



Mt. Washington  
Pediatric Hospital

*Where Children Go to Heal and Grow*

An affiliate of University of Maryland Medical System and Johns Hopkins Medicine

## **SB733 Care of Medically Fragile Individuals Senate Finance Committee Support**

My name is Linda Hutter. I am a registered Respiratory Therapist and a part of the Mount Washington Pediatric Hospital (MWPH) Education Team. Over the last 25 years of my professional career with the advances in technology I have seen medically fragile children who once lived out their lives in hospitals now, being discharged home within 8 – 10 weeks.

Data collected in 2012 estimated that approx. 8,000 children with trachs (breathing tubes) and/ or on ventilators reside in homes across the United States. Data also indicated that for that population re-admit rates were as high as 40 percent. Additionally, that the primary cause of these re-admits and at times deaths (just like Channing) were due to inadequate training, improper response and lack of vigilance by the home nurses who cared for them. They were preventable.

So, 3 ½ years ago MWPH wanted to make a difference. We put together a discharge trach/ ventilator program. Families / caregivers of these medically fragile children would continue to train at bedside to meet their children's routine needs and cares such as changing the trach and g-tube. We then took education to the next level, allowing families to apply the skills they learned to real life emergent situations in our hospital Simulation lab. (Simulation has been used for a long time as we see currently with the crisis with Boeing 737s where pilots are refusing just manuals and videos for training and mandating they train safely in simulators.)

To date MWPH has educated approx. 200 caregivers in our Simulation lab. Data collected pre/post reflects a significant increase in caregiver confidence and readiness to respond in an emergency.

Upon going home many of our family members must return to work as the burden of long complex hospital stays has paid a toll on the household. Families must rely and depend on the home nursing to safely care for their precious miracles while they are at work and take time at night to sleep.

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of Rehabilitation Facilities

[mwph.org](http://mwph.org)

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We started hearing story after story of families firing on average 2-4 nurses within the first month of going home- “ nurses falling asleep”, “ not knowing how to use emergency equipment or how to intervene in an emergency”, etc. We are asking the state to uphold standards of best practice in the home care environment. Education for nurses caring for these patients and accountability to agencies mandating regular scheduled competencies.

Mount Washington Pediatric Hospital in Collaboration with a grant from John’s Hopkins Hospital will be facilitating a train the trainer focus study starting in April of this year. We will be holding 4 sessions, 5 hours each ( approx. 10-12 staff per session). We will train 1-2 staff from various Home Care Skilled Nursing agencies and give them the tools to go back and train their staff.

I am grateful for this opportunity to let Channing’s voice be heard. A voice that has initiated change and will continue to save lives.

Sincerely,  
Linda Hutter, BS, RT  
Simulation Specialist

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