

## Collaborative Commissioning SENSW COPD - Q&A

### **Question 1: Room Suitability for Spirometry Testing**

#### **Are there concerns about having a suitable room for spirometry testing?**

Yes, there are concerns about the suitability of the treatment room for spirometry testing due to airflow and availability issues.

### **Question 2: Room Requirements**

#### **What are the specific requirements for a room to conduct spirometry testing?**

A consult room is typically used, and the spirometry machine's disposables are given to the patient, meeting the requirements.

### **Question 3: Current Room Usage**

#### **If Respiratory Scientist (Jay) were to come tomorrow, where would the spirometry testing be conducted?**

The treatment room is currently being used, but there are concerns about airflow and room availability.

### **Question 4: Training for Nurses**

#### **Will Respiratory Scientist (Jay) be responsible for training all the nurses in spirometry?**

Various training options are available for nurses, including face-to-face, online, or a combination.

### **Question 5: Shadowing and Reinforcement**

#### **Can nurses shadow Respiratory Scientist (Jay) during spirometry clinics to reinforce their training?**

Nurses can shadow Jay during spirometry clinics to reinforce their training and ensure accurate tests.

### **Question 6: Patient Volume and Scheduling**

#### **How will the scheduling work with Respiratory Scientist (Jay's) visits, considering the patient volume?**

Initially, there will be a high volume of patients, but this is expected to decrease over time. Jay will rotate visits to different practices.

### **Question 7: Support for COPD Patients**

#### **How will COPD patients be supported in the community?**

CNC nurses assist COPD patients with their transition back into the community, with one based out of Bega hospital.

### **Advice from Respiratory Scientist re GOLD Spirometry Guide and Testing Frequency and Location.**

The guidelines around having time between each spirometry test to allow the air in the room to circulate were put in place during COVID.

The advice at the time was that spirometry should not be done at all in general practice and limited only to specialist respiratory function laboratories. Many GP practices were not using filtered mouthpieces and this posed a significant infection risk.

This advice has long been discontinued with GPs now encouraged to return to spirometry testing and the current infectious disease control advice provided through the public hospital system is that testing should return to business as usual. As long as the room has adequate ventilation and is the size of a general consultation room then performing serial testing is fine.

The commissioned Respiratory Scientist also uses the highest grade filtered mouth pieces that far exceed N95 levels of filtration, thereby limiting aerosols potentially generated during spirometry. Patients who are febrile or otherwise acutely unwell should not proceed with having spirometry. If there is any concern about the suitability of the available space at the practice the respiratory scientist is happy to review and discuss this prior to his visit.