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The breeze

Respiratory Health Strategic Clinical Network™ newsletter • Summer 2019



Bringing Teams Together: Heart Failure & COPD Pathways Learning Collaborative

Multidisciplinary teams from across the province joined together on May 1, 2019 for the second of a series of learning collaboratives aimed at improving care for COPD and Heart Failure patients. Discussions focused on acute, community and primary care of HF / COPD. Teams developed strategies and action plans amid opportunities for sharing of successes, learnings and challenges.

The excitement was electric as healthcare providers, patients and leaders worked alongside each other identifying ways to implement evidence based order set bundles into practice. Educational sessions addressed participant learning needs and all enjoyed some wise words from our patients and families during an afternoon panel discussion including this quote from patient member, Laurie B.:

“I wish the medical professionals would slow it down a bit. We need more time to absorb all the info given to us.”

Meanwhile, Clinical Knowledge & Content Management (CKCM) and Clinical Pathway Support Unit (CPSU) teams work together to ensure resources support the best clinical care in hospitals and communities.

Frontline teams now return to their home bases to build on the learnings and momentum fostered during this opportunity to engage and share. With support from the RH and CvHS SCNs, these efforts to improve care will continue through the coming months.



Optimizing Oxygen Practices

RHSCN's Provincial Oxygen Practices (POP) team, in partnership with Health Professions Strategy & Practice (HPSP), continues its work to reduce unnecessary and unsafe practice variations related to oxygen therapy within acute care settings.


Transfer Tickets were implemented across the province in September 2018, to support communication and critical thinking as patients move within facilities on portable oxygen therapy. Results to date demonstrate that this tool and its associated policy (HCS-205) have significantly reduced the instances of inadvertent discontinuation of patients' oxygen supply.

When prescribing oxygen therapy, the use of target saturation ranges is well supported by evidence – rather

than described using an absolute flow or concentration rate. Evidence is also becoming stronger with respect to the safest use of oxygen therapy; there are times when it can be harmful or not at all useful.

POP recently consulted with various stakeholders to create a provincial approach for prescribing oxygen therapy within AHS' new electronic medical record (EMR). From the first launch of this EMR later this year, clinicians will use these standardized target saturation ranges. Also included is the latest evidence-based information to guide the safest use of oxygen therapy.



 To find out more or become involved, contact us at respiratoryhealth.scn@ahs.ca

Kudos - More Lung Test Results Coming To Netcare

Over 600,000 Albertans have a current diagnosis of chronic respiratory disease. Most of these diseases can't be diagnosed or managed without the use of appropriate lung testing. While access to testing isn't perceived to be a limitation, data indicates that many Albertans aren't benefiting from testing and remain undiagnosed or misdiagnosed.

In Alberta, there are 95 accredited labs spread across the province that perform a spectrum of lung testing upon referral. Sixteen of these labs are publicly operated and the remaining significant amount are independently operated. Until recently, only 6 labs were reporting their interpreted test results to Netcare – all publicly operated.


The Respiratory Health Strategic Clinical Network™ and its stakeholders are connecting with both sectors, to garner agreement on strategies that will support earlier and more accurate diagnoses. Their first step is to build the necessary technical and clinical solutions to enable more labs to connect their test

results to Netcare. Warm appreciation to the additional publicly operated labs who have made this work a priority, and have achieved successful connection through this new solution over the past 6 months.

A special shout-out to AHS' IT for motivating vendors to optimize their diagnostic software in support of this work, and for building solutions that will align with Connect Care and other important clinical platforms. With keen attention to solutions that are as cost-effective and time-efficient as possible, the RHSCN/IT team will continue this work with remaining labs – both public and independent - over the next couple of years.

At the same time, the RHSCN is building consensus across both sectors, to implement standardized provincial reports for many types of lung tests; this means that the same values and graphs will be reported (and in a very similar layout) – to support consistent and clear information being shared with referring physicians, and other clinicians who are members of the patient's collaborative care team.

We look forward to the ways in which this work will benefit patients across Alberta!

 To learn more about this initiative, visit ahs.ca/pfts



An Update from the Scientific Office

At the American Thoracic Society Meeting in Dallas Texas this month, four of the RHSCN projects were presented. Our Data Analyst, Chantal Atwood presented a poster on the discharge bundle work. Our Assistant Scientific Director, Heather Sharpe shared two project from the Scientific Office (research prioritization, and the new COPD/asthma prevalence data), as well as the Primary Care Asthma Pediatric Pathway project.

Some key take away messages included:

- E-cigarettes do NOT reduce tobacco dependence. A recent review of studies demonstrated the odds of stopping smoking is lower for e-cigarette users.
 - Similarly, e-cigarette use actually increases combustible tobacco use.
 - New and innovative therapies was a popular discussion topic.
- The International Severe Asthma Registry now includes over 7,500 patients in 124 sites across 12 countries. This is a wealth of information that has potential use for research, clinical improvement and development of resources.

Respiratory Health SCN & Independent Community Providers: Better Together

Leaders of our provincial Sleep Disorders Working Group recently met with colleagues from the Respiratory Home Care Association of Alberta (RHCAA), to discuss mutual challenges and to explore opportunities to improve the delivery of sleep care for Albertans. Clinicians and operators from across the province engaged in facilitated discussions, which resulted in commitment to move forward as a team to begin planning next steps. A key area of agreement was the need to better understand the impact of sleep disorders in Alberta.

There are over 130 facilities across Alberta where patients may be diagnosed and treated for sleep disorders. Most of these facilities are independent, providing important respiratory care for Albertans

across much of our geography. However, mechanisms don't yet exist to allow clinical data to be aggregated and used to both describe and plan for the provincial burden of sleep disorders. This data is essential to better understand the landscape, and to efficiently aim our combined efforts towards gaps within the sleep care system.

To change the system, we need the system in the room. These are important first steps in building a lasting partnership with our valued community-based providers. Echoed by our physician lead, Dr. Sachin Pendharkar:

“Collaboration between frontline providers and other stakeholders is critical in order to ensure that Albertans with sleep-disordered breathing receive high quality care. This meeting was an important level-set about common priorities and data needs, and will lay a strong foundation as we move forward.”

➤ A second engagement day is planned for the fall of 2019.

The Respiratory Health SCN leadership team

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➤ To provide feedback on this newsletter or suggest future content, contact respiratoryhealth.scn@ahs.ca

