

The Breeze

A newsletter from the Respiratory Health Strategic Clinical Network



What lies behind us and what lies ahead of us are tiny matters compared to what lives within us – Henry David Thoreau

What's new

Spring has sprung and we all celebrate the arrival of sunshine and allergens (not so much!) The members of the RHSCN continue to work hard and diligently on a number of fronts all aimed at improving lung health for Albertans. Our new Airways Working Group has met several times and generated an exciting list of possible areas to focus on. Improving transitions for patients and families has dominated our conversations, and we look forward to working with our colleagues in Primary Health Care to share our efforts in identifying how to enable patients to stay in their homes in a confident way with optimal health. Both our Sleep Disorders Working Group and Provincial Oxygen Projects Working Group

received nominations for Presidents Excellence Awards for their work over the last year. We are particularly pleased that our work with provincial partners will soon see access to pulmonary function test results on Netcare. Having these critical diagnostic test results readily available to a broader audience of clinicians will facilitate more efficient and timely diagnosis of lung diseases. There are many pockets of great work going on across the province, and we salute all the members of the respiratory family for their dedication and hard work. We hope you enjoy reading within about the fruits of our members' labor over the past quarter. A happy and restful summer to you all.

Spring 2018 RHSCN

Mission Statement

“The Respiratory Health Strategic Clinical Network will facilitate optimal respiratory health through implementation of innovative, patient-centered, evidence-informed and coordinated services.”

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NEW Oxygen Transfer Policy

Use of Portable Oxygen during Patient Transfers (HCS-205) – within acute care

Adverse patient safety events have been reported across the province due to inadvertent discontinuation of patients' portable oxygen supply during intra-site transfers. To address issues, a new provincial policy is effective Sept. 10, 2018.

Experience at early adopter sites in Calgary and Edmonton has shown that use of the associated new Transfer Ticket makes patient care safer; it includes standardized direction for assessing patient risk and supports communication about patients' oxygen needs. Click on the link below to access the policy and its multi-component orientation toolkit.



TOP Chronic Asthma Clinical Practice Guidelines

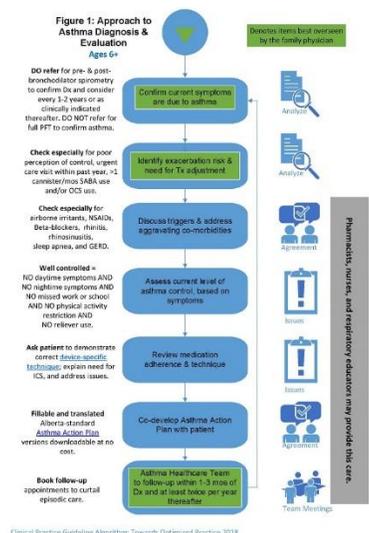
Updated May 1st, 2018

Diagnosing and managing asthma is not as straightforward as we would like, but Alberta's Airways Working Group is collaborating with partners to simplify the approach.

Overseen by the RHSCN, this Working Group unites primary care physicians, specialist physicians, and certified respiratory educators who are respiratory therapists, pharmacists, and nurses. Together with Toward Optimized Practice (TOP of AMA), the Faculty of Pharmacy (UofA), Alberta's Regulatory Colleges, and the Primary Health Care Resource Centre, they have begun to implement concise solutions.

In recognition of World Asthma Day, [TOP's updated Asthma Clinical Practice Guideline](#) was released on May 1st 2018. The guidelines respond to the need identified by RHSCN's Asthma Working Group for comprehensive asthma recommendations that are presented in user-friendly format for primary health care. Key features of this guideline are:

- How to achieve a definitive asthma diagnosis that includes spirometry testing, even when results are normal.
- A systematic approach to evaluate asthma control, and the need for ongoing re-evaluation.
- The use of a fillable [Alberta Asthma Action Plan](#), which supports patient-centric care.



Pulmonary Function Testing to Netcare Project

Making connections

Members of the respiratory community have long identified the need to address access to lung testing and the need to make these test results accessible on Netcare. The Pulmonary Function Testing (PFT) Quality Improvement project was established to address this gap.

Currently there are five vendors who provide various types of hardware and software in the province; each requires a unique technical platform to support connection to Netcare. AHS' Information Technology Department is overseeing the establishment of the centralized servers that will support the most cost effective and efficient connection to Netcare.

The first priority is to connect those public and private labs using the most prevalent software. Technical solutions

for all other labs will then be addressed in a phased approach through 2019-2021.

During the next several months, standardized provincial reporting templates developed in consultation with specialists, family physicians and clinicians will be implemented in public labs across the province, followed by the first few private labs.

This work is complex, and we applaud everyone's dedication to it. Stay tuned to learn more about our progress in future newsletters.

Pulmonary Function Testing (PFT) Interpretation

CPSA has modernized PFT accreditation. A new patient-centric approach means all facilities will be required to use the same standardized reference equations for interpreting test results.

The updated standards are organized and formatted to be consistent with globally recognized international organization for standards (ISO) quality standards.

Facilities have until summer 2018 to meet the updated standards.

Questions? Contact: pft@cpsa.ab.ca

Cannabis – what you need to know

Searching the facts

Cannabis will become legal in Alberta sometime this summer for non-medical use. AHS will be focusing on harm-reduction, helping to reduce the potential negative health risks, especially for those under the age of 25.

One of the health risks associated with cannabis use is the potential damage to the lungs. The Canadian Centre on Substance Abuse states that "Cannabis smoking has been related to a greater incidence of cough, wheeze, aggravation of asthma, sore throat, chest tightness, shortness of breath and hoarse voice. There is emerging evidence that quitting cannabis smoking can reverse some of the negative respiratory symptoms associated with its use".

AHS has made recommendations to municipal bodies to help in the development of cannabis regulations and policies to reduce unintended harm and decrease health risks.



[Cannabis](#)

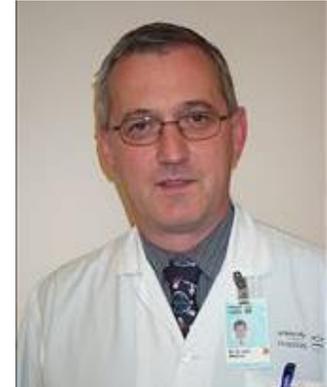
Spotlight

Dr. Dale Lien

One of our newest features for the newsletter is to highlight a member of our RHSCN team in each addition. Dale is an active member of our community and is a co-chair for our Core Committee:

I am a native Albertan who attended Medical School followed by Internal Medicine and Pulmonary training at the University of Alberta, and then a Research Fellowship at the National Jewish Center for Immunology and Respiratory Medicine in Denver, Colorado.

My main clinical interests are lung transplantation and pulmonary hypertension. I have been honored to be part of the respiratory community in Alberta which has always been close knit and has willingly worked together through our various past organizations including the Alberta Thoracic Society, the Alberta Lung Association, Alberta Breathes, and now the RHSCN which is a fabulous step forward and has become an invaluable tool to help us move forward our goal of improving respiratory health for all Albertans



Introducing

Mina Sisodiya

We would like to welcome Mina Sisodiya to our team. Mina is our new Senior Consultant and will be supporting both the Respiratory Health and Cardiovascular Health and Stroke SCNs. Mina's current priority with the RHSCN is to lead the PFT to Netcare project.

Mina received both her undergraduate and graduate degrees from the Faculty of Nursing at the University of Calgary. Throughout her nursing career, Mina has held a variety of roles focusing on improving access to health care



services for patients and families. Mina is excited to be a member of the SCN family and is looking forward to working with everyone to help improve the health care system.

Bravo!

We (CPSA Sleep Advisory) have just completed preliminary approval of the new Sleep Medicine Standards. I'd like to thank the RHSCN, Sachin Pendharkar, and the SDWG for the invaluable work in facilitating the standards development. The SDWG work saved countless days of work, in addition to minimizing potential controversies. This was a HUGE value add. Moving forward, work on Competency/Scope of Practice is clearly a priority both from a CPSA and CARTA perspective. I think the current method of SDWG engagement works really well! – Dr. Willis Tsai

New Patient Advisor

We are very happy to announce and welcome Linda to the Sleep Disorders Working Group (SDWG) as our newest Patient Advisor.

Linda was diagnosed with severe sleep apnea over a year ago, and in that short time has become very compliant with her treatment.

Linda is a strong advocate for the difference that CPAP treatment makes and we are eager to learn more from her perspective at our SDWG meetings.

