

Cross-Party Group on Lung Health

Minutes of Meeting – 21st June 2021

MSPs Attending: Emma Harper MSP, Alexander Stewart MBE MSP, Monica Lennon MSP

External Attending: Gareth Brown, Joseph Carter, Dr Tom Fardon, Sally Hughes, Colin Brett, Mike Parker, Katherine Byrne, Linda McLeod, Michael Brown, Agnes Whyte, Dr William Anderson, Nicola Roberts, Dr Phyllis Murphie, Julie MacDougall, Lesley Hill, Maureen Ward

Apologies: James Dornan MSP, Dr George Chalmers

AGM

1. Welcome
 - Alexander Stewart MSP and Emma Harper MSP welcomed attendees to the first CPG on Lung Health meeting of the new parliamentary session. The MSPs spoke of the joy at being re-elected and the chance to continue with the CPG.
2. Election of Office Bearers:
 - a. Co-Conveners:
 - Emma Harper nominated MSP by Alexander Stewart, seconded by Dr Tom Fardon.
 - Alexander Stewart MSP nominated by Emma Harper, seconded by Katherine Byrne.
 - b. Depute Convener:
 - Mark Ruskell MSP nominated by Emma Harper, seconded by DR Phyllis Murphie.
 - Joseph Carter confirmed that Mark Ruskell would be keen to continue as Depute Convener although he could not attend. This was accepted by the Conveners.
 - c. Secretary
 - Emma Harper MSP nominated Asthma UK and British Lung Foundation Scotland, seconded by Alexander Stewart MSP.
3. Close of AGM
 - Emma Harper welcomed Monica Lennon MSP to the Cross-Party Group and concluded the AGM part of the meeting.

First Meeting of the CPG on Lung Health – Session 6

The meeting was hosted on Facebook by Asthma UK and British Lung Foundation Scotland. To watch the live recording of the meeting - https://fb.watch/88o_74pMxg/

1. Welcome

- Emma Harper (EH) welcomed everyone to the first meeting of the CPG and thanked all for attending. Emma also highlighted the MSPs who are Asthma UK and British Lung Foundation Scotland Lung Health Champions.
- Emma then pointed out that Sleep Apnoea as our main topic today and invited Tom Fardon (TF) to provide his update on agenda item 2 and before he introduced Dr Phyllis Murphie (PM) and Dr William Anderson (WA) who will discuss Sleep Apnoea.

2. Update and Respiratory Care Action Plan – Dr Tom Fardon

- TF provided an update on the Respiratory Care Action Plan (RCAP) and showed a presentation ‘Supporting Redesign in Respiratory’.
- TF then highlighted that he was the clinical lead for the RCAP and the discussed the process involved in creating the RCAP and emphasised the need to understand the pathways in respiratory medicine.
- TF said was Chair of the National Action Group when he was asked to lead on the RCAP, which is part of a national performance framework.
- TF said the next steps are implementing the RCAP and over a five year period and that the RCAP covers around 90% of respiratory conditions through the main five diseases.
- TF highlighted that COVID-19 came along during the process of developing the RCAP and that has been reflected in the plan.
- The RCAP focuses on priority areas prevention and TF showed slides relating to smoking and vaccinations, such as COVID-19 and flu vaccinations. TF pointed out that the best year for flu vaccines in NHS Tayside was in 2020, which he believed comes down to promotion and advertising.
- TF emphasised that pathways are complex in respiratory conditions, they are opaque and need fixed. However, wasn’t unique to respiratory.
- TF welcomed the chance to engage with the CPG virtually because of the opportunities presented by online meetings, rather than the difficulties of attending in the Scottish Parliament.
- TF then raised the next part of RCAP which is diagnostics, saying they need to be improved and that diagnostic services are slowly reopening but are patchy.
- The next step of the RCAP is supporting self-management and care and TF pointed out that pulmonary rehab has not available during the pandemic, however when it returns it need to be done well, funded, available and well-staffed and that a succession plan is needed for staff retiring.
- TF then showed slides relating to the variations in vaccination rates, smoking rates and unscheduled COPD admissions to highlight the inconsistencies across Scotland, while pointing out there will never be equity due to regional variations but everyone should have access to care.
- The final part of the RCAP, covering Our Workforce and TF reinforced the need for more specialist nurses and staff to cover respiratory as called for by patients’ groups and staff.
- With regards to the five main lung conditions, TF hoped that there would be specialist leads in the five areas to take a lead, to work with the community, to share best practice and that Sleep Apnoea will be led by Dr Phyllis Murphie and Dr William Anderson.

3. Obstructive Sleep Apnoea discussion – Dr William Anderson and Dr Phyllis Murphie
- WA began by showing a presentation ‘Obstructive Sleep Apnoea (OSA): Modernising Patients Pathways/Respiratory Care Action Plan’.
 - WA introduced himself as a respiratory physician from NHS Tayside with 10 years’ experience working on sleep apnoea. WA was also, the Clinical Lead for OSA in Tayside.
 - Talked about OSA and set out what the issues are and what the plans are for the next year during the modernising patient pathway programme.
 - WA showed the unmet need of OSA, the numbers of people in the UK with OSA and the numbers currently undiagnosed and highlight the economic and health benefits of the treating and diagnosing sleep apnoea.
 - Highlighting the OSA diagnoses and treatment considerations, WA set out some of the problems facing OSA and how services are designed – i.e., High Complexity and Low Volume vs Low Complexity and High Volume.
 - WA talked about other potentials pathways involved in patient’s pathway, such as PSG Centres, lack of diagnostic ability, skill mix of medical staff and drive for better services at lower costs. WA then followed this by highlighting the effectiveness of individual services from GP referral and the steps taken after.
 - WA then posed the question about starting services from scratch – national vs local planning, more nurse and/or physiologist delivered services, role of GPs.
 - WA pointed out that costs will spiral if pathways aren’t improved before raising the principles and aim of OSA Managing Patients Pathway Programme.
 - The Project Outline was discussed by WA which was to begin in July/August 2021 with service engagement, followed by data collection, services mapping, targeted solutions and then evaluate the success.
 - WA then introduced PM who presented the CPG with a presentation ‘Telemedicine and Sleep Medicine Services.’
 - PM spoke of her experience and delighted of working with WA and TF.
 - PM highlighted the vital risks of not treating OSA by making patients aware of the condition and supporting self-management.
 - There are a range of telemedicine and personalised therapies as shown by PM such as CPAP and personalised sleep medicine to add value for patients and cost effective savings for the NHS and patient.
 - PM highlighted to the CPG the number of research trials and papers on the evidence for telemonitoring and teleconsultations for OSA.
 - PM then outlined some of the impacts of COVID-19 for people with OSA from the beginning of the pandemic in March 2020 and the need for research and innovation to get services and treatment back. PM also showed from of the messages from Scottish Sleep Forum on what the situation has been like for OSA during the pandemic and that restarting services is not a redesign.
 - Diagnostic innovations were highlighted by PM, showing a range of digital and smart devices and apps. PM pointed out that these can be used to help the backlog of patients needing to be diagnosed and supported.
 - PM then showed some of the treatment innovations such as smarter CPAP/APAP devices to enable patients to self-manage, supporting patient’s app/clinician web-based platform.

- PM said that the role of telemedicine in the review of people with OSAS using CPAP is very important part of the care pathway as they remobilise service, that there is value and economics in people not having to travel.
 - EH thanked Dr Tom Fardon, Dr William Anderson and Dr Phyllis Murphie for their presentations and asked for questions to be put in the Zoom chat function.
 - EH then asked Alexander Stewart (AS) MSP if he would like to chair the Q&A part of the session. AS agreed and questions were put to the speakers:
 - EH asked about the economic impacts and analysis of OSA telemedicine.
 - WS said the most important part is identifying people with OSA and their work and personal life can be heavily impacted, highlighting the right pathway for people who require CPAP and not needing additional medical care.
 - PM stated that the research can be done as has been done in Dumfries and Galloway via the Chief Executive's blog.
 - WA and PM agreed that having someone to work on the economics as part of the programme would be helpful.
 - AS asked about consistencies across health boards and how the speakers can manage that consistency, due to people wanting to have that presence in well-skilled and engaged health boards.
 - PM responded to say that there is a lot of work to do to analyse current work and the purpose of the steering group is to benchmark starting points and identify bottlenecks to being around solutions and share best practice.
 - WA added that the variation in consistencies depends of the engagement of those who want to see change and have an interest in seeing the right changes and where to find clever solutions for areas that have no interested person.
 - AS further added that the Cross-Party Group or Parliament can play a role.
 - EH posed the question of asking similar questions to those linked to smoking cessation, such as VBAs, to identify people who may have OSA symptoms.
 - WA said that he agreed that screening questions could be useful in areas such as weight management clinics, but it would not be worth asking every patient in primary care because you could overwhelm the current services further.
 - Joseph Carter (JC) thanked the three speakers for their time today and informed the CPG that he and Gareth Brown (GB) met with the new Minister for Public Health, Women and Sport who was keen to implement the RCAP. JC also pointed out that the OSA MPPP was an exciting model to replicate to other areas of RCAP following positive discussions with the Scottish Government.
 - No further questions were asked and AS asked EH to close the meeting.
4. Date of next meeting
- EH said that the next meeting would likely be September after the summer recess and asked GB if a date was considered.
 - GB responded with Monday 27th September 2021.
 - Monday 27th September was agreed to by the Conveners and that it would be online.
5. AOCB
- No AOCB.
6. Close of meeting
- EH thanked everyone for attending before closing the meeting.