National Lung Health Framework
Highlights 2012
A vision for lung health in Canada
Excellent respiratory health for all in Canada

Mission of the National Lung Health Framework
To advance the respiratory health of all people living in Canada through collaborative and equitable patient care, policy, programming, research and leadership

Table of Contents

- Message from the Chair of the National Lung Health Framework .................................................. 3
- Goal Area 1: Health Promotion, Awareness and Disease Prevention .............................................. 4
- Goal Area 2: Disease, Detection and Management ........................................................................... 6
- Goal Area 3: Policy, Partnerships and Community/Systems Support ............................................. 8
- Goal Area 4: Research, Surveillance and Knowledge Translation .................................................... 10
- National Lung Health Framework Blueprint for Action ................................................................. 12
- Looking Forward .............................................................................................................................. 14
- In Appreciation ................................................................................................................................. 16
The goal of the National Lung Health Framework was to deliver a plan that would serve as a catalyst for change—building partnerships, sharing best practices and identifying gaps and opportunities in the respiratory health community. Supported by initial investments from the Federal government and the Lung Association and its partners, preliminary work on the Framework brought together diverse lung health stakeholders from around the country to identify and establish key strategies and activities that when implemented would significantly impact respiratory health in Canada.

Initial federal funding to support the development and implementation of the National Lung Health Framework expired on March 31, 2012. We have come a long way from the preliminary discussions that led to the development of a National Lung Health Framework. Using the Framework as a roadmap, lung health stakeholders have risen to the challenge and together we are acting on the strategies and activities and improving lung health. Collective action has resulted in; increased awareness of the preventable and modifiable risk factors for lung disease, coordinated efforts to drive a national respiratory research strategy, identification of best practices for improving health outcomes and legislative and policy changes that support improved lung health.

Key reports developed in partnership with the National Lung Health Framework have provided insights on the increasing economic burden of three of the major lung diseases; lung cancer, asthma and chronic obstructive lung disease. Without any further action the combined direct and indirect costs of these three respiratory diseases alone is expected to grow from just under $12 billion in 2010 to over $24.1 billion by 2030—representing an increase of 101 percent. Lung health stakeholders across Canada understand that a key strategy to address the economic burden of lung disease is to mitigate associated risk factors and are poised and ready to take action.

This report provides highlights of lung health activity in each of the goal areas, recognizes significant contributions and identifies future directions for the ongoing implementation and evolution of the National Lung Health Framework.

Sincerely,

Mary-Pat Shaw
Chair, National Lung Health Framework
Interim CEO, The Canadian Lung Association
Goal Area 1
Health Promotion, Awareness and Disease Prevention

Goal: To prevent and moderate the impact of respiratory illnesses through the development and implementation of effective, coordinated health promotion, awareness, exposure reduction, and smoking prevention/cessation activities.

3-week Cough Campaign

Link to NLHF Strategy
1.2: Increase awareness, knowledge, and understanding of—and active engagement with—respiratory health issues by the public and all stakeholders.

The cough awareness campaign focused on prevention, detection and self-management of lung disease using tools and interventions that increase awareness of cough as a symptom of a lung disease. The campaign focused on people who have been living with a cough that has lasted three weeks or longer and is not improving. The goal was, to reach people who might have an acute exacerbation of their lung disease, people with poor disease management, as well as, those living with an undiagnosed lung disease.

The month long media campaign utilized humour as an approach to reach out to consumers and encourage them to learn more about a cough that lasts longer than three weeks by visiting the website- www.3weekcough.ca. Once on the site visitors were able to take an online quiz providing education on cough and chronic lung disease management.

Highlights of the cough campaign

- Over 40,000 unique visits to the cough microsite
- 24,594 unique visitors accessed the quiz
- Average time spent on quiz: 2:01 EN, 2:26 FR
- Guide developed to assist physicians in the diagnosis of acute, sub-acute and chronic cough in adults

Clean Air Champion, Jake Cohn, meets and greets lung health stakeholders at the Canadian Respiratory Conference 2012, Vancouver, BC. Photo courtesy of Canadian Respiratory Conference 2012.
Strategies
1.2: Increase awareness of the impact of environmental issues on respiratory health—at work, at home at school and at play.
1.4: Reduce exposure to environmental air contaminants by influencing people to avoid exposure and to reduce their own contributions to indoor/outdoor air contaminants.

Air Aware
The Air Aware program takes an innovative approach at reaching out to Canada’s youth by engaging high performance athletes to educate youth about lung disease (primarily asthma) and the links to air quality. The program delivered three distinct modules geared to; schools, sport and recreation groups and coaches. Program participants learned how to prevent negative impacts on their lung health, including learning how to use the Air Quality Health Index to assist in the development of a self-management plan.

As a program promoting physical activity in the classroom as well as on and off the sports field, the impact on the physical health of youth expands beyond asthma and respiratory health to include obesity, diabetes and smoking. The program works to reduce the incidence of ‘benched athletes’ who do not play or practice due to coaches being ill-equipped to deal with asthma or unaware of ways to adjust training for triggers like poor air quality.

Air Aware breaks down traditional silos by engaging partners from a range of industries and by placing health and related environment issues at the forefront. This pioneering work demonstrates how multiple Ministries (Health, Environment, Transportation, Heritage/Sport Canada) support common goals that address critical issues affecting millions of Canadians.

Air Aware at a glance

Schools
- 78 class presentations in schools
- 25 school boards in 10 provinces
- Reaching over 7,000 students, coaches, teachers and family members

Sport/Rec community
- 50 community presentations
- Reaching over 5,000 coaches, parents and administrators and 3,000 active youth

Coaching
- Developed and launched the first ever high-performance coach e-learning module in partnership with the leading coaching certification body in Canada.

The National Lung Health Framework is an excellent example of the types of collaborative, effective action necessary to address respiratory disease in Canada. By empowering stakeholders working towards the prevention and management of lung disease in Canada, in all jurisdictions and multiple sectors, we are able to highlight gaps, share knowledge and bridge jurisdictional and sectoral challenges.”

—Deirdre Laframboise, Executive Director, Clean Air Champions
Goal Area 2
Disease, Detection and Management

**Goal:** Improve the health outcomes and quality of life for everyone in Canada through early detection and better management of respiratory diseases.

**Taima TB Program**

*Link to NLHF Strategies*

1. Implement earlier detection
2. Promote a system of inter-disciplinary health care teams for the management of respiratory diseases
3. Promote patient empowerment and self-management

The goals of the Taima TB public health campaign was to:

1) raise awareness about TB,
2) provide in-home screening for latent TB infection for people who live in areas of the community with a high incidence of TB, and
3) provide treatment for individuals who are at high risk for developing active TB.

The project featured a new approach to educating and screening for TB in Inuit communities in Nunavut. Engaging the local community to actively participate in the various elements of the campaign and convey the TB messages contributed to the success of the program. The project had two phases. Phase 1 was an intensive community-wide TB awareness campaign which began with a press conference in mid-January and ended when the door to door campaign started. Phase 2 was a door to door education, screening, and treatment campaign targeting households in residential areas at high risk for TB. The project provides an effective model for raising awareness of TB and screening for latent TB infection in remote Inuit communities. Building on the success of this project, further studies regarding TB in Nunavut have been funded by the Canadian Institutes for Health Research.

**Program Highlights**

- YouTube video and TB messaging created by local Inuit and made available in English and Inuktitut
- 444 people received TB education in their homes
- 300 people were screened for latent TB infection in their homes
- 1/3 of those screened were recommended for latent TB infection treatment
- A total of 4 active TB cases were identified through the program
- The Quantiferon TB Gold In-Tube (Cellestis) Interferon Gamma Release Assay (QFT-IGRA) blood test for the diagnosis of LTBI was feasible under TAIMA TB program conditions in a remote area.
Key Messages Developed for the TAIMA TB Project
The Five Things You Need to Know About TB

1. TB is treated here in Nunavut and is curable.
2. People who are sick with active TB disease can have chronic cough, weight loss, night sweats or fever.
3. You may be able to infect other people if you have active TB disease in your lungs because TB spreads through the air.
4. If you are close with someone who has active TB disease, you can become infected with TB germs and develop sleeping TB infection.
5. People with sleeping TB infection are not contagious and can be treated with medication in Nunavut to prevent getting sick with active disease.

Taima TB partners

- Ottawa Hospital Research Institute (OHRI)
- Government of Nunavut (GN)
- Nunavut Tunngavik Inc. (NTI)
- Inuit Tapiriit Kanatami (ITK)
- New Brunswick Lung Association (NBLA)
- National Aboriginal Health Organization (NAHO)
Goal Area 3
Policy, Partnerships and Community/Systems Support

Goal: Develop, implement and strengthen the support structures essential to an effective respiratory health management strategy for all sectors, including policy and legislation, partnerships, community supports and health care system design and delivery.

Lung Health Stakeholders have been very active developing strategic partnerships to address and improve lung health in Canada. By working together, advances have been made in many of the strategies and activities identified in this goal area.

Link to NLHF Strategy
3.1: Advocate for healthy public policies and enforcement resources to prevent respiratory disease and improve respiratory health

On Tobacco Control
Lung health stakeholders advocated for and supported new regulations requiring enlarged, more graphic and strongly worded warning labels on packages of cigarettes and other tobacco products.

On Air Quality
A collaborative of NGO’s, industrial stakeholders and Federal/Provincial and Territorial governments worked together to make recommendations for a new national Air Quality Management System that will:
1) set standards for major ambient air pollutants, beginning with fine particulate matter and ground-level ozone,
2) limit industrial emissions of major air pollutants and ensure good environmental performance for all major industrial facilities, and
3) establish a robust system of local air management with regional coordination across Canada.

Federal, provincial and territorial Environment Ministers agreed to endorse and implement a new system to improve air quality nationally on October 11, 2012, bringing Canadians one step closer to clean air.
3.5: Create a widely accessible structure that addresses the need to share and access information resources for respiratory health stakeholders.

National Lung Health Framework: Tools and Resources

» The establishment of a National Lung Health Framework website www.lunghealthframework.ca provides a common place for lung health stakeholders to share and access information on lung health initiatives.

» Respiratory Resources Canada, a searchable data base, provides information on current and past respiratory programs and initiatives found across Canada in both French and English.

» The Respiratory Health in Canada Mapping Tool provides key lung health statistics for each Canadian province and territory (as available) in an easy-to-understand visual format citing data from the Canadian Health Measures Survey.

» The Lung Researchers Network is a free and easy to use professional networking site that brings the Canadian respiratory research community together and fosters relationships between respiratory researchers in Canada.

» Inspiration Newsletter, quarterly e-newsletters were circulated to a distribution list of over 500 respiratory health stakeholders, highlighting current events and accomplishments in the respiratory health sector.

Disparities in poor and Aboriginal children’s lung health outcomes persist despite advances in medical technology and increased global wealth. The social and economic impact of not continuing to reduce the impact of chronic lung conditions like asthma and COPD can be devastating to individuals, communities and our Canadian society. But, the National Lung Health Framework is beginning to take such action to ensure all Canadians can breathe.

“This is the first time a comprehensive national action plan has been developed. Across the country, the National Lung Health Framework is in the early stages of implementation. The collaborative efforts of researchers, policy makers, policy influencers, health professionals, and people with respiratory conditions have resulted in real progress towards developing practical approaches that are reducing the impact of risk factors on respiratory conditions and improving the lung health of Canadians.”

—Miriam J Stewart, Professor, Faculty of Nursing and School of Public Health
Goal Area 4
Research, Surveillance and Knowledge Translation

Goal: Drive effective prevention and management of respiratory disease and its risk factors, through enhanced, coordinated research and surveillance efforts that are then translated into both improved health outcomes and economic benefits.

Link to NLHF Strategies
4.1: Increase funding for respiratory health research and knowledge translation towards disease prevention, detection, management, and cure
4.2: Increase respiratory research capacity

Initial funding provided by the Public Health Agency of Canada through the National Lung Health Framework (NLHF) brought together the respiratory research community to identify key priorities for lung health research to be included in the national blueprint for action.

The NLHF process galvanized the research community to subsequently develop a national respiratory research strategy that outlined three areas of activity:

- **Support for People**: Development of a training and mentoring program,
- **Support for Research Programs**: Enhancing National Granting Program, Engaging in multi-stakeholder strategic initiatives, and,
- **Support for Networks and Integrated Knowledge Translation**: Formalizing respiratory research networks, facilitating integrated knowledge translation and provider and patient education programs.

The Canadian Lung Association and the Canadian Thoracic Society are leading the ongoing efforts under this goal area and will initially focus on the following strategic priorities:

**Building capacity through The RENASCENT program**
The Respiratory National Scientist Core Education and Training Program (RENASCENT) will promote interdisciplinary research and professional skills development, offer effective mentoring, foster the development of networking and team building skills, and support trainees and new investigators at transition points in career development. The program will direct its efforts to supporting trainees across all four Canadian Institutes of Health Research (CIHR) pillars of clinician- and non-clinician researchers at the graduate, postdoctoral and new investigator level.

**Establishing The Canadian Respiratory Research Network (CRRN)**
The CRRN will bring together researchers and research platforms to facilitate innovative and collaborative research in respiratory health. The goals are to integrate research efforts to produce findings that improve our understanding of the origins and progression of the two most common lung diseases in Canada—asthma and COPD. The CRRN will eventually provide platforms and infrastructure for future networked projects that will focus on other lung diseases. The CRRN will also translate and apply research results in order to reduce the economic and health burden of respiratory diseases. It will strengthen alliances and networking opportunities with national, provincial and international partners, and it will include early career support for young investigators, while enhancing collaborations with Canadian institutions.
Employing marketing, communication and funds development strategies to enable ongoing research and knowledge translation

Directed and effective marketing, communication and fund development strategies will be implemented to sustain the work of the respiratory research community, ensuring that new and innovative programs can emerge and that key findings are leveraged, shared and integrated into practice.

4.3: Improve surveillance of respiratory health and measurement of health outcomes as part of a broader, comprehensive disease surveillance system

PRESTINE Project

The PRESTINE project—Pan-Canadian Respiratory Standards Initiative for Electronic Health Records—is identifying, validating and standardizing respiratory health data elements and data definitions for entry and use in the Pan-Canadian electronic medical records (EMR). By proactively meeting the needs of health care providers, administrators, researchers and policy makers, these standards facilitate evidence-based clinical care, monitoring, surveillance, benchmarking and policy development. The focus initially includes asthma and chronic obstructive pulmonary disease, as well as pulmonary function and tobacco standards that are applicable to many respiratory conditions. The project is aligning with other healthcare administrators and providers to share best practices and facilitate the adoption of the standards by various end-users.

4.4: Effectively translate respiratory health research findings into knowledge, best practices, policies and programs for a range of audiences, including the public, industry, healthcare providers, policy makers and funders

Dissemination of Clinical Practice Guidelines

One of the key goals of the Framework is the development and translation of evidence into consistent benchmarks, standards, guidelines and best practices in prevention and management of respiratory disease. The Framework provided support for the development of a set of resources to increase the uptake of respiratory clinical practice guidelines into primary care. As a result, professional associations have increased capacity to support health care providers in integrating national standards into their patient care.
A Collective Solution
Through collective engagement, stakeholders developed an innovative model that:

- fosters better understanding of the respiratory health environment,
- builds on, promotes and supports partnerships and collaboration,
- develops a flexible, responsive model to meet target population needs,
- supports systemic change in health care delivery and new investment into research, and,
- builds a non-prescriptive action plan to achieve the Framework’s vision.

Starting the Conversation
The National Lung Health Framework is an effective tool for initiating conversations and action plans on lung health. Across the country lung health stakeholders are referencing the NLHF plan for action as a seminal document that has inspired further action within specific disciplines, jurisdictions and professional groups.

The following initiatives provide examples of various ways that preliminary work in developing the National Lung Health Framework is inspiring future and sustained action in lung health.

First Nations, Inuit and Métis Core Planning Group on the National Lung Health Framework
This joint effort by the Assembly of First Nations, Inuit Tapiriit Kanatami and the Métis National Council, the Public Health Agency of Canada and the First Nations Inuit Health Branch—Health Canada, addresses the historic, social, economic, environmental and cultural determinants that are driving disproportionate respiratory disease rates among Aboriginal Peoples. This group has been using the Framework to engage respiratory health stakeholders in dialogue regarding the promotion of lung health, and the challenges and solutions to understanding, preventing and managing respiratory disease among First Nations, Inuit and Métis.

Core Planning Group 2011 Roadmap

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<thead>
<tr>
<th>Areas of Focus</th>
<th>CPG Roles</th>
<th>2011 Potential Opportunities</th>
</tr>
</thead>
<tbody>
<tr>
<td>COPD and Lung Cancer</td>
<td>Expertise</td>
<td>NLHF: Applying results of Phase I and II projects</td>
</tr>
<tr>
<td>Smoking Cessation</td>
<td>Advocacy</td>
<td>NLHF: Respiratory resources centre</td>
</tr>
<tr>
<td>Social determinants of health, as linked to lung health outcomes</td>
<td>Collaboration</td>
<td>NLHF: Preparing for 2012 and beyond</td>
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<td>NLHF: Partnships with Framework (e.g.— PRESTINE Project)</td>
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<td></td>
<td>NLHF: Research agenda, partnership with IAPH</td>
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<td>NLHF: Provincial strategies</td>
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<td>PHAC and FNIHB: Share information on existing and planned projects and assess opportunities</td>
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Establishing an Ontario Lung Health Alliance

The activities identified by the National Lung Health Framework provided a catalyst for the Lung Association of Ontario to develop a report entitled *Your Lungs, Your Life* which provided a life and economic burden report on the current and future state of lung health in Ontario. The report highlighted four key interventions in lung health that when implemented would have a significant impact on lung disease.

The interventions evaluated in this study included:

- Smoking cessation: Helping Ontarians quit smoking (to prevent COPD and lung cancer and reduce asthma problems)
- Comprehensive primary care model: Managing asthma and COPD with care and education
- Accurate diagnosis through spirometry: Early screening for COPD
- Pulmonary rehabilitation: Improving quality of life after a COPD diagnosis

In response to the release of the *Your Lungs, Your Life* report, stakeholders in Ontario convened to establish the Ontario Lung Health Alliance that would oversee the development and implementation of an Ontario specific Lung Health Action Plan. The group has developed a comprehensive advocacy campaign to raise awareness on the need for an Ontario focused Lung Health Action Plan. The Breathers United campaign aims to remind people how important breathing is and that everyone in Ontario should care about lung health—either to ensure they keep their lungs healthy, or to support people who may already have lung disease.

Alberta Breathes

This coalition of individuals and organizations has a shared interest in improving respiratory health in Alberta. Current provincial lung health action plans align with goals identified within the National Lung Health Framework blueprint for action. The coalition has identified the following areas of respiratory health as their priorities; building capacity for pulmonary rehabilitation (COPD), establishing widespread implementation of asthma education (asthma) and increasing access to diagnosis and effective treatment of obstructive sleep apnea (sleep apnea).

The vision for the Action Plan is a ‘made-in-Ontario’ approach that reflects the unique needs, circumstances and operating environment within the province, including building upon the significant existing infrastructure of knowledge and expertise across the province. Notwithstanding the need for a tailored Ontario-specific approach, the provincial strategy should and will reflect the National Lung Health Framework already in place.”

—National Lung Health Framework Strategic Planning Funds, Ontario Lung Association Report, March 31, 2011
Looking Forward
National Lung Health Framework Areas of Focus

In its initial stages, the National Lung Health Framework has; increased data and information on respiratory health, facilitated knowledge exchange, and built strong partnerships. As we move into the next phase of the Framework, the following focus areas are identified as priorities for continuing to advance lung health in Canada. Action in these areas will bring significant improvements in the prevention, diagnosis and treatment of lung disease.

Expediting the dissemination of best practices to improve the diagnosis and treatment of respiratory illnesses.

Goals:
- Facilitate the identification, evaluation and dissemination of best practices in the prevention, diagnosis and treatment of lung disease.
- Actively assist in the validation of best practices to prepare for their replication in diverse jurisdictions and circumstances across Canada.

Accelerating the early detection of lung illnesses, including asthma, lung cancer, sleep apnea, tuberculosis, and chronic obstructive pulmonary disease (COPD).

Goals:
- Develop opportunities for addressing undiagnosed disease in targeted chronic and infectious respiratory illnesses in Canada, including asthma, COPD, lung cancer, sleep apnea and tuberculosis through improved disease detection and diagnosis.
- Identify and implement effective strategies for awareness-building and early diagnosis in at-risk populations.
- Improve health outcomes and reduce the health and economic burden of targeted respiratory illnesses through earlier diagnosis.

Supporting action on air quality to reduce outdoor and indoor exposures of Canadians to hazardous pollutants.

Goals:
- Increase awareness among health professionals regarding the risks posed by air pollution to human health, and engage them in providing advice to patients on managing and mitigating the effects of poor air quality.
- Increase awareness among the general public, and in particular people with compromised respiratory health, of the potential impact of air pollution on their health, and augment the use of available tools (educational, medical) to reduce and manage adverse effects.
- Support innovative and effective approaches for reducing the impact of outdoor and indoor air pollution on the respiratory health of Canadians.

Reducing smoking rates significantly in at-risk populations, including First Nations, Inuit and Métis communities.

Goals:
- Encourage the development of innovative and effective smoking prevention and cessation efforts targeted at high risk populations by expanding on current best practices and working collaboratively with the concerned populations.
- Through collaboration with governments, First Nations, Inuit and Métis organizations, health organizations and non-governmental organizations, achieve a significant further reduction in smoking rates, particularly among youth and First Nations, Inuit and Métis communities.

Initial funding for a National Lung Health Framework Secretariat ended on March 31, 2012. As we move forward, the Lung Association will provide continued leadership and management for the National Lung Health Framework. Framework stakeholders will continue to utilize the Framework as a model to inform their own lung health action plans and initiatives, and as a platform for sharing information on lung health. It is our commitment to build on the momentum gained and to continue to promote and facilitate collaboration and innovation among the respiratory health community. We encourage you to be a part of the solution and make your mark in improving lung health in Canada.

To join our community and share information on lung health, contact:
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In Appreciation

As this phase of the National Lung Health Framework winds down, special thanks and recognition are given to the hundreds of lung health stakeholders, organizations and partners who have provided thoughts, inspiration, evidence and support in developing a National Lung Health Framework.

Hats off to:

- **The Public Health Agency of Canada** for providing the initial investment to see a National Lung Health Framework come to fruition.
- **The Canadian Lung Association** for initiating discussions on the development of the National Lung Health Framework and providing ongoing support to the initiative.
- **Members of the National Lung Health Framework Steering Committee and working group members (past and present)** for providing expert advice and oversight, setting direction and mobilizing the National Lung Health Framework.
- **National Lung Health Framework Secretariat** for providing the infrastructure and administrative support to Framework initiatives.
- **National Lung Health Stakeholders** for your enthusiasm and interest in creating a vision for excellent respiratory health for all Canadians.

Funding for this initiative has been provided by the Public Health Agency of Canada.