



The PCRS Respiratory Conference 2019 19th-21st September, Telford International Centre



The must-attend event for all healthcare professionals interested in developing best-practice and integrated respiratory care

- Enhancing
- Integrated
- Holistic
- Life-Learning



Fran Robinson reports on the PCRS National Respiratory Conference 2019 held at the Telford International Centre on 19th-21st September

Carol Stonham opened the PCRS National Respiratory Conference 2019 breaking the mould in her new role as the first woman and the first nurse PCRS Executive Chair.

A primary care respiratory nurse in Gloucestershire, Carol pointed out how far PCRS has evolved from its origins in 1987 as a GP only organisation into a multidisciplinary organisation led by an Executive Committee comprised of many different healthcare professionals.

She said PCRS had also progressed from focusing solely on respiratory disease to viewing things from a values based care approach taking

healthcare professionals to become ‘quit catalysts’ and keeping the conversation going to help patients to stop smoking

- Greener healthcare - PCRS’ newest campaign which focuses on appropriate prescribing of inhalers, recycling, reducing waste by getting the diagnosis right, checking inhaler technique, reducing unnecessary travel to and from appointments, prescribing high value non pharmacological treatment and encouraging self care.

She said the PCRS Conference was a chance for delegates to recharge their batteries. It was also

“ This is THE Respiratory Conference to attend - to challenge thoughts and processes and to encourage behaviour change! ”

into account holistic patient care, accurate diagnosis, multi-morbidity, patient activation and supported self-management. “These are now the core values of PCRS,” she said.

Carol explained that PCRS currently has three key campaigns, the themes of which ran throughout the conference:

- Asthma Right Care – a social movement to tackle patient overreliance on salbutamol in asthma
- Tobacco dependency as a long-term relapsing condition – which focuses on encouraging

an opportunity to network and she said she hoped that delegates would join the new PCRS online community where delegates could keep the conversation going and share ideas and problems: “I would encourage you to do this, it is a new way of working and is something we want you all to be a part of.”

Finally Carol urged delegates to take the learning gained from the conference presentations back to their practices and teams. She said she hoped this would inspire them to make changes to their practice.

What did the attendees think?



Fran Robinson reports on the feedback from delegates who attended the conference

This year 324 delegates attended the conference. The balance of healthcare professional disciplines comprised: doctors 22%, nurses 41%, physiotherapists 8%, pharmacists 8% and delegates in a non-clinical role 7%. Over 40% of attendees worked in GP practices with a further 26% working in community teams. The remainder were based in hospital based teams (15%) with an additional 9% from CCG/Health boards, and 10% from academia.

In feedback, most sessions scored as good or excellent. Of the plenary sessions the Grand Round scored particularly highly, two of the clinical sessions (COPD and Cough) also were amongst the highest scorers, with the service development pulmonary rehabilitation session also scoring very well. Several of the research sessions gained very high scores.

The most popular workshop sessions were the Strictly COPD, spirometry interpretation, helping people change, CBT and relaxation workshops.

Feedback has been extremely positive with recommendations for the future suggesting more of the same.

“ Coming from Northern Ireland I have had very little experience of the PCRS conference per se - but I am totally blown away with the calibre and quality of this conference and am committed to make it an annual event in my diary ”



“ This conference just gets better and better. It's fantastic to come and be energised to go back to my practice and change things for the better ”

Feedback from delegates

Sharon, community integrated care respiratory nurse

"I am a PCRS member and the PCRS has always been my go-to on the website for information and especially for clearing up conflicting guidelines. It speaks sense and makes everything understandable. So I decided to come to the conference and I have absolutely loved it. A highlight for me has been the session on helping people to change. I will take back from this the idea of celebrating success, even the small things – this is something I will introduce into the pulmonary rehabilitation groups that we run. Everything at this conference has been so relevant to my work."

Rachael, service lead, community respiratory nurse

"I've heard so many good things about the PCRS so I decided to come to the conference to find out what all the buzz was about. I work in a community service bridging the gap between primary and secondary care and I wanted to get a better understanding of what happens in primary care. I've picked up some really good ideas to take back to my team and I have also understood what training is needed to enhance the service provided by my team."

Nita, practice pharmacist

"I'm a first timer at this conference. I joined PCRS last year because of the resources. All the top people are here talking about respiratory it's very exciting. I've come along to understand what's currently cutting edge and to find out what's going to be happening in the future. This conference also helps to put everything into context – this is hard to find out when you are just working in your own area in your practice. It's a chance to meet people from other disciplines and other practices. A highlight for me was the presentation on allergy which has given me a much greater understanding of anaphylaxis."

Katie, senior respiratory nurse, integrated care

"I recently started a new role working in integrated care in community so came to the conference to find out more about primary care. "I have been very impressed – the education has been of a very high standard – hearing from the leading, reliable respiratory voices from around the country. I have been learning a lot of new things and it has helped me to understand the level that people are working at in the community. This will help me to provide a more effective service. Everybody has been very friendly and there has been a good selection of corporate people represented in the exhibition."

Athan, GP partner, the Wirral

"I have learned things at this conference that will help me change my practice. In particular the importance of getting the diagnosis right and checking with patients with asthma that they are using their inhalers regularly. I will definitely be coming again."

Angela, advanced nurse practitioner

"I have been coming to this conference for ten years. It gives me an excellent clinical update and there is always plenty to take back and share with the other respiratory nurses in my team. Highlights for me this year were the presentations on co-morbidities and ageing and COPD management. This is also a great place for networking – I always meet new people here."

Paul, a GP generalist

"This conference has given me a new enthusiasm for respiratory. I found the presentation on SABA over-reliance eye-opening."

Alice, respiratory physiotherapist

"My team has always been in previous years and have been very enthusiastic about the conference. It's a bit more real world than BTS or the ERS conferences for respiratory physios working in primary care. A highlight for me was the CBT session – I really enjoyed it and so did everyone else, there was standing room only. I have also found the posters very instructive in terms of things that I could be doing more of myself. This has been a great opportunity to network with other physios in my area. It has been very interesting to find out what other people are doing."

Karen, practice nurse

"This is a good way of getting a really good update in respiratory. I love the workshops at this conference – they are an excellent way to get a practical hands-on update. This year I really enjoyed the 'Strictly COPD' workshop – it was such a brilliant idea to engage people in dancing – it gave me a new perspective and will be something I will be encouraging my patients to think about." The other really useful presentation was the COPD management update which cleared up for me some of the confusion about the latest guidelines."

Christopher, GP, Scotland

"I'm a regular attendee. This is a very well organised conference and every year there's always something new and different and useful. I always take everything I learn back to the practice and share it with colleagues. It is also an opportunity to get an update on new products on the market – I come from a remote part of Scotland so don't tend to see any reps. It is worth the effort to travel from Scotland because you learn a lot in a short space of time – it is always well worth it."

Melanie, nurse practitioner and respiratory lead for a primary care network

"The speakers at the PCRS conference are always of a really high quality and the topics, posters and abstracts are always really interesting – every year I get so much out of this event. This year it has been even more interesting because it has become more diverse with all the difference disciplines. This has been really good for networking. I am in the process of setting up a FeNO clinic and have learned a lot of useful information."



The banner for the PCRS Respiratory Conference 2020 features a logo on the left with a stylized human figure inside a circle, labeled 'PCRS'. To the right of the logo are two stylized human figures, one blue and one green, with their arms raised. The main text reads 'The PCRS Respiratory Conference 2020' and '24th-26th September, Telford International Centre'. Below this, a blue box contains the text 'The must-attend event for all healthcare professionals interested in developing best-practice and integrated respiratory care'. To the right of this box is a legend with four colored circles: blue for 'Holistic', orange for 'Supporting', red for 'Integrated', and green for 'Greener'. A small blue box on the left says 'Put the date in your diary!'. At the bottom, a white box with a green border says 'Registration will open in February 2020'. Below that, a green box with a white border says 'To register your interest as a delegate or to find out about exhibition / commercial opportunities, please email info@pcrs-uk.org'.

The verdict of the conference co-chairs

Katherine Hickman:

"I think the 2019 conference was our best yet. The feedback that we have had has been overwhelmingly positive – people commented that everything ran smoothly and that we got the content of the sessions right.

"It was great to see such enthusiasm over the three days. Two of the workshop sessions – the Strictly COPD and CBT were very popular and had such a buzz about them. We hope to invite these speakers back next year and ensure more people experience their expertise.

"Delegates liked the fact that the PCRS Respiratory Conference gave them ideas for change that they could take back to their teams and implement straight away."

Anne Rodman:

"Conference in 2019 had a very positive response with ever improving evaluation scores and enthusiastic comments about how much delegates are looking for-ward to putting their learning into practice.

"Particular highlights included the ever popular case based and interactive Grand Round and a clinical session exploring the merits of the recent GOLD and NICE COPD guideline updates.

"The workshop sessions were also very well attended and highly rated. The conference app which allows audience participation and polling was also very helpful in fostering an interactive experience in many of the sessions and was rated very easy to use by this year's delegates.

"As usual the bar has been set even higher for next year's programme!"



The PCRS Respiratory Conference 2019

19th - 21st September, Telford International Centre

Thursday 19th September 2019

Hours	Event
1830-2000	Sponsored plenary: Asthma Management - Time for a New Approach? (Astrazeneca (UK) Limited satellite symposium) PCRS 1 (Ironbridge 1) Anna Murphy (Speaker); Graime d'Arcoona (Speaker); Heather Matthews (Speaker); Blinda Kane (Chair)

Friday 20th September 2019

Hours	Event																
0830-0900	Refreshments and exhibition PCRS 5 (Ironbridge 2 and 3)																
0900-1000	Plenary: Fit for the future - optimising respiratory care within the next 10 years of the NHS PCRS 1 (Ironbridge 1) Darush Attar-Zadeh (Panelist); Mike McKeivitt (Panelist); Deirdre Siddaway (Panelist); Katherine Hickman (Panelist); Carol Slonham (Chair)																
1005-1050	<table border="1"> <thead> <tr> <th>Clinical symposia</th> <th>Service development</th> <th>Research sessions</th> <th>Practical workshops</th> </tr> </thead> <tbody> <tr> <td>PCRS 1 (Ironbridge 1)</td> <td>PCRS 2 (Atcham Suite)</td> <td><i>in conjunction with npj Primary Care Respiratory Medicine</i></td> <td></td> </tr> <tr> <td></td> <td></td> <td>Oral presentations PCRS 3 (Wenlock Suite)</td> <td>PCRS 4 (Coalport 1)</td> </tr> <tr> <td></td> <td></td> <td>Poster presentations (Gallery)</td> <td>PCRS 4 (Coalport 2)</td> </tr> </tbody> </table>	Clinical symposia	Service development	Research sessions	Practical workshops	PCRS 1 (Ironbridge 1)	PCRS 2 (Atcham Suite)	<i>in conjunction with npj Primary Care Respiratory Medicine</i>				Oral presentations PCRS 3 (Wenlock Suite)	PCRS 4 (Coalport 1)			Poster presentations (Gallery)	PCRS 4 (Coalport 2)
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1210-1255	Sponsored plenary: Taking care of asthma patients in primary and secondary care (GlaxoSmithKline satellite symposium) PCRS 1 (Ironbridge 1) Ian Small (Chair); Brian Kent (Speaker); Nawar Bakerly (Speaker)																
1255-1355	Lunch PCRS 5 (Ironbridge 2 and 3)																
1355-1440	Sponsored plenary: Making the most of treatment in COPD: Optimise outcomes by treating the right people at the right time (Boehringer Ingelheim Ltd satellite symposium) PCRS 1 (Ironbridge 1) Richard Russel (Speaker); Stephen Gaduzo (Chair)																
1445-1530	<table border="1"> <thead> <tr> <th>Respiratory Disease in the Context of Co-Morbidities and Ageing</th> <th>The allied health care professional embedded in the respiratory pathway - Making the most of the available skills</th> <th>Patient (and clinician) centred research</th> <th>Scientific Research Abstract Poster Presentations and Discussion</th> <th>"Strictly" COPD</th> <th>Spirometry interpretation</th> </tr> </thead> <tbody> <tr> <td>Joanne King (Co-chair); Nicola Wood (Co-chair); Christopher Dyer (Speaker)</td> <td>Samantha Oughton (Co-chair); Deborah Leese (Co-chair); Raj Gill (Speaker); Mark Bliby (Speaker)</td> <td>Samantha Walker (Co-chair); Jane Watson (Co-chair)</td> <td>Patrick White (Co-chair); Debbie Roots (Co-chair)</td> <td>Sian Williams (Facilitator)</td> <td>Christine Loveridge (Facilitator)</td> </tr> </tbody> </table>	Respiratory Disease in the Context of Co-Morbidities and Ageing	The allied health care professional embedded in the respiratory pathway - Making the most of the available skills	Patient (and clinician) centred research	Scientific Research Abstract Poster Presentations and Discussion	"Strictly" COPD	Spirometry interpretation	Joanne King (Co-chair); Nicola Wood (Co-chair); Christopher Dyer (Speaker)	Samantha Oughton (Co-chair); Deborah Leese (Co-chair); Raj Gill (Speaker); Mark Bliby (Speaker)	Samantha Walker (Co-chair); Jane Watson (Co-chair)	Patrick White (Co-chair); Debbie Roots (Co-chair)	Sian Williams (Facilitator)	Christine Loveridge (Facilitator)				
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1650-1750	Plenary: Managing Breathlessness: the Breathing, Thinking, Functioning Approach PCRS 1 (Ironbridge 1) Karen Heslop-Marshall (Co-chair); Clare Cook (Co-chair); Anna Spithis (Speaker)																

1945-2015	Drinks Reception (Gallery)
2015-2359	Gala Dinner Ludlow Suite (Ground Floor)

Saturday 21st September 2019

Hours		PCRS AGM PCRS 2 (Atcham Suite)									
0745-0845	Clinical symposia PCRS 1 (Ironbridge 1)	Service development PCRS 2 (Atcham Suite)		Research sessions in conjunction with npj Primary Care Respiratory Medicine		Practical workshops		Research sessions in conjunction with npj Primary Care Respiratory Medicine		Practical workshops	
0850-0935	Journal Overload Luke Daines (Co-chair); Ren Lawlor (Co-chair); Steve Holmes (Speaker)	Presentation of Best Practice / Service Development Abstracts Noel Baxter (Co-chair); Dominika Froehlich-Jezonek (Co-chair)		Oral presentations PCRS 3 (Wenlock Suite)		Poster presentations (Gallery)		Oral presentations PCRS 3 (Wenlock Suite)		Poster presentations (Gallery)	
0937-0952	Plenary: Winning scientific research abstract: What informal carers of people living with breathlessness in advanced disease want to learn about "What to expect in the future" Morag Farquhar (Speaker); Carol Stotham (Chair)	Discipline specific This clinically orientated session will be designed specifically for generalist health professionals PCRS 2 (Atcham)		Discipline specific Organised in conjunction with ACPRC A dedicated session for respiratory physiotherapists involved in respiratory care PCRS 3 (Wenlock Suite)		Discipline specific Organised in conjunction with npj Primary Care Respiratory Medicine This session is designed for academic researchers PCRS 4 (Coalport 1)		Discipline specific Organised in conjunction with CPPE This session will appeal to pharmacists from all sectors with a respiratory interest PCRS 4 (Coalport 2)		Discipline specific This session is suitable for anyone keen to have a bigger impact on patient care and wants to find out how the PCRS Leadership programme can help them Beckbury 3/4 (Ground Floor)	
0955-1040	The Role of the Respiratory Nurse Specialist: Now and the Future Joanne King (Speaker); Debbie Roots (Speaker)	Community activation in achieving and maintaining better health Heather Henry (Speaker)		Where are we with Pulmonary Rehabilitation? Kelly Redden-Rowley (Facilitator); Rachael Colclough (Facilitator); Claire Davidson (Facilitator);		Publishing impactful primary care respiratory research - demystifying the publishing process Nicolas Faraget (Speaker)		A dedicated session for pharmacists with a keen interest in respiratory care - ask the experts! Anna Murphy (Speaker); Nipa Patel (Speaker); Poh Long (Speaker); Hejal Dhruve (Speaker); Fin McCaul (Speaker); Bernadette Brown (Speaker); Darush Altar-Zadeh (Chair);		The PCRS respiratory leadership programme - could this help me to make successful change? Clare Cook (Speaker); Deirdre Siddaway (Facilitator); Stephen Gatzuzo (Facilitator); Bronwen Thompson (Facilitator); Melissa Caravan (Facilitator)	
1040-1125	Refreshments and exhibition PCRS 5 (Ironbridge 2 and 3)	Service development PCRS 2 (Atcham Suite)		Research sessions in conjunction with npj Primary Care Respiratory Medicine		Practical workshops		Research sessions in conjunction with npj Primary Care Respiratory Medicine		Practical workshops	
1125-1210	SABA Guardians - creating the followers SABA over-reliance - the bottom up approach Bernadette Brown (Co-chair); Kathleen Clarke (Co-chair); Darush Altar-Zadeh (Speaker); Katherine Hickman (Speaker)	Respiratory diagnostic service design - The PCRS way Victoria McKeivie (Co-chair); Valerie Gerrard (Co-chair); Noel Baxter (Speaker)		Oral presentations PCRS 3 (Wenlock Suite)		Poster presentations (Gallery)		Oral presentations PCRS 3 (Wenlock Suite)		Poster presentations (Gallery)	
1215-1315	Plenary: Grand Round: Get Moving on diagnosis - Interactive case study discussion Iain Small (Facilitator); Neil Jackson (Panelist); Binita Kane (Panelist); Ruth De Vos (Panelist); Valerie Gerrard (Panelist)	Plenary: Chair closing remarks PCRS 1 (Ironbridge 1) Carol Stotham (Speaker)		Pulmonary Rehabilitation Rachael Evans (Co-chair); Morag Farquhar (Co-chair)		Nutrition, sarcopenia and respiratory disease Alex Jenkins (Facilitator)		Supported self-management Steph Taylor (Facilitator)		Integrated Care for Patient Benefit - Networking Session Vincent Mak (Speaker); Binita Kane (Speaker); Jon Bennett (Chair);	
1315-1330											



Any interactions with pharmaceutical stands in the exhibition area stands are for HCPs /ORDMs only.
A full list of exhibitors can be found at www.pcrs-uk.org/conference-exhibitors.

Appendix 1 – Key learning points as provided by speakers

The plenaries

Fit for the future: optimising respiratory care within the next 10 years of the NHS

Carol Stonham, PCRS Executive Chair and Senior Nurse Practitioner Respiratory Gloucestershire CCG led the debate with the panel: Mike McKeivitt, Director of Patient Services, British Lung Foundation, Deirdre Siddaway, Respiratory Nurse Specialist, The Ixworth Surgery, Darush Attar-Zadeh, Respiratory Lead Pharmacist, Barnet CCG, London Procurement Partnership and Katherine Hickman, PCRS Executive Vice Chair, GP Low Moor Medical Practice and Respiratory Lead for Bradford and Leeds.

Please see pages 13 for stream highlights.

Key points:

- The NHS Long Term Plan published in January gave respiratory care a national focus for the first time
- This means there is the potential to reshape future respiratory services and improve care
- PCRS and delegates can play a role in bringing about improvements in their localities and primary care networks in services such as pulmonary rehabilitation, smoking cessation, self care, social prescribing and community activation and new initiatives such as group consultations.

Managing Breathlessness: the Breathing, Thinking, Functioning Approach

Speaker: Anna Spathis, Consultant in Palliative Medicine at Addenbrooke's Hospital, Cambridge.

Learning points:

- Many patients continue to experience distressing breathlessness, even after optimisation of the underlying lung or heart condition.
- Chronic breathlessness can be inadvertently worsened by vicious cycles of emotional and behavioural responses.
- The Breathing, Thinking, Functioning clinical framework describes three predominant vicious cycles; it can facilitate symptom management by helping patients make sense of the symptom, and by suggesting the most relevant non-pharmacological management approaches.

Grand Round: Get Moving on diagnosis – interactive case study discussion

Chaired by Iain Small, GP, Peterhead Health Centre and Associate Medical Director for Primary Care in NHS Grampian, Editor of Primary Care Respiratory Update

This interactive session discussed three interesting cases with an expert panel comprising: Binita Kane, Consultant Chest Physician, Manchester University NHS Foundation Trust, Neil Jackson, PCRS Lay Patient Representative, Ruth de Vos, Specialist Respiratory Physiotherapist, Queen Alexandra Hospital, Portsmouth and Val Gerrard, Advanced Nurse Practitioner in general practice, North Norfolk. The session considered what might be causing the patient's symptoms and discussed how healthcare professionals could be doing things better

Learning points:

- Asthma and allergic rhinitis commonly coexist - always think of a single airway
- Asthma normally responds well to asthma treatment. If it doesn't respond the chances are it isn't asthma

Clinical stream

Managing cough and cough as a diagnostic symptom

Speaker: Kevin Gruffydd-Jones, GP, Box, Wiltshire, RCGP Respiratory Lead

Delegates learned:

- The causes of chronic cough in adults
- How to diagnose and manage chronic cough in primary care
- When to suspect pertussis, upper airway cough syndrome, bronchiectasis, gastro-oesophageal disease, chronic hypersensitivity/refractory cough
- When to refer

Respiratory related allergy

Speaker: Elizabeth Angier, portfolio GP, Clinical Director Primary Care West Hampshire CCG Wessex

Delegates learned the importance of:

- Taking an allergy focused clinical history
- The ability to recognise anaphylaxis
- Understanding the links between rhinitis and asthma

Primary Care Respiratory Update

- Optimising asthma control in patients with anaphylaxis
- Understanding of when to do allergy tests and how to interpret them

Respiratory disease in the context of comorbidities and ageing,

Speaker: Chris Dyer, Consultant geriatrician, Royal United Hospitals NHS Foundation Trust, Bath

Learning points:

- One in four people with COPD are frail
- Patients with moderate frailty should receive a comprehensive geriatric assessment
- Co-morbidities such as depression, osteoporosis and heart failure are more common in COPD
- Pulmonary rehabilitation can be suitable for some patients with frailty (must be able to walk 5m and comply)
- Rationalise treatment in frail patients and consider medication concordance

COPD Management: When all that glitters is not GOLD nor is it even NICE

Wendy Preston, Head of Nursing Practice, Royal College of Nursing, Consultant Nurse, George Eliot Hospital, Nuneaton, Warwickshire and Vincent Mak, Consultant Physician in Respiratory Integrated Care, Imperial College Healthcare NHS trust, London, Clinical Director Respiratory Clinical Network - NHSE London, discussed some current concepts about COPD so as to understand treatment choices. It described pharmacological treatment options in various recent guidelines highlighting the differences and similarities and discussed how to choose between the guidelines

Learning points:

- COPD is not a single disease
- Severity of FEV1 does not accurately predict symptoms or quality-of-life and is not useful to determine drug treatment
- Patients can be classified according to the predominant symptom (phenotype)
- Not all COPD patients will benefit from inhaled corticosteroids
- Using the PCRS treatment approach is simple and recommends review before initiation of inhaled steroids

Journal overload

Speaker: Steve Holmes, GP and PCRS education lead

Learning points:

- To be aware of papers published in 2019 that challenge respiratory thinking
- To consider some ways in which research papers can be easily analysed.

- To be aware of some non respiratory papers that impact significantly on our patients and the way should practice

SABA Guardians- creating the followers – SABA over-reliance – the bottom up approach

Speakers: Darush Attar-Zadeh, Respiratory Lead Pharmacist Barnet CCG, RightBreathe Pharmacist, Barnet CCG, London Procurement Partnership. Katherine Hickman, PCRS Executive Vice Chair, GP and respiratory lead for Bradford and Leeds

Delegates learned:

- Why Asthma Right Care (ARC) is needed and how to become an ARC follower.
- How to identify patients who are at risk of SABA over-reliance/dependence.
- How to start the conversation about SABA over-reliance (patients and clinicians)
- How to utilise the ARC resources in primary care and community pharmacy e.g. asthma slide rule
- What communication skills to use around use of inhaled corticosteroids 'Balance model'

Service development steam

Respiratory service design for the hardly reached and seldom heard

This session gave delegates an insight into some innovative ways of helping these patients who often don't receive a structured respiratory review and have nobody in their corner to fight for them.

- Sukhi Sandhu, TB Clinical Nurse Specialist, Frimley Health NHS Trust talked about TB which is much more common in the homeless drug users and prison populations. She explained how to find these patients, overcome the barriers and engage them with therapy.
- Charlotte Slaughter, Assistant Clinical Psychologist, Berkshire Healthcare NHS Foundation Trust (East) described how to help housebound patients with COPD who struggle with anxiety and depression. CBT can help.
- Tracy Pollard, Nurse Manager, Inclusion Healthcare, Specialist Practitioner and Non-medical Prescriber in a GP practice, gave a presentation on tackling influenza in the homeless population. In these patients rates of smoking and comorbidities are high and their vaccination rates differ from the general population with similar comorbidities.
- Chris Allen, Consultant Clinical Psychologist, Berkshire NHS Foundation Trust, discussed the service he runs which helps people with COPD, particularly those who are housebound or live in a care home, who have high levels of anxiety.

He explained how he identifies these patients, the referral process, what criteria he uses to assess anxiety levels in the patient and the interventions such as CBT that he uses to help patients manage their breathlessness and associated anxiety and depression.

Key points:

- Cost-savings can be made if people are able to self-manage and therefore use services less
- Integrating physical and psychological care for COPD patients is the way forward

Respiratory care and the NHS Long Term Plan

Speaker: Daryl Freeman, Associate Director in Primary Care, GP Older People's Medicine, Norfolk Community Health and Care

This session enabled delegates to:

- Understand how NHS Right Care enables the delivery of the Long-Term Plan and other NHS priorities
- Appreciate the breadth of data available
- Understand the role of delivery partners within right care NHS Right Care
- Be aware of the PCRS Respiratory Framework

The allied health care professional embedded in the respiratory pathway – making the most of the available skills

Speaker: Raj Gill, General Practice Physician Associate with a special interest in respiratory medicine and partner at the Swiss Cottage surgery in North Central London

Key learning points:

- Definition of the physician associate
- Training of physician associate
- Key duties of physician associate
- Limitations and regulation of the role
- Impact of physician associates on respiratory care

Mark Bilby, Advanced Paramedic Specialist Practitioner, Watton Medical Practice, explained the role of allied health professionals, physician associates, support staff and the multidisciplinary team in primary care.

Making time for comprehensive respiratory care using the group consultation

Speaker: Alison Manson, Group Consultations - national training lead, BSLM. Katherine Hickman, PCRS Executive Vice Chair, GP and respiratory lead for Bradford and Leeds

Learning points:

- Understand what group consultations are and how they can

- support you to deliver high quality routine care more efficiently
- Know the benefits of group consultations for you, your patients and your practice
- Hear from patients and colleagues who have experienced group consultations
- Review the 6 critical success factors to get you started

Respiratory diagnostic service design – The PCRS way

Speaker: Noel Baxter, PCRS policy lead

Delegates learned the importance of:

- Taking a view on whether you want a COPD and asthma diagnosis service or a respiratory symptom diagnosis service.
- Planning and prioritising for those not diagnosed, those diagnosed incorrectly and the backlog.
- Being able to think differently about who can do this work and what local structures you have that could support it
- Being able to make the case to your commissioner and clinician directors to do things differently
- Knowing that we want your contribution and how to contact us to do that!

Workshops

Helping people to change

Katherine Hickman, PCRS Executive Vice Chair, GP and respiratory lead for Bradford and Leeds, introduced Dr BJ Fogg's behaviour change model, Tiny Habits® which works on the principle of creating a new habit by anchoring it to a behaviour such as getting out of bed that someone normally does every day in their life. This could be used to help patients to remember to take their ICS once or twice a day. Once this behaviour change has been achieved it should be celebrated.

Using the Right Breathe App

Speaker: Darush Attar-Zadeh, pharmacist based in the community and primary care, specialising in the field of treating tobacco dependency and Asthma Right Care.

Delegates learned:

- That technology can support your respiratory consultation
- How to discover treatments that are licensed for COPD and asthma using pathway and filter functions
- How to filter medicines e.g. low dose ICS, dose counter, spacer compatibility
- To understand the differences between the app and website - patient and clinician modes.
- How RightBreathe inhaler technique videos are scored against UKIG standards

Primary Care Respiratory Update

CBT in a 10 minute consultation

Speaker: Karen Heslop-Marshall, nurse consultant, Newcastle upon Tyne NHS Foundation Trust

CBT-key concepts:

- It is not the event that is important-it is what we think about it
- What we think affects how we feel and what we do

Spirometry interpretation



Speaker: Chris Loveridge, Spirometry Lead, Education for Health

This session covered:

- The ARTP Accredited Spirometry Register - proof of competence
- Your COPD register-misdiagnosis or even missed diagnosis
- Patient preparation, procedures and protocols
- Case studies.

“Strictly” COPD



Sian Williams, Healthcare Consultant, Haringey and Chief Executive of the International Primary Care Respiratory Group gave delegates an opportunity to experience the type of movement to music that works for breathless patients on rehabilitation programmes.

Smoking cessation techniques hands-on session

Speaker: Greg Mann, Team Lead and Training Facilitator, Smoke-free Norfolk

Delegates learned:

- How to engage with smokers by using the ‘3 A’s’.
- What stop smoking medications are available.
- What the nicotine addiction process is and how to manage withdrawal.
- How a specialist stop smoking service can help.

Getting your patient moving

Speaker: Claire Cook, respiratory physiotherapist and Executive Chair of the PCRS Respiratory Leaders Programme.

Learning points:

- Have the confidence that you can help motivate your patients to be more active
- Posture plays a key role in natural relaxed breathing
- Know what simple exercises help make patients aware of posture and breathing
- Know where to recommend patients to continue exercising safely

Relaxation and breathing techniques

Speaker: Kate Binnie, Senior Research Associate, University of Bristol, Life of Breath project

Learning points:

- Breath-Body-Mind integration breathing and relaxation techniques can help patients with chronic breathlessness
- Working with urgent bodily sensations leads to quick wins such as soothing panic and breathlessness

This leads to changes in:

- Feelings (anxiety, fear/hopelessness)
- Behaviour/self-efficacy, which can affect clinical outcomes, compliance etc.
- Body-emotions-actions.

Nutrition, sarcopenia and respiratory disease

Speaker: Alex Jenkins, non-clinical researcher, Biomedical Research Unit, Nottingham City Hospital

Learning points:

- Sarcopenia is common in stable COPD. Interventions such as pulmonary rehabilitation have the potential to reverse the condition
- Sarcopenia can be categorised as: pre-sarcopenia (low muscle mass without an impact on muscle strength or physical performance), sarcopenia (low muscle mass and low muscle strength or physical performance), and severe sarcopenia (low

muscle mass combined with low muscle strength and poor physical performance)

- Malnutrition can be categorised as low, moderate or high risk using the MUST scoring tool
- Handgrip strength, timed-up-and-go test and short physical performance battery, are useful functional measures for identifying sarcopenia
- The SARC-F is a quick and easy tool for screening for sarcopenia

Research stream

The *npj Primary Care Respiratory Medicine* research stream was a great success, with a high quality selection of 63 abstracts presented.

PCRS Research Lead Helen Ashdown said: “This year we moved, for the first time, to an ‘elevator pitch/short oral’ style of presenting, which gave more authors the opportunity to present their research orally and for really interesting discussion to take place which hopefully will help shape the research as it moves towards publication.”

A pre-conference workshop aimed at early-mid career researchers was attended by a multi-disciplinary group of researchers at various career stages.

The focus of the talks was on integrated care. The first presentation was from Sarah Elkin, Clinical Director of Integrated Care at Imperial College Healthcare NHS Trust, who explained how research underpins the future of integrated care, and how we can embed research into integrated care models. The second was about research integrated with industry. Delegates heard two perspectives on industry collaboration from Sue Collier (GSK) and GP Athan Simopoulos on how researchers can become more involved in this.



These presentations were followed by a motivating talk from Nick Francis on preparing a research funding application. Delegates then broke into small themed groups to talk about current issues in primary care respiratory research and fed back to the room.

“I left feeling inspired by all the research potential and with ideas for the future, and having made some new contacts and potential collaborations, and I feel really positive about research being an increasing part of respiratory primary care and adapting with the changing times,” said Helen.

You can view a selection of the research abstracts on pages 40–50