and referral information.
 - Treatment/Medication/Significant Medical History information.
 - Initial Medical Eligibility testing is completed and Oxygen Prescription/Delivery Mode.



Step 2: Assess and Approve/Not Approve for Admission to HOCP Program

- Forward completed Assessment/Referral form HOCP complete with supporting documents to:
 - Case Coordinator – community clients and clients in rural acute. Case Coordinator forwards referral to Designated Provincial Respiratory Consultant for review and initial eligibility disposition for community clients and clients in rural acute facilities.
 - Respiratory Therapist – who determines disposition for initial medical eligibility for clients in Regional Health Centres (Bethesda Regional Health Centre, Boundary Trails Regional Health Centre and Portage Regional Health Centre).
 - Palliative Care Nurse – Verifies client registry to the Palliative Care Program.



Step 3: Educate

Home Care Case Coordinator/Respiratory Therapist (Regional Acute Care Centres/Palliative Care Nurse:

- Review with client/caregiver the Home Oxygen Concentrator Program Safety Information/Requirements



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Step 4: Coordinate Oxygen Equipment and Supplies

Eligible for HOCP

Case Coordinator/Respiratory Therapist/Palliative Care Nurse

- Forward referral to:
 - Contracted vendor to inform of new installation
 - Case Coordinator in client's geographical area.
- Notifies client and hospital (if applicable) of installation date.

Vendor Home Visit/ responsible for:

- Provision of equipment and associated supplies
- Equipment set up and equipment education/training;
- Environment safety assessment, assessment of client/caregiver's ability to safely use the oxygen equipment.
- Completes and sends to designated Case Coordinator.
 - Installation confirmation
 - Safe environment assessment
 - Client/caregiver equipment training and capability assessments
- Informs Case Coordinator of actual or potential risk situations.
- Maintain/repair equipment.

Ineligible for HOCP

- Assessment/Referral form returned to referring physician/PA/NP identifying rationale for decision and follow-up with the client.



Step 5: Reassess 1 – 3 month Post Treatment Initiation – Eligibility for Continuance of HOCP (Exempt – Palliative or Nocturnal Oxygen)

Case Coordinator/Respiratory Therapist (hospital clients) coordinates completion of:

- Medical eligibility tests for Resting Hypoxemia and Exertional Oxygen
- Submit referral form with reassessment and supporting test results completed to Designated Provincial Respiratory Consultant.



Step 6: Reassess and Approve/Not Approve

Designated Provincial Respiratory Consultant:

- Receives and reviews Referral form and all attached documentation.
- Indicates disposition of application; approved or not approved for the continuation of HOCP.
- Signs and dates the Referral form.
- Returns Referral form to Case Coordinator with disposition.



Step 7: Ongoing assessment and monitoring

Responsibility of:

- Client's treating physician/physician assistant (PA) or nurse practitioner (NP)
- Case Coordinator