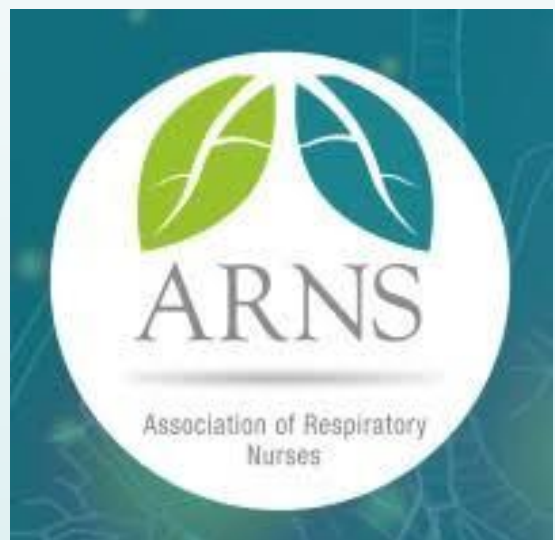


Developing structured clinical review templates in an integrated respiratory team during COVID-19: a qualitative review



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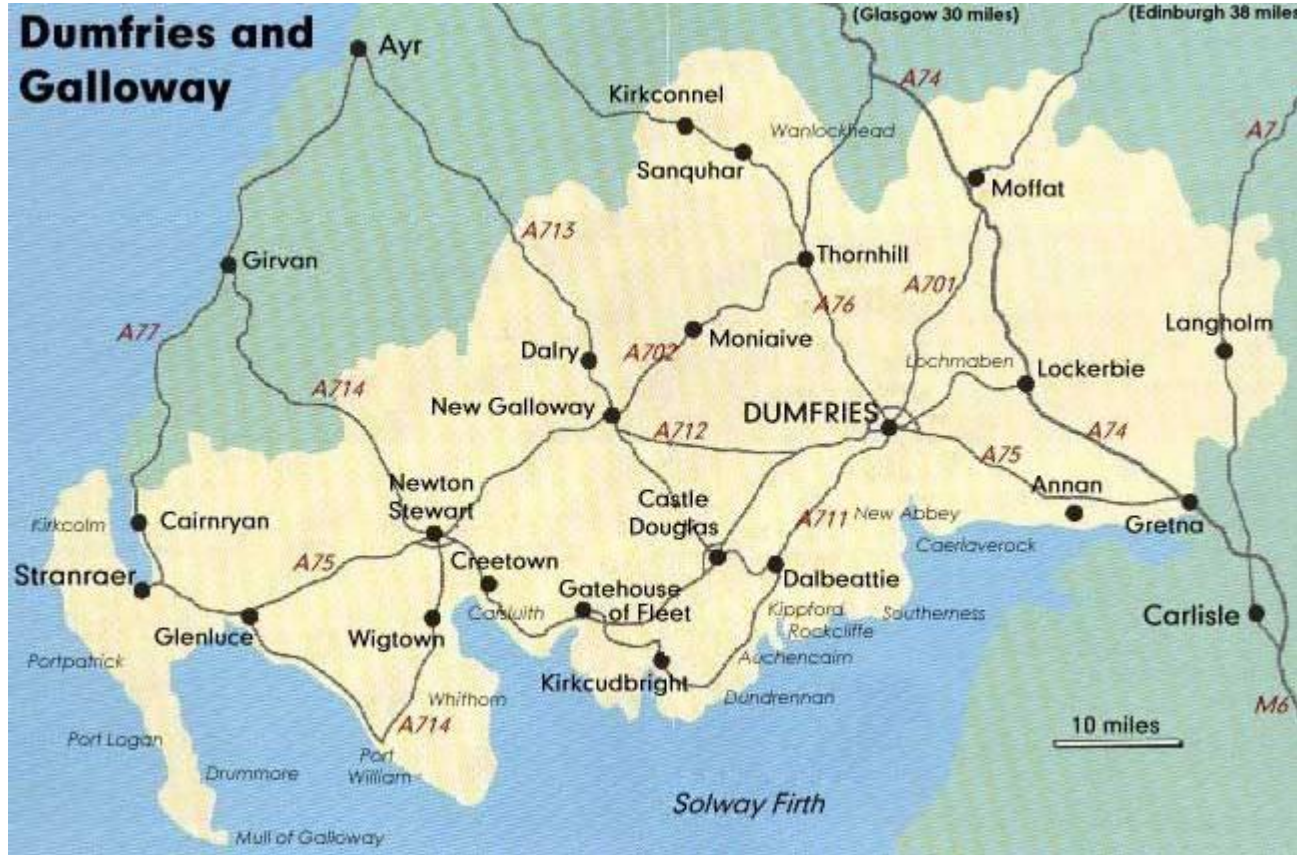
Introduction

In response to the SARS-CoV-2 pandemic in March 2020 and the requirement for adherence to strict infection control procedures and to maintain patient and staff safety measures, the Integrated respiratory team (IRT) were required to make major adjustments to their delivery of care model across the whole patient pathway. We collaboratively developed structured and guideline-based templates to support the whole team across primary and secondary care in conducting teleconsultation (telephone and video consultation) reviews of patients referred to our service. Patients had already been diagnosed with either sleep disordered breathing, chronic obstructive pulmonary disease, asthma, interstitial lung disease or had oxygen therapy requirements.



Aims

We aimed to deliver safe, effective, equivalent and guideline-based care using teleconsultation during a global pandemic.



Methods

Based on the structure of a previous sleep medicine review template developed by PM during her PhD, nine IRT members collaboratively developed content for the new templates to assist in clinical reviews. The content of the new templates were based on current published guidelines in these specific respiratory conditions. In February 2023 semi-structured interviews were conducted and recorded by PM with eight of the IRT members using Microsoft teams. The interviews were then thematically analysed using NVivo software.

KEY POINTS

- The development of guideline-based structured templates during the COVID-19 pandemic facilitated safe, structured and consistent reviews of people with asthma, COPD, oxygen assessment requirement and interstitial lung diseases
- The use of the templates during clinical reviews did not impact negatively on clinical autonomy, patient-professional relationships or patient-centred care
- The integrated respiratory team continue to use and refine the templates as new guidelines are published

Results

Qualitative analysis of the interviews revealed thirteen themes:



Conclusions

- The templates continue to be used by the IRT in all clinical settings demonstrating sustainability and their benefit has been realised beyond the pandemic.
- Refinements will be made to the templates as clinical guidelines are updated and published.
- The development of these innovative clinical review templates are perceived by the IRT as a service improvement that continues to be of value and may be of interest to other respiratory teams.

CPAP/NIV review template			
Name/Address label/NHS Number	Date	Age	Gender
The patient agenda for the review. What does the patient want to discuss? Do they have any concerns?		Wt.: Ht.: Adherence: Hours per night: BP: SPO2: TCCO2: ABGs:	
Acceptability of treatment	Are there any side effects from the treatment? Is the patient happy to continue treatment?		
Device/Mode	CPAP : APAP: NIV :		
Technical aspects of CPAP	Does the mask fit correctly? Is humidification required/ satisfactory? Is cleaning / filters changing routine satisfactory? Pressure Setting adjustments needed? Free text		
Objective assessment of sleepiness/driving issues	Objective assessment of sleepiness (Epworth Sleep Score): Are there any problems with sleepiness while driving? What are they driving: Car/Heavy Goods Vehicle?		
Epworth Score Stop Bang	Free text		
1.Sitting 2.TV 3.Lying 4. Reading 5.Talking 6.Public 7.Passenger 8.Driving	Have witnessed snoring, apnoeas, choking spells been controlled? Have initial symptoms improved/resolved?		
	Has CPAP/APAP/NIV resolved the Apnoea Hypopnoea Index? AHI : CAI : CHI : Mask Leak : Free text		
Assessing sleep quality/quality of life	What is the quality of sleep? Do they feel refreshed on waking? What are their sleep routines? Free text		
Insomnia severity index			
Lifestyle	Ask about work schedule/Shift Pattern Free text		