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Flu season 2018-19

The flu, also known as influenza, is a respiratory illness caused by a virus. Influenza is highly contagious and can be life-threatening for some population groups. During the 2017-2018 flu season, adults aged 65 and older accounted for 65 per cent of influenza-related hospitalizations and 85 per cent of deaths. Older adults with chronic heart and/or lung conditions are at much greater risk of death, and those who survive may struggle to cope with ongoing complications.

➔ [Find a flu clinic near you, visit ahs.ca/influenza](http://ahs.ca/influenza)

The breeze

Respiratory Health Strategic Clinical Network™ newsletter • Winter 2018



Connecting care for heart failure and COPD patients

Enhancing transitions in care between acute, community and primary care is the role of our COPD/HF team.

Together, the Respiratory Health SCN (RHSCN), Cardiovascular Health & Stroke SCN (CvHS SCN) and Primary Health Care Integration Network (PHCIN) work with Connect Care teams to ensure consistency and integration into the provincial Clinical Information System (CIS).

CvHS and RHSCN representatives and subject matter experts actively participate in Connect Care direction-setting sessions and help generate consistent, evidence-based clinical components.

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.

Edmonton Zone: focused efforts for individuals living with COPD

The Edmonton Zone Integrated Respiratory Care Steering Committee (EZ IRCSC) was created in 2017 to provide vision, leadership and direction to support the development of an integrated, patient-centred approach to respiratory care across the all health areas.

The EZ IRCSC is looking at factors involved in enabling timely and appropriate transitions of care and coordinating implementation of improved standardized, evidence-based practices. The RHSCN collaborates and partners with this group on several research and clinical projects.

 **Alberta Health Services**
Respiratory Health Strategic Clinical Network™

Inspiring solutions. Together.

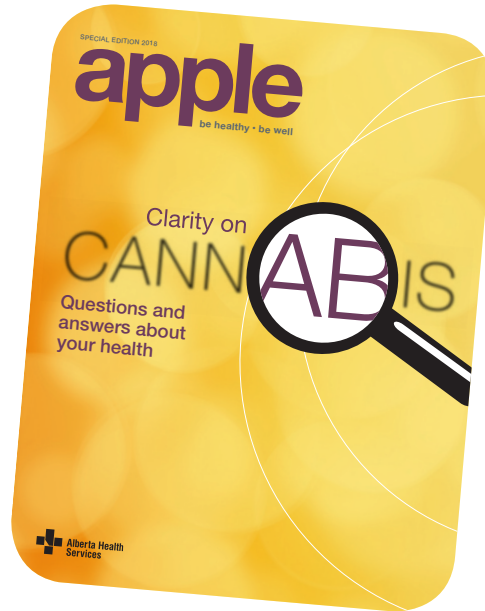


Effects of cannabis on respiratory health

Cannabis use became legal in Canada on Oct. 17, 2018.

Research indicates that smoking cannabis is harmful to the lungs and airways, and affects both the user and those exposed to second-hand smoke. Respiratory effects may be short-term (i.e. coughing, wheezing, shortness of breath, and chest tightness), as well as long-term (i.e. aggravation of asthma and symptoms of chronic bronchitis). Other respiratory health effects include inflammation of large airways, increased airway resistance, and lung hyperinflation.

Tetrahydrocannabinol (THC), the primary non-medicinal active ingredient in cannabis, might compromise the immune system of the lungs, leading to increased rates of respiratory infections and pneumonia.



➤ **Read more in Apple's special edition on Cannabis.**

Learn more about cannabis and its effects.

Optimizing oxygen practices

“Start the oxygen.”

How many times is that phrase uttered every day across the healthcare system?

Oxygen is the most commonly used drug therapy in Alberta—not always to the benefit of the patient. From discussion with clinicians and patients across the province and review of best evidence, it's clear an opportunity exists to explore further the appropriate and safe use of oxygen. RHSCN's Provincial Oxygen Practice team is ready to take this on.

We are looking at practice variations, risks to patient safety, as well as opportunities for education. Working closely with Health Professions Strategy & Practice (HPSP), this work will be phased in over the next few years and will focus first on acute care practice.

➤ **If you would like to know more or become involved, please contact us at respiratoryhealth.scn@ahs.ca**

Update from the RHSCN Scientific Office

This fall, the Scientific Office is focusing on several projects.

First, we are interested in bringing respiratory data to our community and using it to facilitate improved clinical outcomes, patient care, and our understanding of respiratory disease in Alberta.

Second, we are identifying research priorities. We want to use these priorities to guide our grants, studentships and focus for the next three to five years.

Last, we are beginning a project to identify the quality indicators that will define what great respiratory health looks like in Alberta. In collaboration with our community of practice, we plan to develop a list of quality indicators that can measure the ways in which we are making an impact for individuals with respiratory problems and their families.

Pulmonary function tests (PFT) to Netcare project

Access to timely information is critical for healthcare practitioners to make the right diagnosis and treatment decisions. This project focuses on making results of lung tests available on Netcare—an electronic system for Albertans' health information.

A team led by the RHSCN is making progress on goals to standardize reported values and metrics for a variety of lung tests and supporting accredited labs across the province to connect their test results to Netcare.

Testing has been completed for the software most commonly used in the testing machines (Vmax/Sentry Suite), as well as technical solutions to ensure it meets Netcare requirements.

We are now preparing our first two lung testing public labs to check the system. We will then have the first independent labs and the remaining public labs connected to Netcare by March 2019. Following that, we will support other interested testing facilities to get connected.

➤ **To learn more about this project, please visit ahs.ca/pfts**



Creating a roadmap

Reflecting on SCNs' direction in the future

Dr. Braden Manns

Dr. Braden Manns is the new Associate Chief Medical Officer for Alberta Health Services' Strategic Clinical Networks. In addition, he is the Svara Professor in Health Economics and a nephrologist at the University of Calgary in the Departments of Medicine and Community Health Sciences.

Dr. Manns' vision for the SCNs:

"The SCNs have accomplished a lot over the past six years, and we are set up for an exciting next five years. To guide us during the next five years, the SCN leadership team has been asked to develop a roadmap for the SCNs, identifying areas of focus that will help individual SCNs move their mandates forward, and enable SCNs to have a continued impact on the healthcare system beyond individual projects."



The Respiratory Health SCN leadership team

Shelley Valaire
Senior Provincial Director

Dr. Dale Lien
Senior Medical Director

Jim Graham
Executive Director

Dr. Michael Stickland
Scientific Director

Dr. Heather Sharpe
Assistant Scientific Director

Eileen Young
Manager

Congratulations!

Publication well-received

Dr. Sachin Pendharkar

Congratulations to Dr. Sachin Pendharkar for his publication of *Effectiveness of a Standardized Electronic Admission Order Set for Acute Exacerbation of Chronic Obstructive Pulmonary Disease* being accepted by the Bio Medical Centre Pulmonary Medicine.

This publication profiles results from RHSCN's pilot study of a standardized COPD admission order set.



 [Read the article on the BMC Pulmonary Medicine website](#)

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

