Lessons Learned- The Implementation of a novel Neuromuscular Electro-Stimulation ("NMES") device into a community home care program
Lucy Coppola, Director of Transitional and Short Stay Services, Erie St. Clair Community Care Access Centre

Background
• Community wound care in Canada consumes $3.9 billion in financial resources (3% of total health expenditures)
• Care provider/funders are looking for efficacious and cost-effective technology/techniques to accelerate wound healing—largely an unmet need.
• A novel technology was presented to a community care access centre (CCAC) in Ontario, Canada during 2013.
• Addresses the wound by improving blood flow—while generating a natural healing response through stimulation of the common peroneal nerve activating the calf and foot muscle pumps leading to increasing venous, arterial and microcirculatory blood flow.

Aim
• To review the implementation challenges and learning derived from the adoption of a novel blood flow enhancement technology into a home care setting.
• To share this experience to help others as they adopt NMES into their programs.

Methodology
• CCAC was the first in the world to fund this novel NMES device following a one year evaluation program.
• Transitioning from evaluative to routine use involved a broad range of educational/communication strategies.

Results
• The evaluation of the technology in refractory venous leg ulcers exceeded expectations.
• For this reason, the technology was adopted into routine use and an education and implementation plan was developed.
• Traditional communication strategies resulted in roll-out delays from the original plan.
• Once the learning program was refined, the program was flawlessly implemented with dozens of patients already benefitting from the new therapy.

Conclusions
Lessons learned from the first implementation may benefit many other centres across Canada as this novel technology is adopted.

References:
1. Wounds, National Stakeholder Round-table, June 2012